

I · C A R E



INNOVATION



COMPASSIONATE



ACCOUNTABLE



RESPECTFUL



EXCELLENT



**Whittington Health**  
NHS Trust



# Dementia Strategy 2020 - 2022

At Whittington Health our mission is “helping local people live longer, healthier lives” and this strategy sets out how we aim to meet this intention for people living with dementia and applies to all services across our organisation. As an integrated care organisation (ICO) we deliver community services joined with hospital care to 500,000 people in Islington and Haringey as well as other London boroughs including Barnet, Enfield, Camden and Hackney.

This strategy follows an individual’s journey across community and the acute hospital setting. Our strategic objectives are outlined under four headings; Living Well, Caring Well, Dying Well, Supporting & Understanding Well and all lead to improved patient care and experience.

Dementia care can be challenging because an individual’s needs increase as time goes by and cross multiple health and social settings and care environments.

This means that dementia really is everybody’s business and meeting the challenge of delivering excellent dementia care requires a commitment and co-ordinated approach from the entire workforce.

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# What is Dementia

Dementia is an umbrella term that describes a number of conditions that affect the brain causing problems with memory, thinking, language, behaviour and the ability to carry out everyday tasks. All types of dementia are progressive in nature meaning that symptoms will worsen and a person's need for support will increase over time. However, with the right resources many people living with dementia lead active lives for years following a diagnosis.

There is an estimated 850,000 people living with dementia in the United Kingdom (one in six people over the age of 80). Mortality rates for Alzheimer's disease and other dementias have increased over the last decade. This is in contrast to the other top four leading causes of death – ischaemic heart diseases, cerebrovascular diseases, chronic lower respiratory diseases and lung cancer which have seen mortality rates falling over the last 15 years (Alzheimer's Research UK).

Although dementia is not an inevitable part of ageing, increasing age is the main risk factor. Despite this, younger people can also be affected and there is an estimated 42,000 people under the age of 65 living with dementia in the UK.

## **Why this matters**

Lack of awareness and understanding of the challenges faced by a person living with dementia can result in stigmatisation and barriers to accessing support leading to worse health outcomes and poorer quality of life compared to those who are not.

Despite increased prevalence of dementia there is still work to be done around identification and recognition. Routinely screening for new cognitive impairment and linking people and those who support them in with appropriate services enables them to access the help they need and make informed decisions about their future.

We recognise that across the Trust there are already pockets of excellence in dementia care and through the implementation of this strategy across our entire organisation the aim is to reduce variability and continually develop and improve our services.



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A healthcare worker in a light blue uniform is attending to a patient lying in a hospital bed. The patient is smiling and looking up at the worker. The background shows a typical hospital room with a lamp, a whiteboard, and medical equipment.

# National and Local Context

## **National context**

The Department of Health (DoH) launched the UK National Dementia Strategy in 2009 with three key aims: 1) improved awareness, 2) earlier diagnosis and intervention and 3) higher quality of care. The strategy was imagined as a five year plan and set out 17 key objectives. Amongst those, objective 8 was 'improved quality of care for people with dementia in general hospitals'.

In February 2015, the Department of Health (DoH) published the Prime Minister David Cameron's Prime Minister's challenge on dementia, 2020 which set out what the government wanted to see in place by 2020 in order for England to be "the best country in the world for dementia care and support and for people with dementia, their carers and families to live; and the best place in the world to undertake research into dementia and other neurodegenerative diseases".

In 2019 the NHS Long-Term Plan recognised that demand for services for people living with dementia continued to grow in part because of our ageing population and also called for more to be done around dementia risk reduction and tackling health inequalities. However, although people are living longer, those extra years of life are not always spent in good health with a report by the All-Party Parliamentary Group on Dementia in 2016 stating that 70% of people living with dementia live with a co-morbid long-term health condition.

