

# SCREENING & ASSESSMENT

**DELIRIUM, DEMENTIA & DEPRESSION**



**NICE**

National Initiative for the Care of the Elderly

Initiative nationale pour le soin des personnes âgées

*We care together*

*Ensemble pour le bien-être des aînés*

**DEMENTIA THEME TEAM**



Government of Canada

**Networks of Centres  
of Excellence**

### PRACTICE RECOMMENDATIONS

The following diagram outlines the flow of information and recommendations that are included in this guideline.

Adapted with permission from Registered Nurses Association of Ontario, Nursing Best Practice Guideline: Screening for Delirium, Dementia and Depression in Older Adults, November, 2003.

1. Family informant is defined as a person having had at least monthly contact with the older adult for at least three years.

**Routine Interprofessional Assessment**

1. Initiate client contact
2. Establish baseline data
3. Document mental status
4. Document behavioural presentations

*High Index of Suspicion*

Are there any behavioural or functional cues that reflect a change from baseline data?

No

Continue to provide nursing care

Yes

**Screening Assessment**

1. Determine Screening Tools
  - 1.2 Assess DECO with family informant
2. Review Table for Differentiation
3. Document

Delirium?

Dementia?

Depression?

Yes

Urgent medical referral

Assess DECO with family informant

Yes

Suicidal ideation or intent?

Yes

Urgent medical referral

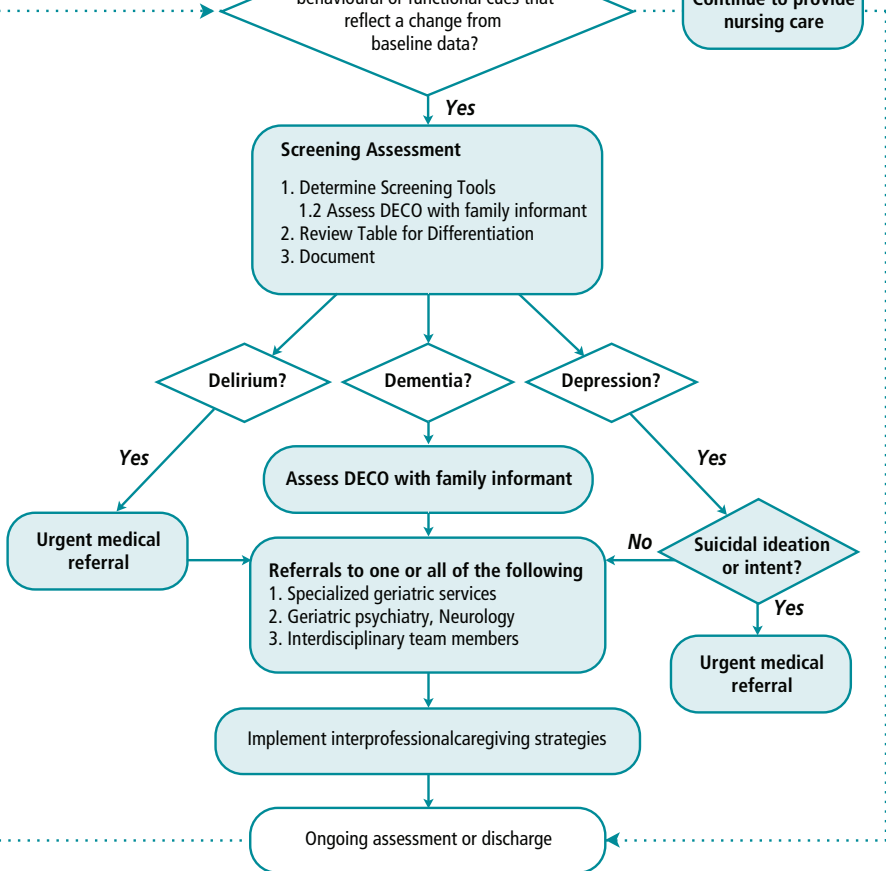
No

Referrals to one or all of the following

1. Specialized geriatric services
2. Geriatric psychiatry, Neurology
3. Interdisciplinary team members

Implement interprofessional caregiving strategies

Ongoing assessment or discharge



### Deterioration Cognitive Observee (DECO)

The DECO questionnaire is to be completed by a person, such as a family member, who has had at least monthly contact with the client for the last 3 years.

A. Instruct the person who is completing the form to:

- » Consider how their relative was a year ago. Explain that the questions they are answering relate to everyday situations – the decisions are based on what they know about the person who is suspected of having an illness that has affected how the person is thinking and behaving.
- » Direct the person filling out the form to indicate their answers as either: Better or about the same (2), Not as well (1), Much worse (0).

B. Scoring the form:

- » The total score may range from 0 (indicates considerable change) to 38 (indicates no change). A score of less than 30 indicates high likelihood of dementia and warrants further investigation and referral.



**NICE**

National Initiative for the Care of the Elderly

Initiative nationale pour le soin des personnes âgées

*We care together*

*Ensemble pour le bien-être des aînés*

National Initiative for the Care of the Elderly  
222 College Street, Suite 106, Toronto, Ontario M5T 3J1  
Tel: 416-978-2197 • Website: [www.nicenet.ca](http://www.nicenet.ca)