

The research reported on this poster was supported by Thomas Jefferson University. The investigators retained full independence in the conduct of this research.

Background

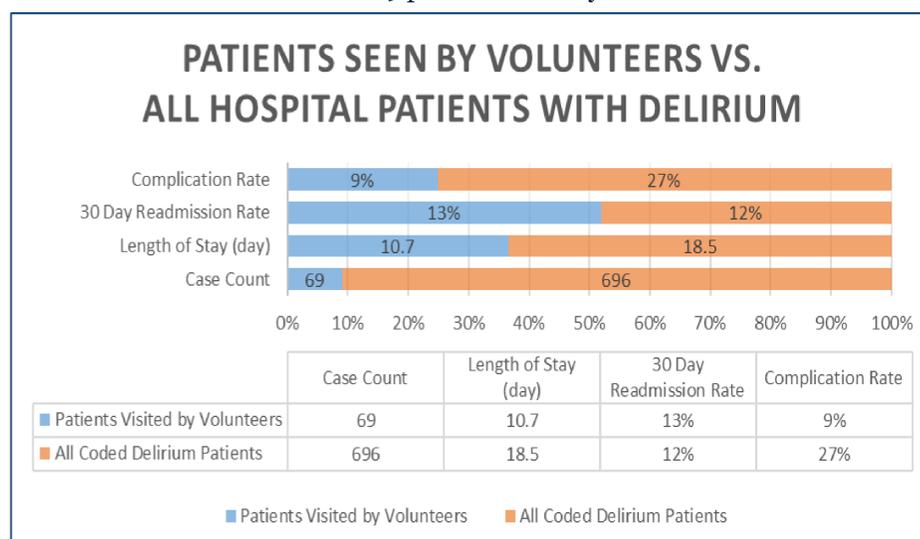
- Hospital Elder Life Program (HELP)¹: a multi-faceted, volunteer-led, hospital-based program has been shown to:
 - Reduce the incidence of delirium
 - Decrease length of stay
 - Reduce hospital costs
- Implementation of such a program requires upfront investment.
- A smaller, volunteer-based visitation program for older adults was started to provide support for the allocation of hospital resources in delirium prevention and establishment of HELP in this institution.
- This research aims to investigate the program's implementation and impact on delirium specific outcomes.

Methods

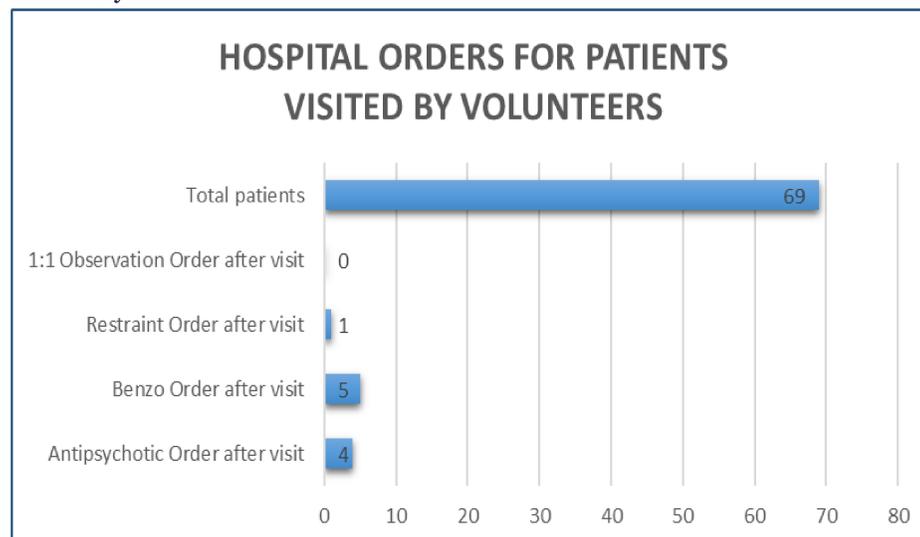
- This was a multi-method study that included analysis of volunteer questionnaires and a chart review of patients seen by volunteers.
- Analysis of volunteer questionnaires:
 - Volunteers were trained to complete structured activities based on HELP.
 - Patients were referred by unit nurses and physicians.
 - Volunteers completed a written questionnaire about each patient visit.
 - Data from the questionnaires were compiled, including quantitative and qualitative measures.
 - Data were collected from 11/13/17 to 11/18/18.
- Chart review of patients seen by volunteers:
 - A list of 69 patients identified by the volunteer questionnaires were selected.
 - A chart review was done examining the following variables that were picked as markers for delirium:
 - Antipsychotic order after the volunteer visit
 - Benzodiazepine order after the volunteer visit
 - Restraint order after the volunteer visit
 - 1:1 Observation order after the volunteer visit
 - A cohort of 696 patients hospitalized during a similar period with a diagnosis of delirium and not seen by the volunteers was identified for comparison.
 - The following outcomes were compared:
 - Length of stay
 - 30 day readmission rate
 - Complication rate

Results

- 56 volunteers were trained.
- A total of 1157 visits attempted, 1033 completed.
- 15% of patients were seen more than once.
- 78% of attempted visits were less than 30 minutes.
- Orientation and conversation-based activities accounted for 67% of activities performed.
- Patient demographics:
 - Average age: 72 years
 - 81% of patients were older than 65 years
- Rate of delirium for the 69 patients seen by volunteers: zero



This table compares the outcomes of patients with delirium to those seen by volunteers.



This table shows hospital orders for the 69 patients after they were seen by volunteers. The orders selected serve as markers for delirium. These results are a baseline for comparison in the future.

Limitations

- Small sample size.
- Cohort group was not adjusted for age and comorbidities.
- Incomplete data set.

Conclusion

- Comparing hospitalized patients with delirium to patients seen by the volunteers, the patients seen by volunteers had:
 - Shorter length of stay
 - Fewer complications
 - Nearly the same percentage of 30 day readmission rates
- For patients seen by volunteers, there was a low rate of orders commonly associated with delirium and no patients developed delirium after the volunteer visit.
- This research provides ongoing evidence that it is feasible to implement a volunteer-based visitation program at our hospital and outcomes suggest a positive impact on hospital delirium.
- Data trends indicate that important health outcomes were influenced by the intervention.
- This research would benefit from a prospective study to further investigate the effects of the program.
- Future efforts would be to utilize data to support program expansion.

References

1. Inouye SK, et al. The Hospital Elder Life Program: a model of care to prevent cognitive and functional decline in older hospitalized patients. *J Am Geriatr Soc.* 2000;48:1697-1706.
2. Marcantonio E. Delirium in Hospitalized Older Adults. *N Engl J Med.* 2017;377:1456-66.
3. Hospital Elder Life Program (HELP) for Prevention of Delirium. Website. Available at: <http://www.hospitalelderlifeprogram.org>.