

Dementia Strategy (2021–2024)

Improving the quality of life for people living
with a dementia and their carers

Contents

Strategy overview	4
The national drivers for change.....	7
Consultation process	7
Our strategic alignment.....	8
Our Values.....	9
Key strategy priorities	10
Indicators of success	14
Conclusion	14
Abbreviations	15
Reference list.....	15

For an overview of the abbreviations used within this document – please refer to page 15.

“Dementia is progressive. Initial symptoms include memory loss and difficulties with thinking, problem-solving or language”.

Dementia is not an inevitable part of ageing. However, as our population ages, the number of people living with dementia is set to increase.”

‘Making a Difference in Dementia: Nursing Vision and Strategy’
(Department of Health, 2016) pp. 6-8.

“Our vision is to create a society by 2020 where every person with dementia, and their carer’s and families, from all backgrounds, walks of life and in all parts of the country receive high quality, compassionate care from diagnosis through to end of life care.”

‘Prime Minister’s Challenge on Dementia 2020’
(Department of Health, 2015) p. 6.

Dementia is a progressive neurodegenerative disease process for which there is currently no cure.

(Department of Health, 2015)



Strategy overview

At Lancashire Teaching Hospitals NHS Foundation Trust (LTHTR) we are committed to enabling people to live well with a dementia, we do this by continually striving to improve the quality of care that we provide to people using our services.

To achieve our strategy we believe in a collaborative approach and have such aligned our commitment to the 'National dementia strategy' objectives (Department of Health (DOH) 2009), The Prime Minister's challenge on 2020 (DOH, 2015), feedback we have received from the National Dementia Audit findings and via a consultation event from which we have listened to a broad range of NHS employees, third sector agencies, people living with a dementia and their carers.

The purpose of this document is to set out a 3-year strategy for person-centred dementia care in LTHTR. The document provides clear guidance for the future development and implementation of compassionate and effective care that strives for the most positive outcomes for our patients and those that care for them.

In order to achieve this, the strategy aims to support all of our staff to have the right skills to provide excellent compassionate care in dementia friendly environments, and to promote meaningful engagement with our patients, carers, families and other providers. This document has been designed to be responsive to the needs of our patients; and therefore it is recognised that this is a living document that may evolve over time.

Contextual information

Care for people living with dementia (PLWD) remains a national priority with figures published by the Alzheimer's Society and NHS England (2015) indicating that around 850,000 people in the United Kingdom (UK) have dementia which equates to 1 in 14 people over the age of 65. Dementia can also affect people as young as 20 with around 42,000 people under the age of 65 diagnosed in the UK. According to the Care Quality Commission (2014), 40% of all patients over the age of 65 in hospital beds will be living with a dementia.

Dementia is known to exponentially increase with age and people aged over the age of 60 years are the 'most rapidly expanding segment of the population (Downs and Bowers, 2014). Similarly the Office for National Statistics (2011) predicted that within the United Kingdom, the proportion of people aged 65 years or over in 2011 was 17.2% whereas projections for 2032 have been estimated at 22.4%, making older adults one of the most rapidly increasing population groups. There are currently 15,000 people with living with dementia in Lancashire; this number is expected to increase to 21,472 by 2025.

Where are we now?

