Delirium clinical care standard indicators: 5c-Proportion of patients with delirium who have had a fall or a pressure injury during their hospital stay

Exported from METEOR

(AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website’s material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at https://creativecommons.org/licenses/by/4.0/.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

# Delirium clinical care standard indicators: 5c-Proportion of patients with delirium who have had a fall or a pressure injury during their hospital stay

|  |
| --- |
| Identifying and definitional attributes |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | Indicator 5c-Proportion of patients with delirium who have had a fall or a pressure injury during their hospital stay |
| METEOR identifier: | 628108 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 12/09/2016 |
| Description: | Proportion of patients with [**delirium**](https://meteor.aihw.gov.au/content/628579)who have had a fall or a pressure injury during their hospital stay. |
| Rationale: | Patients with delirium are at greater risk of adverse events, including falls (Travers et al. 2013; Inouye et al. 2014; Maher & Almeida 2002) and pressure injuries (Inouye et al. 2014; Maher & Almeida 2002). |
| Indicator set: | [Clinical care standard indicators: delirium](https://meteor.aihw.gov.au/content/613164)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 12/09/2016 |
| Outcome area: | [Preventing falls and pressure injuries](https://meteor.aihw.gov.au/content/624405)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 12/09/2016 |

|  |
| --- |
| Collection and usage attributes |
| Computation description: | The numerator includes patients with delirium who have had a fall and/or a pressure injury recorded in the hospital’s incident reporting and management system.Only count Stage II, III or IV pressure injuries, or unstageable, or suspected deep tissue injury (NPUAP & EPUAP 2009; Australian Wound Management Association 2012):* Stage II pressure injury: partial thickness skin loss (partial thickness loss of dermis presenting as a shallow open ulcer with a red pink wound bed, with slough).
* Stage III pressure injury: full thickness skin loss (subcutaneous fat may be visible but bone, tendon or muscle are not fully exposed).
* Stage IV pressure injury: full thickness tissue loss (full thickness tissue loss with exposed bone, tendon or muscle)
* Suspected deep tissue injury: depth unknown (purple or maroon localised area or discoloured, intact skin or blood-filled blister due to damage of underlying soft tissue from pressure and/or shear).
* Unstageable pressure injury: depth unknown (full thickness tissue loss in which the base of the pressure injury is covered by slough (yellow, tan, grey, green or brown) and/or eschar (tan, brown or black) in the presuure injury bed).

Only count falls and/or pressure injuries noted as occurring during the hospital stay.All patients with delirium are included in both the numerator and the denominator, not only those where [Hospital service—care type, code N[N]](https://meteor.aihw.gov.au/content/584408) = 1 Acute care. Presented as a percentage. |
| Computation: | (Numerator ÷ denominator) x 100 |
| Numerator: | Number of patients with delirium who have had a fall or a pressure injury during their hospital stay. |
| Denominator: | Number of patients with delirium. |
| Comments: | This indicator has been sourced from the *Key principles for care of confused hospitalised older persons*(ACI 2014). |
| Representational attributes |
| Representation class: | Percentage |
| Data type: | Real |
| Unit of measure: | Person |
| Format: | N[NN] |
| Source and reference attributes |
| Submitting organisation: | Australian Commission on Safety and Quality in Health Care |
| Reference documents: | ACI (Agency for Clinical Innovation) 2014. Key Principles for care of confused hospitalised older persons. Sydney: ACI.Australian Wound Management Association 2012. Pan Pacific clinical practice guideline for the prevention and management of pressure injury, WA: Cambridge Media. Viewed 7 August 2016,<http://www.awma.com.au/publications/2012_AWMA_Pan_Pacific_Guidelines.pdf>.Inouye S, Westendorp R & Saczynski J 2014. Delirium in elderly people. The Lancet. 383(9920):911-22.Maher S & Almeida O 2002. Delirium in the elderly another medical emergency. Current Therapeutics March 39-45.NPUAP (National Pressure Ulcer Advisory Panel) & EPUAP (European Pressure Ulcer Advisory Panel) 2009. Prevention and treatment of pressure ulcers: clinical practice guideline. Washington DC: NPUAP.Travers C, Byrne G, Pachana N, Klein K & Gray L 2013. Delirium in Australian hospitals: a prospective study. Current Gerontology and Geriatrics Research 2013:284780. |