

Raising concerns with staff: the words to use

Delirium is missed more often than it is caught, and you know the person's normal self better than any member of staff. Raising a concern is not complaining; it is often how delirium gets noticed at all. Here are words you can use or adapt.

Three things that make staff act

- **Describe the change from normal, with times and examples.** "On Sunday she was doing the crossword; today she cannot follow a sentence."
- **Use the word delirium.** It is a medical term with actions attached, in a way that "confused" is not.
- **Ask a question that needs an answer.** "Could a doctor assess him for delirium now?"

PUTTING IT TOGETHER

"Dad is not himself. Yesterday he was chatting and joking; today he keeps asking where he is, and he is too drowsy to finish a meal. This came on quickly. I think it could be delirium. Could a doctor assess him now?"

Ask for a test by name

Hospitals use short bedside tests for delirium. If nothing seems to be happening: "Could someone do a delirium test, like the 4AT?"

Keep a short note

Write down what you see, with dates and times: "Tues 6pm, thought I was her sister. Weds 9pm, trying to pack." Your notes may be the only record of the pattern.

If it is put down to age or dementia

Both explanations fall apart on speed.

IF YOU HEAR "IT'S THE DEMENTIA"

"I know she has dementia, but this is not it. It changes over months; this came on between Tuesday and Thursday, and she is seeing cats that are not there. Could this be delirium on top of the dementia?"

IF YOU HEAR "IT'S JUST OLD AGE"

"Being 88 does not explain becoming this confused in two days. Last week he was doing his own shopping. I would like him assessed for delirium."

If you are not being heard

- Say it again. The same words sometimes land on the second attempt.
- Move one step up: the nurse in charge, or in a care home the senior carer or manager. Ask them to contact the doctor that day.
- Ask for it to be recorded: "Please write in the notes that I have raised a concern about possible delirium."
- If unusually sleepy but responsive, report it urgently. If hard to wake or barely responding, ask for an emergency clinical review; outside hospital, call the local emergency number (999 in the UK).

None of this is a complaint. Sleepiness needs raising as much as agitation, and persistence is not rudeness. Staff who know delirium value what families tell them.