



Aberdeen City Health & Social Care Partnership
A caring partnership

Dementia Action Plan for Aberdeen City 2014-2024

July 2016 Summary of Progress

Introduction

Aberdeen’s Dementia Action Plan, 2014 – 2024 is based on Scotland’s National Dementia Strategy. This document summarises the progress that has been made under the action plan thus far. If you would like to see a copy of the full action plan, please email the Aberdeen Health and Social Care Partnership’s Development Facilitation team on nhsg.devfacaberdeen@nhs.net

Prioritisation

The following key shows the prioritisation scheme used within this summary of progress.

	High priority		Medium priority		Low priority
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The six outcomes in this summary have been prioritised and then, within each, the aims (‘What We Will Do’) have also been prioritised.

Low and medium rated aims/outcomes have been prioritised as such because it is felt that they can be tackled over a longer time period and/or there are clear links to other work-streams which are also addressing that aim/outcome.

Outcome 1 – People are well informed and encouraged about how to keep well, promoting wellbeing and positive lifestyle choices that support risk reduction and enablement and delay the onset of dementia

What We Will Do	How It Will Be Done	Sample Of Progress
<p>1.1 Work towards Aberdeen becoming a dementia-friendly City</p>	<p>By raising the awareness of both the public and health and care staff.</p> <p>By promoting Dementia Awareness Week and associated activities.</p> <p>By delivering the Dementia Friends Programme.</p> <p>By effectively investing monies received from the Life Changes Trust and learning from good practice elsewhere.</p>	<p>Project 300, through the Aberdeen Council of Voluntary Organisations (ACVO) has assessed the dementia awareness of the 3rd sector in Aberdeen.</p> <p>Dementia Friendly Communities activities are being delivered by Aberdeen Football Club (AFC) Communities Trust and a range of partners.</p> <p>170 people went on Alzheimer Scotland's Memory Walk in 2015 (double 2014).</p> <p>Significant levels of dementia awareness training have been done with housing sector staff in Aberdeen.</p> <p>Approximately 50 - 60 Dementia Friends sessions have been delivered by Alzheimer Scotland.</p>
<p>1.2 Equip people with dementia and their carers with the knowledge/ information necessary to live well and manage their own health and wellbeing</p>	<p>By developing an Aberdeen Dementia Resource Centre.</p> <p>By increasing people's wellbeing by developing a range of support groups and activities.</p> <p>By promoting free Home Fire Safety Visits.</p> <p>By developing a communications plan.</p>	<p>The Dementia Resource Centre opened in September 2015.</p> <p>A range of support activities have been established, such as Musical Memories, the Walkie-Talkie Group, the Golden Games and Football Reminiscence.</p> <p>Home Fire Safety visits are being promoted through health and social care assessments.</p> <p>A working communications plan is now in use by the Joint Old Age Psychiatry Group (JOAPG).</p>

Outcome 1 – People are well informed and encouraged about how to keep well, promoting wellbeing and positive lifestyle choices that support risk reduction and enablement and delay the onset of dementia

What We Will Do	How It Will Be Done	Sample Of Progress
<p>1.3 Educate staff across all sectors (statutory, independent, third) who are working with people with dementia to a good level</p>	<p>By developing a multi-agency signposting tool for the workforce in the health and care sector to access dementia learning opportunities.</p> <p>By rolling out Cognitive Stimulation Therapy.</p> <p>By raising awareness of dementia amongst local transport providers.</p>	<p>ACVO produce the Dementia Friendly Aberdeen bi-monthly newsletter.</p> <p>Cognitive Stimulation Therapy sessions have been delivered by Occupational Therapy.</p> <p>Alcohol awareness sessions have been delivered to the Dementia Link Workers.</p> <p>A close working relationship has been developed between health and social care colleagues and First Bus (e.g. supporting falls awareness on buses, developing a dementia staff app, delivering Dementia Friends sessions).</p>

Outcome 2 - People with Dementia receive a timely accurate diagnosis and access to appropriate intervention