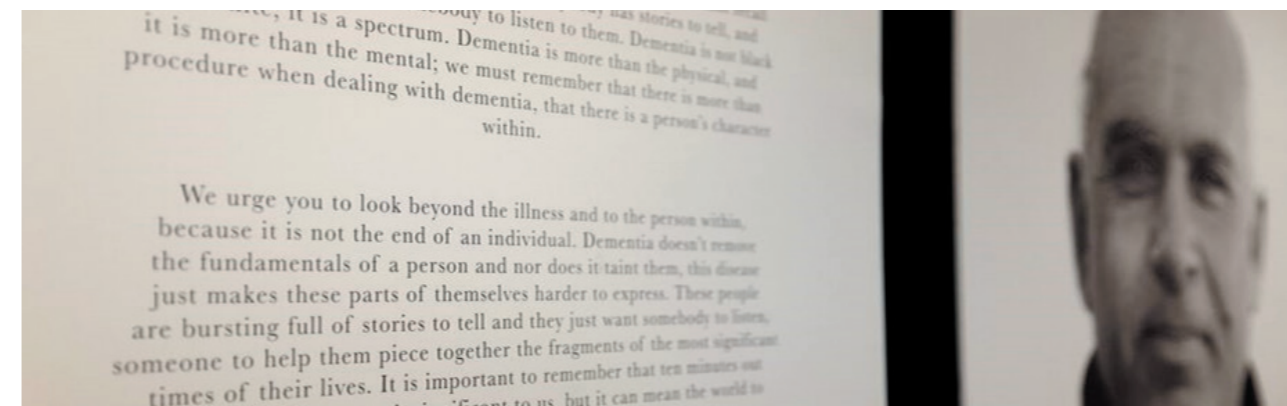
Due to an aging population, forecasts of increasing dementia prevalence and literature highlighting the potential negative impact of hospitalisation on cognition and post discharge functioning; Improving the care of people living with a dementia has been a priority for Lancashire Teaching Hospitals NHS Foundation Trust for some time.

Over the last 3 years, the trust has focused on delivering improvements in the 'experience of care' for patients with dementia and has successfully delivered a number of improvement initiatives.

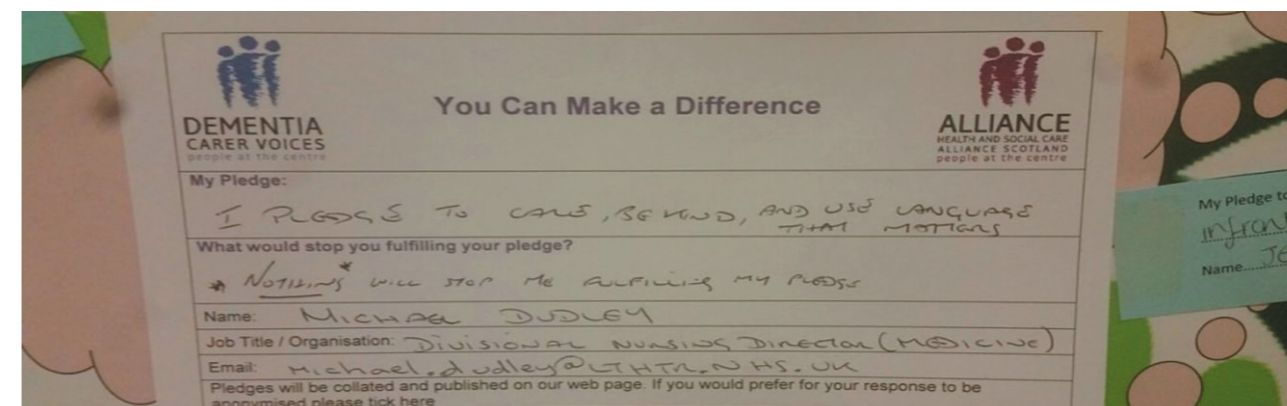
These initiatives have included:



- An informative dementia conference where delegates were invited to wear hospital gowns and separated from their friends to experience how patients feel in a hospital setting.



- The trust commissioned the University of Central Lancashire to undertake artwork, now installed on both the Chorley and Preston site with statements to prompt the recognition of seeing the person behind the diagnosis of dementia.

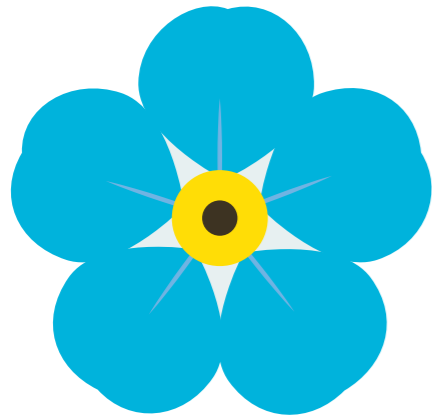


- Staff members have been involved in making commitments as to how they would improve care for people living with a dementia using pledge trees. These pledges are displayed throughout the organisation.

