

NHSGGC #WDAD2023 Delirium Care Bingo Scorecard

Share a joke, make it a meaningful interaction	Support someone to drink when there for another reason	Teach a colleague or a student about delirium	Look at the bowel chart and take any necessary action	Review meds and reduce anticholinergic burden
Turn off unnecessary alarms or monitors	Help someone to be up and moving as soon as possible	Recognise and praise great delirium care given by a colleague	Assess pain using non verbal cues (consider Abbey Pain Tool)	Distract someone with distress by chatting about their loved ones
Give someone a delirium information leaflet	Update the 4AT when SQID is positive	Free Space	Use TIME checklist to prompt the right delirium care	Ensure someone who is sore but struggles to ask for analgesia has it prescribed regularly
Recognise delirium as a potential cause of a fall and check 4AT	Prevent someone from getting constipated	Ask a patient or relative to complete a Getting To Know Me form	Check for urinary retention if someone is agitated	Take time to give education about delirium to a relative
Show colleagues Delirium care is important in your area	Ask about What Matters To Me and write it on their board	Ask someone with delirium about worries or hallucinations then reassure	Use music to engage with someone	Improve sleep hygiene with non pharmacological measures

NHSGGC #WDAD2023 Delirium Care Bingo Calls

Number one, bring some fun. Share a joke, make it a meaningful interaction

It's number four, don't need these any more. Turn off unnecessary alarms and monitors

A one and a three, information is key. Give someone a delirium information leaflet

A one and a four, why on the floor? Recognise delirium as a potential cause of a fall and check 4AT

Sweet sixteen, priority for our team. Show colleagues delirium care is important in your area

Number twenty, is the water jug empty? Support someone to drink when there for another reason

All the two's, too much to loose. Help someone to be up and moving as soon as possible

Twenty three, remember 4AT. Update the 4AT when SQID is positive

Twenty eight, best not to wait. Prevent someone from getting constipated

Thirty three, What Matters to Me. Ask about What Matters to Me and write it on their board

Thirty eight, Delirium Update. Teach a colleague or student about delirium

A four and a zero, Delirium Hero. Recognise and praise great delirium care given by a colleague

Forty two, tell us about you. Ask a patient or relative to complete a Getting To Know Me form

A four and a six, is your mind playing tricks? Ask someone with delirium about worries or hallucinations then reassure

A five and a two, help for number twos? Look at the bowel chart and take any necessary action

Five and a four, could they be sore? Assess pain using non verbal cues, consider Abbey Pain Tool

Sixty two, you know what to do. Use TIME checklist to prompt the right delirium care

Sixty three, are they able to pee? Check for urinary retention if someone is agitated

Six and a five, tonight playing live... Use music to engage with someone

Seven and zero, these meds need to go. Review meds and reduce anticholinergic burden

Seventy one, how old is your son? Distract someone with distress by chatting about their loved ones

Seven and nine, get them on time. Ensure someone who is sore but struggles to ask for analgesia has it prescribed regularly

Eight and two, I'll explain it to you. Take time to give education about delirium to a relative

Two fat ladies, sleeping like babies. Improve sleep hygiene with non pharmacological measures