

EDDIE⁺

Researching Early Detection of
Deterioration in Elderly residents

WORKBOOK

INTRODUCTION TO EDDIE+ TRAINING SESSION

PERSONAL CARE WORKERS



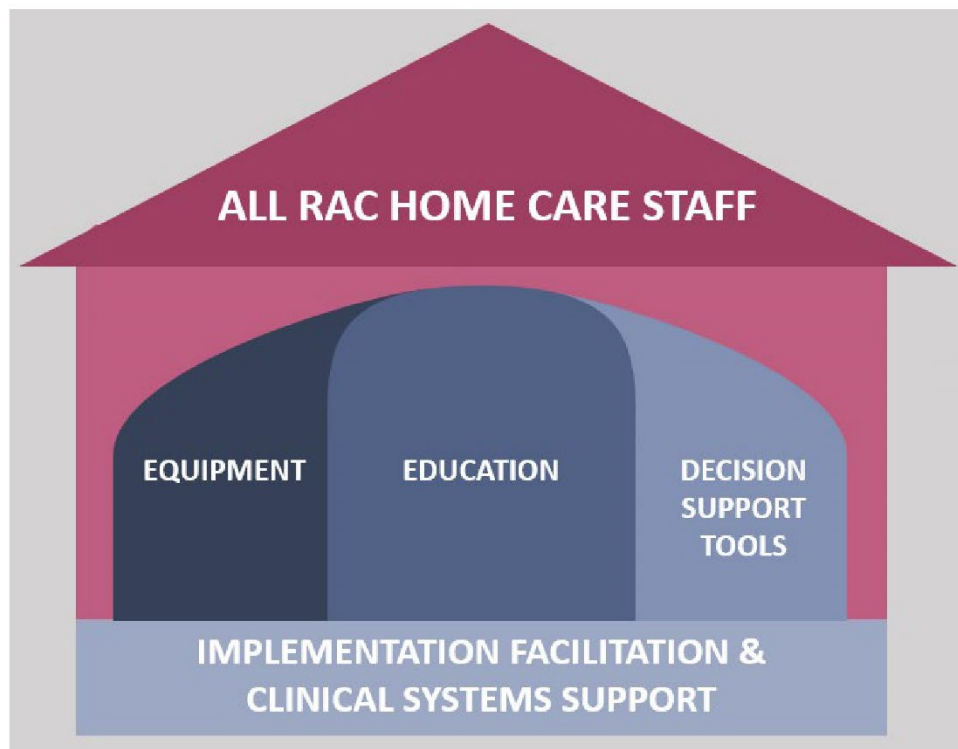
This material was originally developed by Queensland University of Technology as part of the Researching Early Detection of Deterioration in Elderly residents (EDDIE+) project, which was funded by the NHMRC MRFF 2019-2023. It can be used in line with the associated Creative Commons license.

April 2022

ABOUT EDDIE+

The EDDIE+ program is a research project that aims to upskill and support nursing and personal care staff to detect when a resident is in early stages of deterioration and to know what steps to take to best care for that resident. Researchers from the Australian Centre for Health Services Innovation (AusHSI) at the Queensland University of Technology (QUT) are working with participating Bolton Clarke Residential Aged Care (RAC) homes to introduce and run the EDDIE+ program. EDDIE+ is funded by the National Health and Medical Research Council, Medical Research Future Fund, Keeping Australians Out of Hospital Project Grant (GNT1177501).

THE EDDIE+ PROGRAM COMPONENTS



EQUIPMENT

- Bladder scanner and vital signs monitors
- Equipment training

EDUCATION

- Education sessions to upskill nursing and care staff
- Learning resources

DECISION SUPPORT TOOLS

- Communication tools
- Clinical decision-making guidelines, prompts and resources

IMPLEMENTATION FACILITATION & CLINICAL SYSTEMS SUPPORT

- On-site EDDIE+ Clinical Facilitator 1 day/week
- Ongoing support activities and resources
- Awareness raising and engagement activities


INTRODUCTORY SESSION



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PCW Education

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1

Acknowledgement of Country

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We acknowledge the First Nations owners of the lands on where we gather today and pay our respects to the Elders, their customs and creation spirits of this country.

For thousands of years, the First Nations owners have gathered to share their knowledge and stories.