## **Local context – Haringey and Islington**

Figures from the Alzheimer's Society Dementia Friendly Communities initiative suggest that there are approximately 1,325 people living with dementia in Islington and from the Dementia Action Alliance the figure in Haringey is around 1,633 people.

Over the next ten years in Islington and Haringey, the population of the 65+ age group is expected to see the most significant growth of any age group and will account for 28 - 30% of the population of these boroughs by 2028 with undoubtedly a rise in the number of people living with dementia also.

Public Health England estimates that 68% of Haringey residents with dementia have been diagnosed, while in Islington over 70% of the expected number of cases of dementia have been diagnosed. This is the highest proportion in the country, well above London and England averages (44%).

# Dementia Strategy Group

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The purpose of the Dementia Strategy Group is to support and oversee the local implementation of the Trust's Dementia Strategy in order to improve dementia care for the people who use our services. Group membership is made up of Trust staff and external local partner organisations. Terms of Reference for the Dementia Strategy Group can be found at Appendix 1.



## Our achievements so far:

- **Dementia Specialist Practitioner** – This position was recruited to and the post holder joined the Trust in October 2019.
- **What Matters to Me** – A personalised support tool to enable person-centred care for people with dementia is in use across all inpatients areas.
- **John's Campaign** –The Trust is an ambassador of John's Campaign; working in partnership with family carers of people living with dementia.
- **Dementia Training** – This essential training programme (Tier 1 and Tier 2) has been relaunched for hospital and community staff and bespoke sessions are being delivered to specific areas by the Dementia Specialist Practitioner.
- **Enhanced Care** (or “one to one nursing care”) is an increased level of observation and care required to reduce risk and maintain safety of vulnerable patients in hospital (such as patients with cognitive impairment or those at risk from falling or leaving the ward unsafely). Whittington Health staff have created and delivered an Enhanced Care Programme (a three day training for health care assistants including delirium and dementia awareness) to improve the quality of this care in our hospital. This has been part of a pilot project funded by UCL Partners Patient Safety Innovation Adoption Fund 2019.
- **Nutrition** – A finger food menu is available as a stimulating, dignified meal option for people with dementia who may struggle with getting adequate food intake.
- **Holistic Care** – There are a range of interventions available including Pet Therapy, dementia-friendly games and activities and Reminiscence Interactive Therapeutic Activity (RITA) screens to provide stimulation and comfort to people living with dementia during their hospital stay.

- **“4AT”** – This delirium screening tool has been added to the new Emergency Department clerking proforma.
- **Dementia-friendly environments** – Refurbishment work is in progress on one of the Care of Older People wards to deliver a dementia-friendly space which is expected to help reduce agitation and promote wellbeing for patients with dementia and delirium.
- **Dementia Friendly Hospital Charter** – Whittington Hospital has made a public commitment to becoming dementia-friendly. Through our membership of the Dementia Friendly Hospital Charter Dementia Leads Network we share best practice with colleagues from hospital trusts across London.
- **Leaflets** – Written information on ‘memory problems’ and ‘delirium’ have been produced. These are available to staff, patients and carers to better explain these complex, and at times frightening, conditions and the pathways of care associated with them.
- **National Audit of Dementia (NAD)** – Whittington Hospital takes part in the National Audit of Dementia. This audit managed by the Royal College of Psychiatrists’ Centre for Quality Improvement, examines aspects of the care received by people with dementia in general hospitals in England and Wales.
- **Welcome Packs** – Information packs on what to expect during a stay on the Care of Older People wards are given to each patient on admission.
- **World Delirium Awareness Day 2020** – Members of the multi-disciplinary team from Care of Older People held an information stall and delivered a Grand Round to raise awareness of delirium, its treatment and prevention.