What We Will Do	How It Will Be Done	Sample Of Progress
<p>2.1 Educate the public regarding dementia so that people seek help as early as possible</p>	<p>By using various forms of media.</p> <p>By equipping housing sector staff with requisite knowledge to advise people to seek help if dementia is suspected.</p> <p>By identifying dementia champions in Housing Associations.</p>	<p>Dementia Friends sessions have been delivered and are still being actively promoted.</p> <p>14 'Informed about Dementia' sessions have been delivered to 122 housing sector staff.</p> <p>A number of Housing Association dementia champions have already been identified.</p>
<p>2.2 Increase capacity in primary care in the early diagnosis of dementia. Links to HEAT Targets</p>	<p>By enhancing GP skills through the dementia scholarship.</p>	<p>3 programmes have been delivered in 2013, 2014 and 2015. The 2016 programme has commenced.</p>

Outcome 2 - People with Dementia receive a timely accurate diagnosis and access to appropriate intervention

What We Will Do	How It Will Be Done	Sample Of Progress
<p>2.3 Signpost people with dementia and their carers to a range of information and support including social, physical, spiritual and psychological</p>	<p>By raising the awareness of people from minority ethnic communities about the range of dementia supports available.</p> <p>By raising awareness of the NHS Grampian Chaplaincy service.</p> <p>By working with library services to develop opportunities for providing support to people with dementia and their families.</p> <p>By developing and maintaining an interactive dementia mapping tool.</p>	<p>The JOAPG is working with ACVO's Ethnic Minority Forum to extend the take-up of dementia support amongst minority ethnic communities.</p> <p>The Chaplaincy service is promoted at the Dementia Carers Exchange and through a wide range of other means.</p> <p>The JOAPG has met with Aberdeen City Council Library Services to explore development opportunities.</p> <p>ACVO has developed and is maintaining an interactive dementia mapping tool.</p>

Outcome 3 - People with Dementia will receive 12 months of post diagnostic support which is based on the Alzheimer's Scotland 5 Pillar model, will be allocated a link worker and at the end of the 12 months will have a person centred support plan

What We Will Do	How It Will Be Done	Sample Of Progress
<p>3.1 Make the current post-diagnostic support deliverable beyond the current Change Fund funding. Links to HEAT Targets</p>	<p>By evaluating the impact of the Dementia Link Worker role.</p>	<p>Evaluation of the Dementia Link Worker role complete. Funding has been agreed until June 2017.</p>
<p>3.2 Agree on what the support plan will consist of – usable, purposeful, shareable</p>	<p>By monitoring the number of support plans in place and reporting on this every 6 months.</p> <p>By promoting the use of life story work with people with dementia.</p>	<p>Link Workers send the support plan to GPs at the end of their contact with their clients. A system of 6-monthly reporting has been agreed with Alzheimer Scotland.</p> <p>The 'Getting to Know Me' document is widely used within health and social care services.</p>

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		<p>Life story work is part of the carers manual for cognitive stimulation therapy.</p> <p>ACVO have met with RGU in February 2016 to discuss the use and promotion of life story work.</p>
<p>3.3 Keep people independent for as long as possible enabling people to access community facilities</p>	<p>By increasing the uptake of technology enable care (TEC) for people with dementia.</p> <p>By involving people with dementia and their carers in volunteering.</p> <p>By creating opportunities for people with dementia and their carers to remain active.</p>	<p>All Aberdeen City Council sheltered and very sheltered housing are currently being upgraded to be TEC-enabled.</p> <p>The Aberdeen Health and Social Care Partnership (AH&SCP) has been awarded £215,000 by the Scottish Government TEC Fund.</p> <p>2 Occupational Therapists have been employed to raise TEC awareness across acute health services and the housing sector.</p> <p>Alzheimer Scotland has appointed a volunteer coordinator.</p> <p>The Wellbeing Team and partners have developed a wide range of activities which are supporting people with dementia and their carers.</p>

Outcome 4 - Carers are seen as equal partners and are supported appropriately in their caring role, being enabled to plan for their future and being supported in times of crisis

