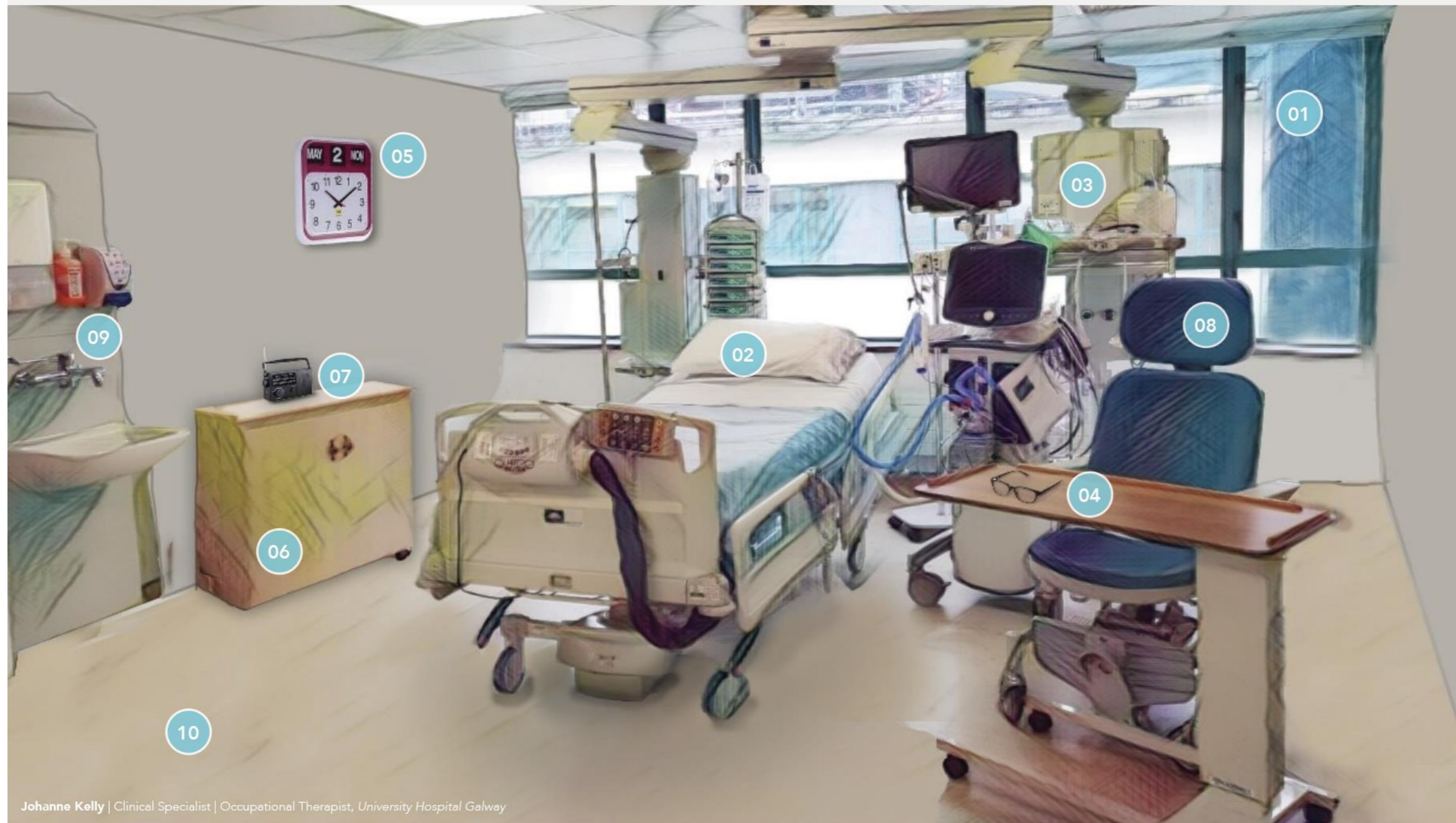


Non-pharmacological approaches to delirium prevention/management in ICU



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- 01 Daylight Exposure
- 02 Sleep Hygiene (Sleep/Wake Cycle)
- 03 Noise
- 04 Sensory
- 05 Orientation
- 06 Familiar/Personal items
- 07 Cognitive Stimulation
- 08 Early Mobilisation
- 09 Daily Routines/Meaningful ADLS
- 10 Family/Carer Involvement

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1 Daylight Exposure:

- Bed/chair to face window.
- Use artificial light to enhance circadian rhythm.
- Open blinds/curtains
- Avoid darkness during the day.
- Is there access to outdoors/garden for natural daylight?

2 Sleep Hygiene/ Sleep Wake Cycle:

- Lights to be dimmed, blinds down/curtains closed.
- Sleep promotion-eye masks/ear plugs.
- Night-time routine- quiet time.
- Relaxation techniques.
- Clustered care to avoid disturbing patients sleep

3 Noise

- Optimise alarm control/modifications.
- Protect quiet time.
- Consider soft/healing background music.
- Limit bedside conversations.
- Close doors.
- Use noise cancelling headphones/ear plugs.

4 Sensory

- Does the patient wear glasses/hearing aids?
- Offer support for the senses e.g. magnifying aid, amplifying headphones.
- Play patients favourite music.
- Use patients own familiar scents/personal care items.
- Family/carers can support with tactile stimulation and therapeutic use of touch.

5 Orientation

- Is a clock/calendar clearly visible to the patient?
- Re-orientate patient to person/time/place throughout the day.
- Explain reason for admission and current location/surroundings.
- Explain to patient the equipment, attachments, alarms.

6 Familiar Items/Personal items

- Access to personal items- favourite perfume/aftershave.
- Personalise the bedside with photographs of family/friends.
- Use a patient profile/passport, 'all about me' templates at bedside.

7 Cognitive Stimulation:

- Listen to the radio/favourite music.
- Watch their favourite TV programme/film
- Read newspaper/puzzles/crosswords.
- Stimulating conversations e.g. news, patients interests.

8 Early Mobilisation:

- Passive/active range of movements.
- In-bed and out- of- bed exercises.
- Patient sitting out in chair
- Patient participating in bed mobility.
- Encourage/support patient with activities of daily living (ADLS).

9 Daily Routines/Meaningful ADLS

- Can they wear some of their own personal items?
- Can the patient participate in personal care-brush teeth/hair, wash face
- Routines can help orientate patient to the time of day.

10 Family/Carer Involvement:

- Encourage family/carers visits.
- Support with video links, telephone calls.
- Can family send WhatsApp voice notes to patient?
- Family support with orientating patient to their surroundings