Lancashire Teaching Hospitals NHS Foundation Trust 'Dementia Programme' has delivered the following:

- Improved environmental adaptations
- Red toilet seats and handrails in ward bathrooms
- Picture and word signage with colour coded bays
- Dissemination of dementia resource boxes to all wards
- Wrist band 'forget-me-not' shape punchers to enable discreet visual recognition
- Carers lanyards
- Development of carers pledge
- Open visiting times
- 'Purple for purpose' initiative (purple socks to recognise cognitive impairment)
- Enhanced levels of care policy and processes
- Purchase of china tea sets for all inpatient areas
- Dementia champions and training programme
- Roll out of Forget-me-not passports of care
- Standardisation of snacks
- Provision of drinks for carers
- Dementia conference
- Tommy Whitelaw – 'what matters to me' training sessions
- 'What matters to me' behind the bed boards
- Tea parties at ward level
- Memory boxes
- Distraction and stimulation library
- Red sleeper chairs for families to stay with their loved ones.
- One million pounds was invested in developing dementia friendly environments
- Fast track support for outpatients with dementia through the Patient Experience and PALS Service

This is thanks to a dedicated group of staff across the Trust over a three year period who remain passionate to improving the care for people living with dementia. Many of the improvements listed above are routinely audited as part of the STAR quality assurance programme and have become firmly embedded in practice.



The Forget-Me-Not flower: A national dementia symbol associated with remembrance, a connection that endures all challenges and measures of time.

The forget-me-not flower has become synonymous with partnership working as it takes many people to develop dementia friendly communities.

The national drivers for change

To develop this Dementia Strategy we have considered the following national drivers including, but not limited to:

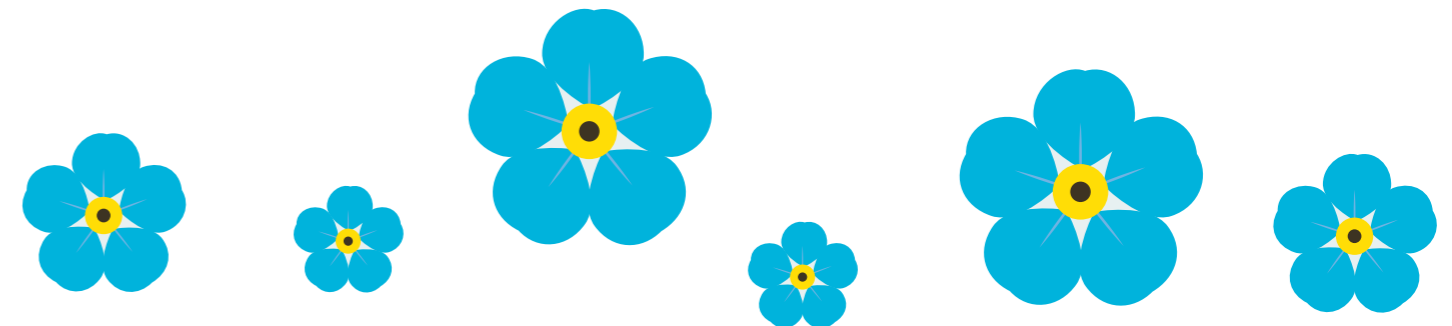
- Living Well with Dementia: A National Dementia Strategy (Department of Health, 2009).
- Five Year Forward View (Department of Health, 2014) – highlighting that statutory services, communities and businesses to work together to support people living with dementia.
- The Prime Minister's Challenge on Dementia 2020 (2015).
- Dementia Friendly Hospitals Charter of the National Dementia Action Alliance (2018).
- The National Audit of Dementia Care in general hospitals (Royal College of Psychiatrists) –The 4th round Lancashire Teaching Hospitals Local Report (2018-2019) has been specifically considered for this strategy.
- Cracks in the pathway: People's experiences of dementia care as they move between care homes and hospitals (Care Quality Commission, 2014).
- The National Institute for Health and Care Excellence (2019) dementia quality standards.