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# Our Objectives



# Objective 1

## **In the community – Living Well**

Many people living with dementia will not require inpatient admission but rely on support in their own homes and communities. We will support the wellbeing of people with dementia in the community by:

- Establishing when a patient has a Co-ordinate My Care record and use this to improve communication and person-centred care across teams and care settings.
- Introducing the use of the 'What Matters to Me' personalised care document across community teams.
- Continuing to support our local care homes in Islington ensuring access to specialist geriatric and mental health input for all residents.
- Promoting awareness of and supporting the implementation of John's Campaign in our outpatient departments and amongst colleagues who provide patient transport.
- Contributing to the aim of making the boroughs of Haringey and Islington dementia friendly places to live and work through our membership of Islington Dementia Friendly Communities and Haringey Dementia Friendly Communities. These programmes encourage everyone to share responsibility for ensuring that people with dementia feel understood, valued and able to contribute to their community.

# Objective 2

## **In hospital – Caring Well**

Whilst being admitted to hospital can be challenging for all people this is especially the case for people living with dementia due to the unfamiliar environment and routines and separation from loved ones. We will promote the wellbeing and recovery of those individuals living with dementia who admitted to hospital by:

- Screening all patients over 65 years of age for cognitive impairment using the Abbreviated Mental Test Score (AMTS) and screen for delirium using the “4AT”, on admission to inform our inpatient care plans and refer to relevant community teams.
- Embedding the use of delirium care plans to prevent and treat delirium.
- Creating physical and social environments that promote independence by allowing patients to maintain their normal routine as much as possible, including wearing their own clothes, sitting out of bed and taking part in activity that improves quality of life.
- Providing patients and carers with accessible written information and signposting to organisations who can help them.
- Actively seeking feedback from patients and those who support them on ways to improve our care of people living with dementia.

# Objective 3

## **End of life – Dying Well**

We will achieve supportive and dignified end of life care for people with dementia by:

- Being open and honest in consultation to highlight the changing trajectory of disease progression in those living with dementia.
- Actively exploring and respecting individual preferences in relation to end of life care.
- Working with Palliative Care teams to provide high quality care in line with the Trust's End of Life Strategy for patients at the end of their life.
- Seeking to know the spiritual and pastoral care needs of our patients who are at the end of their life and making this support available.
- Linking with the ethos of John's Campaign to work together with families as the person with dementia approaches the end of their life.



# Objective 4

## **Skilled staff – Supporting and Understanding Well**

We will have a capable workforce skilled in caring and understanding the challenges faced by people living with dementia by:

- Delivering a structured staff training programme using a tiered approach based on the Dementia Core Skills Education and Training Framework, 2015 by Skills for Health and Health Education England.
- Delivering training on delirium, causes and treatments and its relationship to dementia, pain and behavioural symptoms.
- Re-introducing Dementia Champions across the Trust to help embed the aims of the Dementia Strategy and raise awareness of dementia.
- Inviting all Trust volunteers to become *Dementia Friends*.
- Collaboratively working with carer and patient representatives to help us design and deliver our staff training.



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# Implementation of the Strategy

The strategy will be delivered via a three year work plan setting out in detail how the objectives will be achieved. Implementation of the plan will be overseen by the Dementia Strategy Group with specified professional groups or individuals leading certain work streams. Collaboration with patients, carers and our colleagues in Camden and Islington NHS Foundation Trust, Islington and Haringey local authority and voluntary agencies will ensure the strategy remains relevant and appropriately prioritised in response to emerging issues throughout its lifetime. The strategy will be reviewed no later than March 2022.

## **Dementia Core Skills Education and Training Framework**

<b>Tier 1</b>	<b>Tier 2</b>	<b>Tier 3</b>
Raising dementia awareness, in terms of knowledge, skills and attitudes. Relevant for all staff working in health and social care settings including ancillary staff.	Knowledge, skills and attitudes for staff roles that have regular contact with people living with dementia. Relevant to all health and care staff working regularly with people living with dementia.	Enhancing the knowledge, skills and attitudes for experts working with people living with dementia. Relevant to staff working intensively with people affected by dementia including those who take a lead in decision making and developing or disseminating good practice.





