

Team-Based Learning for Delirium Prevention and Detection: An Educational Proposal for Expert Nurses

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Introduction. Delirium affects 18–35% of hospitalized older adults and remains unrecognized in up to 60% of cases, especially in its hypoactive form. Multicomponent non-pharmacological interventions reduce incidence by 43–53% but require specific staff training. TBL is a structured active-learning strategy, comprising individual and group readiness assurance tests and application exercises, promoting accountability, engagement, collaborative skills, and theory-to-practice transfer.

Methods. A pre-post intervention is proposed for experienced nurses in acute medical wards. Three sequential TBL sessions will address: delirium pathophysiology and risk factors, validated screening tools (CAM, CAM-ICU, ICDSC), and non-pharmacological management. Outcomes include knowledge (Delirium Knowledge Questionnaire, pre/post), protocol adherence (audit at 1 and 3 months), and self-efficacy (Likert scale)

Results. TBL is hypothesized to improve delirium knowledge, increase screening adherence, and enhance nurses' perceived competence and accountability, outperforming lecture-based training in bedside knowledge transfer.

Discussion. TBL is a promising strategy to overcome implementation barriers of delirium protocols by targeting knowledge, attitudes, and team culture simultaneously. The proposal is amenable to empirical evaluation and potential multiprofessional extension.

Keywords: Education, Nursing Education, Delirium, Team-Based Learning

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