Consultation: Who we have listened to in order to develop this strategy

The following stakeholders have been invited to be involved within the Dementia Strategy:

- People living with a dementia
- Carers of people living with a dementia
- A wide range of Lancashire Teaching Hospital NHS Foundation staff members from a wide diversity of services who provide care input to people living with a dementia (Inclusive of patient experience services, end of life care professionals, the research team, dementia champions, front line ward staff and managers)
- LTHTR governors
- LTHTR volunteers
- The Alzheimer's Society
- Age UK
- Healthwatch
- The Lancashire Carers Service
- The University of Central Lancashire
- Lancashire and South Cumbria Care Foundation Trust (Including the Mental Health Liaison Team and the Memory Assessment Service).
- National Institute for Health Research employees

In total, 110 people attended aspects of the Dementia Strategy Consultation Event during the 13th and 14th January 2021 and provided further ideas for improvement and informed what 'good would look like'. Many of the attendees have made a commitment to provide ongoing support in ensuring that the Trust achieves its commitments over the coming 3-year period.



Strategic alignment

It is recognised that hospitals can often be very confusing places for people living with a dementia in context of unfamiliar environments, loss or routine and unfamiliar staff therefore it has been key to align this strategy with 'The Patient Experience and Involvement Strategy' and the 'Nursing, Midwifery, Allied Health Professional & Care Givers strategy' 2018 – 2021 which was launched in February 2018 after extensive consultation with staff, governors and patients. These strategies similarly provide a three year plan to improve patient experience at LTHTR through the Trust ambition of 'Consistently deliver excellent care'.

The aims of the Patient Experience and Involvement strategy are based upon the 4 aims of the trusts strategic ambition 'Consistently deliver excellent care'.

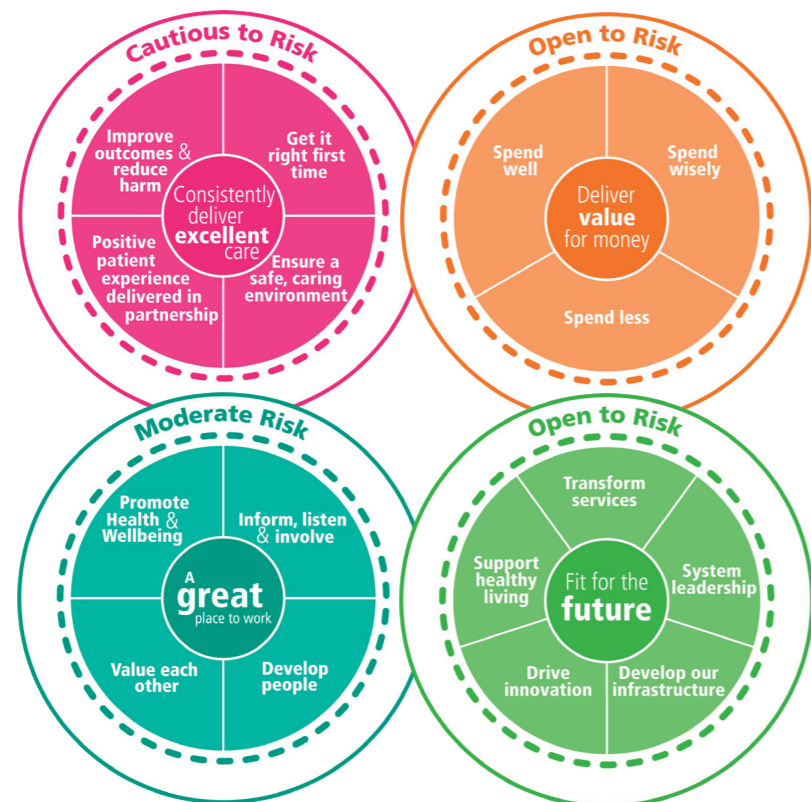
1. Deliver a positive experience
2. Improve outcomes and reduce harm
3. Create a good care environment
4. Improve capacity and patient flow

The Nursing, Midwifery, AHP & Care Givers strategy outlines five commitments, these are:

1. Continuously strive to improve
2. Lead with care and compassion
3. Work as a team to deliver the best possible experience
4. Look for diversity and be inclusive
5. Nurture a workforce able to meet our local population demands

This strategy aims to identify how we across Lancashire Teaching Hospitals can work as one team with our colleagues by ensuring the aims of this strategy are in complete alignment with the Trusts overarching strategic direction and ambitions. It is recognised that all departments (Inpatient and Outpatient) and specialist teams (for example; Lancashire Integrated Frailty Team, Discharge Facilitators) who are crucial in driving high quality standards of care and positive patient experience.

