

Access to information about you

Tees, Esk and Wear Valleys NHS Foundation Trust is registered under the Data Protection Act 1998 to store and use personal information. We ask for information about you so you can receive proper care and treatment. We keep this information together with details of your care, because it may be needed if we see you again.

Everyone working in the NHS has a legal duty to keep information about you confidential. You can request the personal information we hold about you. To access your personal information, write to the Data Protection Officer, Information Governance Department, Lanchester Road Hospital, Lanchester Road, Durham City, DH1 5RD

Compliments, comments, concerns and complaints

Tees, Esk and Wear Valleys NHS Foundation Trust welcomes compliments, comments, concerns and complaints in order to ensure we continue to provide high quality care to you. You can highlight any comments or complaints with the professional delivering the care, or alternatively by contacting our Patient Advice and Liaison Service (PALS) Monday to Friday between 9am and 4pm by:

Freephone: 0800 052 0219

mobile: 07775 518086

e-mail: tevw.pals@nhs.net

If you have any concerns you may prefer to put them in writing to the Complaints team at Flatts Lane Centre, Flatts Lane, Normanby, Middlesbrough, TS6 0SZ.

Information in other languages and formats

If you would like this leaflet in another language, large print, audio or Braille, please ask a member of staff.

This information was produced by Tees, Esk and Wear Valleys NHS Foundation Trust, a member organisation of the Information Standard scheme, using the Information Standard process.

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Teeswide liaison psychiatry service

Delirium

Information for service users, families and carers

making a

difference

together

Please do not hesitate to talk to us about any concerns you may have.

- **North Tees** liaison psychiatry service
01642 624318
- **South Tees** liaison psychiatry service
01642 838201

What will we do?

The liaison team is made up of mental health nurses, support workers, psychologists, a consultant psychiatrist and occupational therapists.

We will be working alongside the nurses and doctors on the ward to identify and treat the cause of the delirium, monitor progress and give advice on ways reduce the effects of the illness and keep the person comfortable and safe.

Occasionally people with delirium become distressed and may cause a risk to themselves or others. Medication is sometimes used to help calm people in these situations; it is only short term and will be closely monitored.

What happens next?

Although most people experience a full recovery from delirium, it may increase the risk of complications from other medical conditions, and may mean they need a longer hospital stay.

People who have had delirium are more likely to experience it again in the future when unwell. It is important to be aware of this and to be able to recognise the signs early and seek help accordingly.

Your relative or friend has recently been seen by the Liaison Mental Health Team in hospital and has been assessed and diagnosed with delirium.

What is delirium?

Delirium is sometimes called an 'acute confusional state', caused by a physical factor with psychiatric symptoms. It is a condition which develops quickly and results in a change in consciousness, attention and thinking, behaviour and perception. The level of confusion and disorientation can be changeable and it is commonly worse at night.

Delirium is usually temporary and is not a permanent condition although the symptoms may take a while to resolve. This is usually weeks but sometimes it can take several months in a person who has other health problems, a pre existing dementia or is over 65.

Causes of delirium

The specialist involved with your relative or friend will have explained to you their thoughts on why this delirium has developed.

In people over 65 years, delirium is commonly caused by: infections, breathing or heart problems, dehydration, taking a combination of medications or by stopping a medication.

Older people are more likely to develop a delirium if they are in hospital and if they already have a memory problem.

Signs and symptoms of delirium

A person with delirium may:

- seem unaware of their surroundings and not realise they are in hospital.
- be muddled about the day and the time.
- misunderstand the world around them and perhaps be able to see or hear things that are not real (hallucinations).
- have a disturbance to their sleep pattern and be excessively drowsy by day or wakeful and restless by night.
- have problems with speech or understanding what is being said to them.
- show agitation and restlessness which may at times lead to aggression when they are unable to communicate effectively.
- have feelings of worry, anxiety, fear, irritability or apathy.
- seem fine one day then confused again on another visit.

What can you do to help them?

To give your relative or friend the best chance of a quick recovery there are ways you can help when you visit. The following suggestions may help them stay orientated and feel secure during this difficult time.

- Make sure if they wear spectacles or hearing aids that they have them in hospital, working and are worn.
- A calm and reassuring approach when visiting would be beneficial, with familiar people to reduce the severity of confusion and stress.
- Avoid getting into arguments with the person, for example if they struggle to make sense of things.
- A familiar photograph close by and a clock or watch to help orientation.
- Books or magazines that the person would normally read may be handy to use as a distraction.
- Encourage them to drink fluids regularly (check first with staff). A supply of their favourite soft drink would be useful.
- Encourage the person to walk or move around from time to time, bearing in mind advice from physiotherapy and ward staff on what they are capable of.
- If you think your relative or friend is in pain or might be constipated please speak to a ward nurse.