

Care and comfort for our most vulnerable

Caring for some of the most vulnerable people in our community depends on the skill and compassion of the talented team who run the Delirium and Falls Unit (DAFU) at Redcliffe Hospital.

Many of the patients in the unit have dementia, which means they have had a deterioration in their ability to think and to look after themselves. There are a number of causes of this, but the most common are Alzheimer's disease and vascular dementia.

Redcliffe Hospital Director of Medicine and Older Persons Service, Dr Catherine Yelland, said the disease may affect memory, language, perception, personality and cognitive skills.

"Dementia has profound consequences for health and quality of life for people with the condition and also for their family and loved ones," she said.

The DAFU team is highly qualified to help these patients, with the help not just confined to those occupying beds, but to their family members who can be just as beneficial in the treatment and stability of the patient.

Dr Yelland said an example of the combined care offered to patients in the unit manifested late last year when patient Dave* was admitted to the unit after his symptoms of dementia progressed.

"While he was a complex patient, the nursing staff understood his background and his present needs. Every effort was taken to ensure his dignity and comfort. His restlessness and confusion were reduced as much as possible," Dr Yelland said.

"One of the most important aspects of the treatment of Dave and other patients with active delirium or dementia is familiarity.

"As health care staff in DAFU, we make an extra effort to discover the familiar things our patients enjoyed when they were well and try to introduce those aspects of their life into their hospital stay."

Part of that familiarisation involves talking with the families, wives and husbands to explore what might trigger happy memories.

Dave developed difficulty understanding speech and difficulty communicating verbally. He had trouble recognising familiar faces and everyday objects.



He did not always remember who his wife was, but staff recognised he retained a fondness for her when she visited.

His wife became an integral part of the DAFU 'family' to ensure quality of life for Dave. With her guidance, nursing staff danced with him, took him out into the garden and read to him from his favourite columns in the Redcliffe Herald, activities which Dave liked to do and which reduced some of his restlessness and confusion.

Dr Yelland said that understanding both the disease and the patient are the keys to providing quality patient-centred care and quality of life for patients like Dave.

"Every one of our staff in DAFU has training in occupational violence protection (OVP) which helps them to stay as safe as possible and to recognise when a patient may inadvertently act out at those trying to help.

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Recognising familiarity as a key to patients’ wellbeing in the early stages of dementia is likely to lead to a ‘Dementia in the Home’ program where patients remain at home in familiar surroundings with visits from DAFU staff who can support not only the patient, but the extended family in the community.

*Name has been changed for patient privacy

Right: DAFU nurses Karen and Renee play cards with a patient in the new activity room.