The Dementia Strategy is aligned to our ambitions within the Big Plan; Our Commitments indicate which areas they fit. Our ambitions are:



Our Values

Lancashire Teaching Hospitals NHS Foundation Trust is one of the largest acute Trusts in the country, providing district general hospital services to 370,000 people in Preston, South Ribble and Chorley and specialist care to 1.5 million people across Lancashire and South Cumbria.

Our mission is to always provide excellent care with compassion which we do from three facilities:

- Chorley and South Ribble Hospital
- Royal Preston Hospital
- the Specialist Mobility and Rehabilitation Centre

We are a values driven organisation. Our values were designed by our staff and patients and are embedded in the way we work on a day to day basis:



Being caring and compassionate

Being caring and compassionate is at the heart of everything we do, we will understand what each person needs and strive to make a positive difference in whatever way we can.



Recognising individuality

We appreciate differences, making staff and patients feel respected and valued.



Seeking to involve

We will actively get involved and encourage others to contribute and share their ideas, information, knowledge and skills in order to provide a joined up service.



Building team spirit

We will work together as one team with shared goals doing what it takes to provide the best possible service.



Taking personal responsibility

We are each accountable for achieving improvements to obtain the highest standards of care in the most professional way, resulting in a service we can all be proud of.

Key strategy priorities

Commitment 1: Early identification of patients with cognitive impairment and clear pathways to access diagnosis, interventions and post diagnostic support

LHTR Plans / We Will:

- Ensure that every patient receives a comprehensive assessment including a description of their physical needs, mental health needs, pre-existing functioning and social needs. This assessment will include information from patients and their carers / service providers (where appropriate).
- Staff members will consider and rule out all reversible causes of acute cognitive decline. For patients presenting with a delirium, staff members will follow the LHTR 'Prevention, Diagnosis and Treatment of Delirium in Adult patients' guidance.
- All inpatients over the age of 70 years will be offered the Confusion Assessment Method (CAM) questions and if this is negative the Six item Cognitive Impairment Test (6-CIT). General Practitioners will be informed of any patient scoring 8 or above on the 6CIT with recommendations for further assessment post-discharge.
- The Trust will develop direct referral pathways to the Memory Assessment Service to ensure promote early access to assessment, diagnosis and treatment.
- LHTR will ensure Information is widely available to people living with dementia, their carers and staff members on post diagnostic support resources.
- The Trust will develop systems to facilitate early identification of people diagnosed with a dementia in order for reasonable adjustments and care to be provided which meets their individual needs.

Commitment 2: Involve carers and implement the carers' strategy

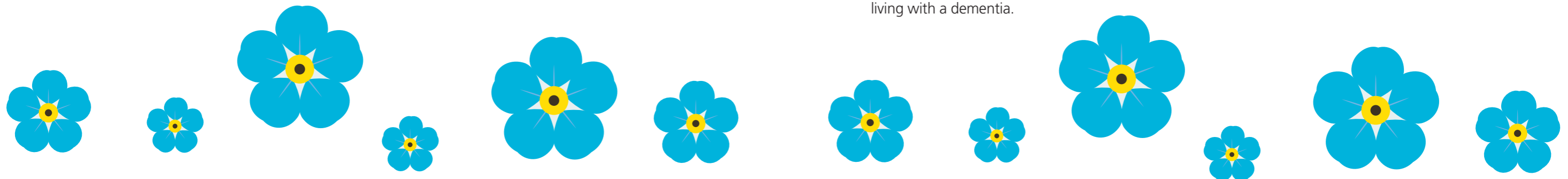
LHTR Plans / We Will:

- LHTR will develop a dementia engagement and empowerment project (DEEP); this forum will enable the voices of people living with dementia and their carers to be heard and to provide an opportunity for them to actively participate in ongoing service improvement.
- A dementia focused resource corridor will be developed and will provide helpful information about what adjustments LHTR can provide for carers, information about dementia and support services available to people living with dementia and their carers. Information will also be made available on the intranet and intranet.
- All patient areas will have information leaflets available for carers on the LHTR carer's charters and additional support that can be provided to carers of people living with a dementia.
- Staff members will actively engage and seek information from carers and a record of discussion will be entered in the patient's clinical notes.
- Throughout the LHTR premises, private spaces will be made available for discussions with carers of people living with a dementia. An audit of family rooms / available private spaces will be completed.
- The Trust will use the 'Triangle of Care' self-assessment framework to inform improvements for people caring for a person with dementia.
- The Trust will continue to recognise the importance of ongoing carer input in ensuring optimal cognition and functioning. Services will work in partnership with carers to make reasonable adjustments.

Commitment 3: Improved quality of care for people with dementia in general hospitals

LHTR Plans / We Will:

- A dementia strategy task and finish group will be established to inform ongoing quality improvements.
- The task and finish group will ensure that the best evidence based assessment tools are being used with PLWD to promote improved understanding of the patients' needs, this will include behavioural monitoring assessment, pain assessments and cognitive screening.
- The 'Forget-me-not' document will be routinely completed within inpatient areas to facilitate improved communication, engagement, structure patient centred interventions and facilitate quality of care. An audit will be completed quarterly to monitor compliance and the findings will be shared within the LHTR leadership structures.
- The nutritional and hydration needs of patient with dementia are discussed within the nurse shift handovers. This will include information on food and drink likes /dislikes.
- Hospital external catering contracts and internal catering provision includes the requirement for the ready availability of finger foods and snacks for people living with dementia.
- Discharges will follow the Trust Discharge policy and the Integrated Discharge Service will be involved in supporting where complex needs are identified. This will include ensuring discussions involve PLWD and their carers regarding the place of discharge and their ongoing support needs. These discussions will be clearly document within the patients' clinical notes.
- The discharge documentation will record – 1) occurrence of delirium and behavioural symptoms of dementia. 2) Recommendations for ongoing assessment or referral post-discharge and will ensure that relevant information regarding enhanced care level observations, the presence of any behaviours that challenge, the use of PRN medication, and the Mental Health Liaison Teams assessment, risk assessment and care plan is shared with any post-discharge care placement.
- The Trust Operational Management Plan includes a section which ensures the movement of patients living with a dementia at night will be kept to a minimum, and should be kept to 'within hours' unless there is a clinical need. The Trust will ensure collation of information about inappropriate moves and will report this to the Trust Board for review on at least an annual basis.
- Information is presented to the Trust Executive Directors which identifies the proportion of people with dementia that have experienced 1) a fall during admission, 2) a delay to their discharge 3) Readmission within 30 days of discharge.
- All patients identified with a dementia will be identified in the clinical electronic records using a dementia flag. Staff members will use this flag to record any reasonable adjustments that need to be made to ensure that quality of care is not compromised due to the person's cognitive and functioning impairment whilst they are receiving care from the Trust.
- Inpatient areas will ensure that all patients diagnosed with a dementia are identified with a magnetic forget me not flower at the bedside and the patient wrist band has been identified with a Forget Me Not flower to allow staff to be mindful of cognitive and communication deficits.
- A policy will be developed which gives clear information on care pathways with our external local mental health providers.
- Staff members will ensure that routine assessments of patients living with a dementia include any information about factors that can cause distress or agitation and steps that can be taken to prevent these.
- LHTR recognise the importance of advanced communication skills when providing care to PLWD and will include this in the patients care plans. This will include ensuring malignant social psychology is not present and that the care we are providing is seeking to engage involvement and not outpace a person living with a dementia.



Commitment 4: Improved palliative and end of life care for people with dementia.