We pay our respects to all Aboriginal and Torres Strait Islander peoples and acknowledge the important role they play within our communities.

We recognise their long and continuing connection to country, the lands, winds and waters throughout Australia.

We recognise that these lands have always been places of teaching, researching and learning.

2

Learning outcomes

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Aged Care Quality Standards

1	2	3	4	5	6	7	8
✓	✓	✓	✓	✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓	✓
✓	✓	✓	✓	✓	✓	✓	✓

1. Identify risk factors for deterioration in residents
2. Recognise early changes in a resident's physical, mental and cognitive status
3. Understand the importance of reporting early signs of deterioration in residents
4. Understand the processes and tools to report early signs of resident deterioration

3

Keeping residents in the home

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Hospitalisation can lead to:

- Increased risk of delirium, immobility, infection, drug reactions, falls and pressure areas
- Loss of independence related to an unfamiliar setting
- Deconditioning (malnutrition, dehydration, sarcopenia)
- Physical, emotional, social and mental distress
- Worse or extended illness, delayed recovery
- Decreased quality of life and shortened life span

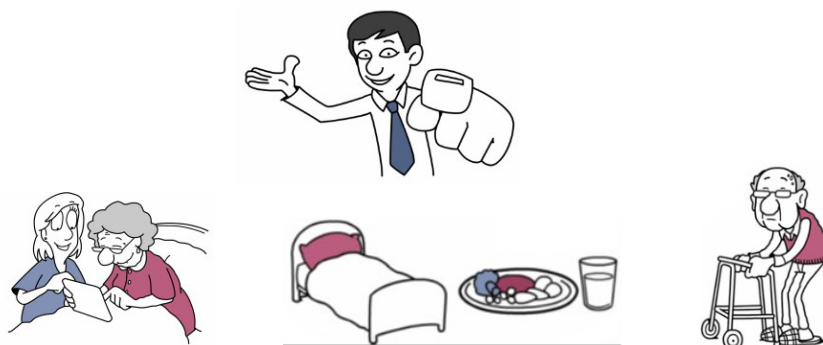


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Why PCWs?

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BECAUSE YOU spend more time than anyone else with the resident



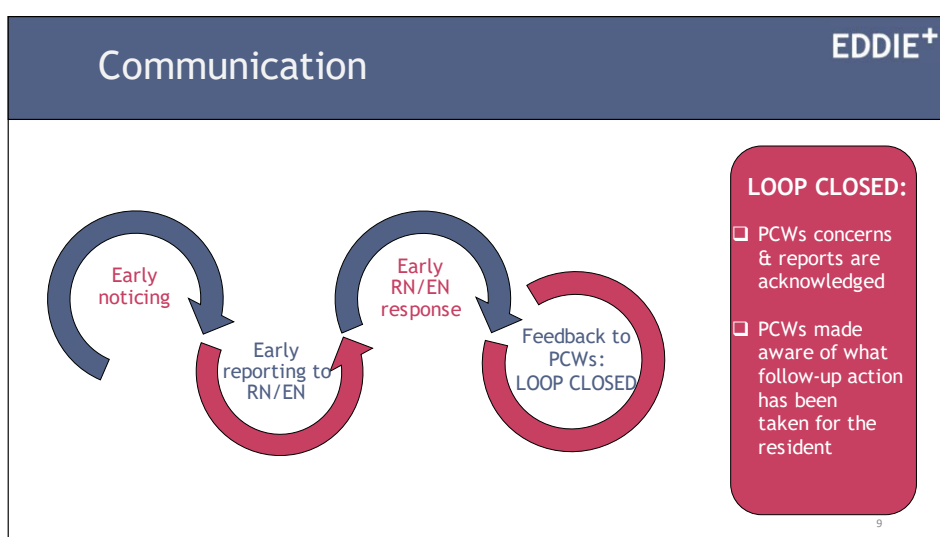
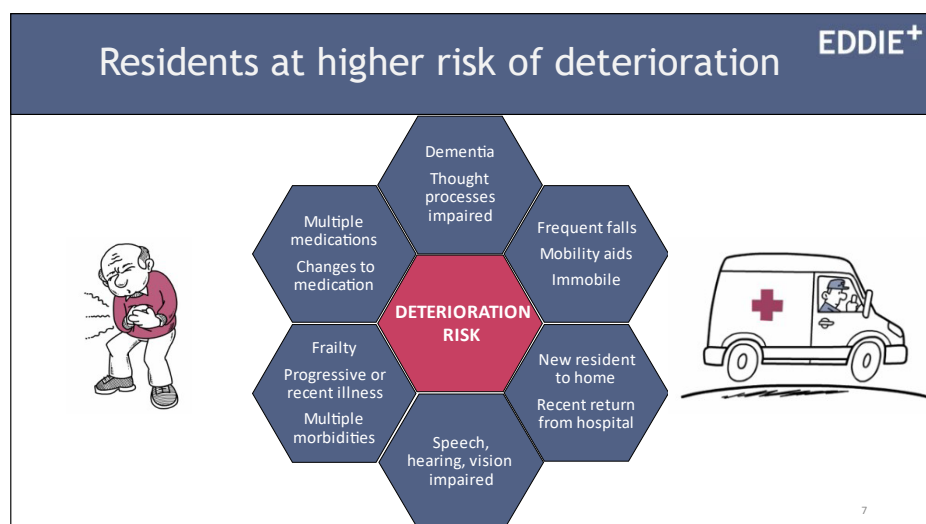
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Noticing changes