# References

- All Party Parliamentary Group on Dementia (2016). Dementia Rarely Travels Alone: living with dementia and other conditions
- Alzheimer's Research UK (2018). Available at: <https://www.dementiastatistics.org/>
- Department of Health and Social Care (2009). Living well with dementia: a national dementia strategy
- Department of Health and Social Care (2015). Prime Minister's Challenge on dementia 2020
- The NHS Long-Term Plan (2019). Available at: <https://www.longtermplan.nhs.uk/>

## Relevant Whittington Health Policies

- Carers Policy (October 2018)
- Delirium Prevention and Management (2017)
- Patient Experience Strategy (2019-2021)

## **Dementia Strategy Group (DSG) Terms of Reference**

### **1. Purpose of the Strategy Group**

The purpose of the Strategy Group is to support the local implementation of the Trust's overall Dementia Strategy.

### **2. Organisation**

2.1 The Strategy Group is chaired by the clinical lead for dementia (Dr Rebecca Sullivan) supported by the dementia specialist practitioner (Miriam Brennan).

### **3. Governance**

3.1 The agenda and draft minutes of the Strategy Group will be agreed by the Chair and circulated to all Strategy Group members.

3.2 The Steering Group will report to the Patient Safety Committee bi-annually.

### **4. Responsibilities**

4.1 To drive the dementia care agenda and Dementia Strategy within the Trust by promoting the work of the Strategy Group and by role modelling best practice.

4.2 To support compliance with the standards identified by the National Audit of Dementia, National Institute for Clinical Excellence (NICE) guidance and the Dementia Friendly Hospital Charter.

4.3 To contribute to the development of excellent dementia care through clinical audit, quality improvement and research.

4.4 To ensure that good dementia care practice and initiatives are acknowledged, shared and celebrated.

## **5. Membership**

Clinical Nurse Specialist for Older People

Dementia Specialist Practitioner

Patient Experience Manager

Speech and Language Therapist

Pharmacist (Care of Older People)

Dietitian (Care of Older People)

Practice Development Nurse for Medicine

Occupational Therapist (Care of Older People)

Matron – Care of Older People

Parkinson's Clinical Nurse Specialist

Consultant Physician in Care of Older People and Cardiology

Psychiatric Liaison Consultant Psychiatrist

District Nursing Service Manager and Deputy Associate Director of Nursing, Adult Community Services

Multi- Agency Care & Coordination Team (MACCT) Manager

Deputy Sister Outpatients

Matron – Emergency Department

Occupational Therapist (Integrated Community Ageing Team)

District Nursing Specialist Practitioner

Deputy Chief Nurse

Matron - Surgery & Cancer

Service Manager – Services for Ageing and Mental Health (C&I NHS Foundation Trust)

Consultant Geriatrician/Clinical Lead for dementia

## **6. Frequency of meetings**

The Dementia Strategy Group will meet every two months. Meetings will be held on the first Wednesday of the month.

## **7. Review of Terms of Reference**

The terms of reference will be reviewed annually.



The first part of the paper discusses the importance of the research and the objectives of the study. It then presents a literature review of the existing research on the topic. The second part of the paper describes the methodology used in the study, including the data collection and analysis techniques. The third part of the paper presents the results of the study, and the fourth part discusses the conclusions and implications of the findings. The paper concludes with a summary of the main points and a list of references.

The research was conducted using a quantitative approach, with data collected from a sample of participants. The data was then analyzed using statistical methods to identify patterns and trends. The results of the study show that there is a significant relationship between the variables being studied. The findings have important implications for the field of research and for future studies.

The study was limited by several factors, including the sample size and the scope of the research. However, the results provide valuable insights into the topic and suggest areas for further research. The authors hope that this paper will contribute to the understanding of the topic and provide a basis for future studies.

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