LHTR Plans / We Will:

- Recognise the importance of providing PLWD the opportunity to be involved in advance care planning discussions and supported to develop this at the earliest opportunity.
- LHTR will identify a dementia friendly advance care planning document that can be promoted with PLWD.
- Recognise the importance of enabling PLWD and their care givers to be involved in advanced decisions.
- Staff members working within end of life / palliative care services will be familiar with the National Care Gold Standards Framework for End of Life Care.
- Staff members working within the palliative care / end of life care services will have access to the Electronic Palliative Care Co-ordination Systems (EPaCCS) and LPRES. LHTR will ensure that we seek to capture this information and to share this information with appropriate stakeholders.
- Training will be provided to the workforce on facilitating advance care planning discussions with PLWD. All LHTR staff will recognise the importance of their role in facilitating these discussions.

Commitment 5: An informed and effective workforce for people with dementia

LHTR Plans / We Will:

- The Trust will continue to deliver dementia training at level 1, 2 and 3 which is appropriate to the staff's role and ensures that Delirium and its relationship to dementia is included, training records are maintained and this is submitted annual quality accounts.
- The role of the newly recruited Dementia Specialist Nurse will develop and become embedded across the Trust, with a large element focused on upskilling the workforce (complimenting the current Specialist Teams / Practice Development/ Education). The Dementia Specialist Nurse will guide care-planning and increase the skills of the Dementia Champions in providing a range of therapeutic interventions for People Living with Dementia to improve overall patient cognitive outcomes.
- Lessons Learnt Publications will be shared in relation to People Living with Dementia/ Patient Experiences.
- Representation at the Dementia Action Alliance and Dementia Partnership Board will be ensured to ensure best practice. Good practice is shared at the Trusts Dementia Leads Forum.
- The Trust will provide dementia friends training to a minimum of 100 people within the 3-year period. This training will be offered to LHTR volunteers, staff members not required to complete the mandatory Level 1 Dementia training and the general public attending our services in order to develop a culture of improved dementia awareness.
- Staff members working with PLWD will be offered training on behaviours that challenge and de-escalation techniques.
- People living with dementia and their carers will be involved in providing training on their lived experiences to LHTR staff members.
- Training for staff members will include how to recognise deterioration in a person living with dementia and strategies to manage the symptoms at the person's end of life.

Commitment 6: Patients will be informed about research opportunities within Lancashire Teaching Hospitals NHS Foundation Trust

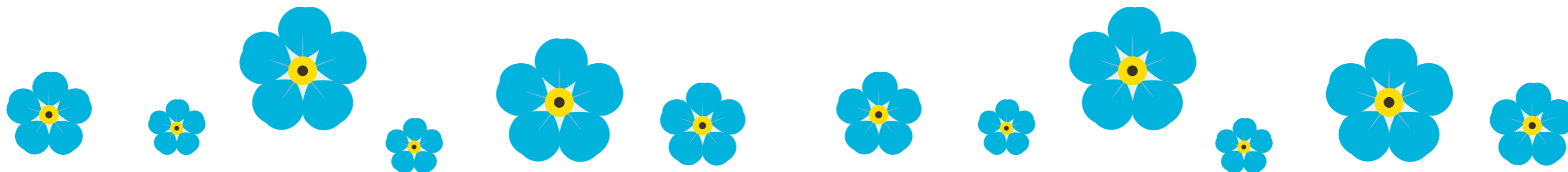
LHTR Plans / We Will:

- The Trust will provide a 'Join dementia research' kiosk for people living with dementia, their carers and members of the general public to sign up relevant studies.
- Join dementia research leaflets are available within the dementia information corridor.
- LHTR seek to identify patients that are receiving services but wish to be involved in any LHTR / LSCFT / NIHR dementia related studies. A clear pathway is developed to identify interested patients.

Commitment 7: The Trust will promote dementia friendly environments

LHTR Plans / We Will:

- Service user feedback will be sought to inform any cosmetic or structural changes within Royal Preston Hospital or Chorley District Hospital.
- The Trust will continually review environments using the PLACE (Patient-led assessment of the care environment) audits and demonstrate that it has acted upon the findings. All recommendations will be discussed within the established leadership structures in order to plan / implement future improvements.
- LHTR will complete a self-assessment of dementia friendly environments based on guidance from the National Dementia Action Alliance charter (2018).
- A dementia friendly garden area will be available to all patients within the Royal Preston Hospital and Chorley District Hospital sites. People living with dementia and their carers will be involved in developing these spaces.