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Deteriorating resident case

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Edwina is 85 years old with a history of osteoarthritis, cardiac failure and mild stroke. She wears glasses and a hearing aid. Edwina is cognitive, but forgetful at times. She walks with a wheelee walker and requires assistance with toileting. She is frail and thin looking.

In the last 2 weeks she has had two witnessed falls not requiring hospitalisation. Her daughter has just mentioned to you that she is now refusing to eat.

- How might you know that Edwina is deteriorating?

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Early Detection of the Deteriorating Resident



DELIRIUM



UTIs



CHEST PAIN



CONSTIPATION



DYSPNOEA



FALLS



DEHYDRATION



PALLIATIVE CARE

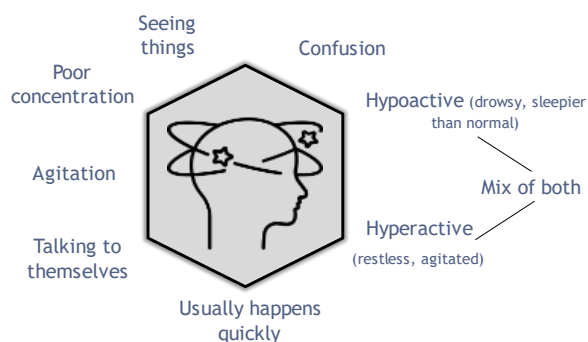
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Delirium

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What does delirium look like?



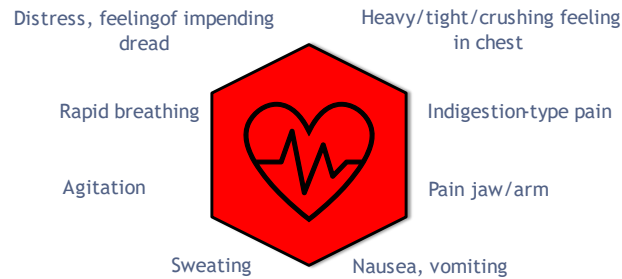
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Chest pain

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How can you tell if someone has chest pain?



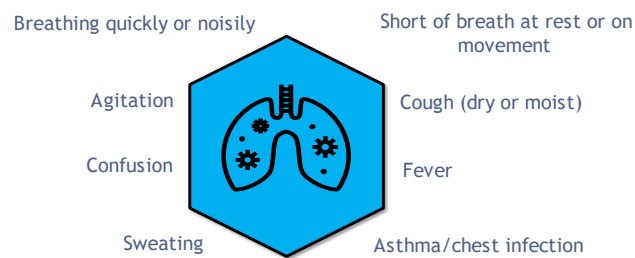
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Dyspnoea (Difficulty breathing)

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Does the resident's breathing look right?