Indicators of success:

A 3-year implementation plan has been developed to guide the ongoing actions to achieve success with the identified 7 commitments. This implementation plan has utilised the feedback provided at the Dementia Strategy Consultation Event on the 13th and 14th January 2021 from a wide range of representatives and will have ongoing input from attendees. A RAG rating system will be utilised within the ongoing Task and Finish groups to monitor progression and ongoing actions.

Progress with the implementation plan will be reported through the Trusts 4-weekly Elderly Governance Meeting.

Throughout the duration of the strategy, qualitative feedback will be sought from service users to inform LTHTR on the lived experience of PLWD and their carers and will drive any future improvements.

Lessons learnt will be shared across the Trust.

Representation at the local Dementia Action Alliance will share information with other relevant networks.

Conclusion

This three year strategy drives high standards of care to ensure PLWD and their families or carers experience a positive journey whilst receiving services from LTHTR. The strategy guides our continued Dementia Programme and our commitment to work closely with PLWD in further developing the environment and ensuring our staff members have the necessary skills to provide quality care to PLWD and respond to individual needs.

This strategy aligns us with the national commitments and quality standards from external agencies / partners. The completion of the strategy will be reliant on the close working of specialist teams, patients living with dementia, carers and multi-agency partners. Any new national drivers, audit outcomes or patient feedback will be considered annually to inform a review of the implementation plan. Success and achievements will be considered by a number of governance groups including the Safeguarding Board and the Elderly Care Governance group.

Abbreviations

People living with a dementia (**PLWD**)

Lancashire Teaching Hospitals NHS Foundation Trust (**LTHTR**)

Dementia Action Alliance (**DAA**)

National Health Service (**NHS**)

Electronic Palliative Care Co-ordination Systems (**EPaCCS**)

Department of Health (**DOH**)

United Kingdom (**UK**)

Reference list

Alzheimer's Society (2015). *Dementia UK report*. [Available online] <https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-uk-report>, last accessed 15th September 2020.

Care Quality Commission (2014). *Cracks in the pathway: People's experiences of dementia care as they move between care homes and hospitals*. Care Quality Commission, Gallowgate.

Department of Health (2009). *Living well with a dementia: A National Dementia Strategy*. HMSO, London.

Department of Health (2015). *Prime Minister's challenge on dementia 2020*. HMSO, London.

Department of Health (2016). *Making a difference in dementia, nursing vision and strategy*. Department of Health, London.

Downs, M., Bowers, B. (2014). *Excellence in dementia care: Research in practice*. 2nd Edition. Open University Press, Maidenhead.

Office for National Statistics (2011). [Available online], <https://www.ons.gov.uk/aboutus/transparencyandgovernance/freedomofinformationfoi/dementiastatistics>, last accessed 20th January 2021.

Lancashire Teaching Hospitals NHS Foundation Trust (2018) *Patient Experience and Involvement Strategy*, [Available online] <https://www.lancsteachinghospitals.nhs.uk/strategy/>, last accessed 15th September 2020.

Lancashire Teaching Hospitals NHS Foundation Trust (2018) *Nursing, Midwifery, Allied Health Profession and Care Givers*, [Available online] <https://www.lancsteachinghospitals.nhs.uk/strategy/>, last accessed 15th September 2020.

Lancashire Teaching Hospitals NHS Foundation Trust (2020) [Available online], *Prevention, Diagnosis and Treatment of Delirium in Adult patients, Version 2*, last accessed 20th January 2021.

The Carers Trust (2016) *The Triangle of Care: Carers included – A guide to best practice for Dementia Care*, [Available online], <https://carers.org/resources/all-resources/67-the-triangle-of-care-carers-included-a-guide-to-best-practice-for-dementia-care-england>, last accessed 20th January 2021.

The Gold Standards Framework for End of Life Care, [Available Online], <https://goldstandardsframework.org.uk/>, last accessed 21st January 2021.