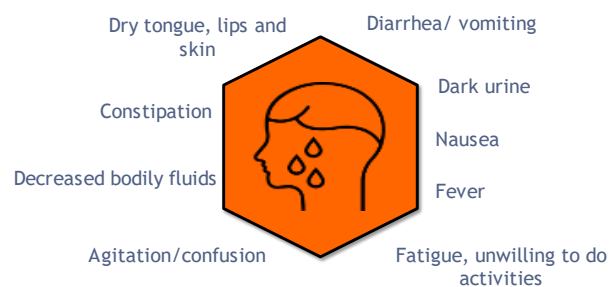
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Dehydration

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Is the resident lacking fluids?



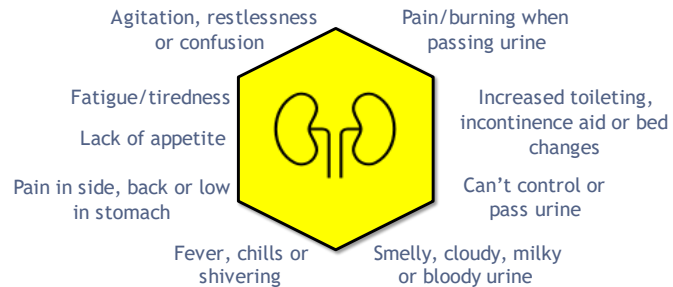
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UTIs

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Could the resident have a urinary tract infection?



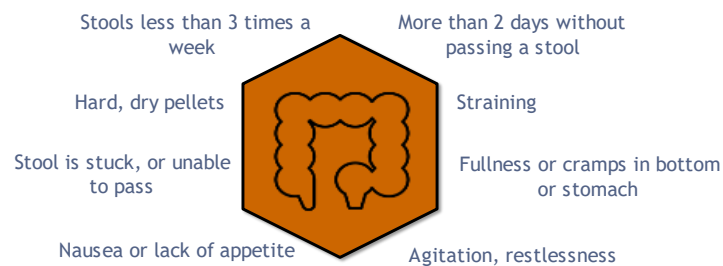
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Constipation

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Is the resident having trouble with toileting?



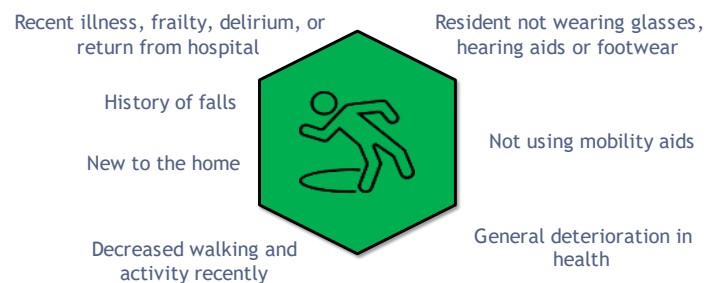
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Falls

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Is the resident unsteady?



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Palliative Care

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Is the resident getting more frail, showing discomfort?



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Communication tools

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CUS

I am **C**oncerned about...

I feel **U**ncomfortable because...

This is a **S**erious/**S**afety issue, can you please...



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Deteriorating resident case study

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Edwina is 85 years old with a history of osteoarthritis, cardiac failure and mild stroke. She wears glasses and a hearing aid. Edwina is cognitive, but forgetful at times. She walks with a wheelie walker and requires assistance with toileting. She is frail and thin looking.

In the last 2 weeks she has had two witnessed falls not requiring hospitalisation. Her daughter has just mentioned to you that she is now refusing to eat.

- How would you use 'CUS' to report Edwina's deterioration?

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- How would you use 'CUS' to report Edwina's deterioration?

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After reporting

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Continue to observe
& support the
resident



Maintain resident
safety



Check in with RN/EN &
report further changes



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Remember

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- **YOU** spend more time than anyone else with the resident, and what you notice matters
- Report early using CUS to EN/RN
- EDDIE + intervention to support early noticing and response to resident changes

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This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. On the left side, there is a vertical margin line, creating a narrow left margin. The paper appears to be from a notebook or a standard writing pad.

RESOURCES

Key reference

Queensland Health (2019). Management of Acute Care Needs of RACF Residents: a suite of collaborative pathways for General Practitioners and Registered Nurses. Version 21.

<https://clinicalexcellence.qld.gov.au/improvement-exchange/management-acute-care-needs-racf-residents>

NOTES