What We Will Do	How It Will Be Done	Sample Of Progress
<p>4.1 Increase the number of carers assessments completed</p>	<p>By promoting the 'Do You Look After Someone' Z-cards.</p> <p>By reporting the number of completed carers assessments on a 6-monthly basis.</p>	<p>The 'Do You Look After Someone' Z-card was updated in Summer 2016 to incorporate service changes and is still being actively promoted.</p>
<p>4.2 Provide families and carers with access to a range of supports that enable them to carry out their caring role and ensure that they are treated as equal partners in care</p>	<p>By highlighting dementia and dementia support during Carers Awareness Week.</p> <p>By providing access to peer support.</p> <p>By promoting Equal Partners in Care (EPiC) e-learning amongst health and social care staff.</p> <p>By investigating the mainstreaming of carers advocacy support.</p>	<p>VSA Carers Services and Alzheimer Scotland along with other partners are working jointly to deliver Carers Awareness Week and Dementia Awareness Week in 2016.</p> <p>A wide range of peer support is available including the Carers Exchange, the 'Letting Go' Group and the Living Well Dementia Cafe.</p> <p>EPiC levels 2 and 3 are now available alongside level 1 and are being completed by staff.</p> <p>A review of the carers advocacy service is currently being done. This will be considered by the JOAPG in summer 2016.</p>
<p>4.3 Increase the availability of residential respite, short-term, flexible respite and day care to support carers. To do this in conjunction with the promotion of Self-Directed Support</p> <p><i>Links to:</i> Delayed Discharge work</p>	<p>By reviewing day care and short-term flexible respite.</p> <p>By raising awareness of self-directed support (SDS) and I-Connect North East's SDS support service.</p>	<p>Funding has been extended for VSA's Forestgait service (flexible day respite).</p> <p>An SDS Mental Health Forum is being held within Social Work. This is promoting SDS and giving social workers the chance to present cases for discussion.</p>

Outcome 5 - People with dementia, their carers and families have access to a wide range of flexible and good quality supports which are responsive to the person's needs and age appropriate. This would include appropriate housing

What We Will Do	How It Will Be Done	Sample Of Progress
<p>5.1 Develop services and support for people with dementia and their families when their needs become more complex</p>	<p>By increasing the stock of very sheltered housing that is suitable for people with dementia.</p> <p>By ensuring that the commissioning of dementia-specific residential and nursing level care home places match demands and is age appropriate where possible.</p> <p>By developing a Strategic Commissioning Plan for the AH&SCP.</p> <p>By increasing the availability of residential respite, short-term flexible respite and day care to support carers.</p> <p>By improving the range of transport options available for people with dementia.</p>	<p>Work is ongoing to upgrade Provost Hogg Court to very sheltered housing, including a dementia-friendly design.</p> <p>A continual review of the suitability of current residential and nursing level care home places is taking place.</p> <p>A review of the utilisation of respite-specific beds in care homes is currently being done.</p> <p>The AH&SCP's Strategic Plan has been published. The Commissioning Plan will be based on this Plan.</p> <p>Talks are underway with Robert Gordon University to establish a dementia/transport project.</p> <p>THInC, ACVO's social transport project started in March 2015. It provides cheap transport for people with particular conditions to health and social care appointments.</p>
<p>5.2 Improve our provision of timely access to care at home and housing support for people with dementia</p>	<p>By reviewing existing care packages.</p> <p>By establishing a 'care bureau' service.</p>	<p>Initial reviews have started and these will be rolled out.</p> <p>The business case for the 'care bureau' service has been done and 2 associated posts have now been filled.</p>
<p>5.3 Ensure all Health, Social Care and key third sector staff have the appropriate knowledge, skills and understanding to support people with dementia.</p>	<p>Please see 1.3 above.</p>	<p>Please see 1.3. above.</p>

Outcome 6 - People receive appropriate end of life care which meets their physical, emotional, spiritual and social needs

What We Will do	How It Will Be Done	Sample Of Progress
<p>6.1 Support people to plan for their future, including staying in their own homes for as long as possible</p>	<p>By helping people to plan ahead for the end of their lives.</p>	<p>Support Plans and Anticipatory Care Plans are being done as routine.</p>
<p>6.2 Provide people with appropriate spiritual care at the end of their life</p>	<p>By making NHS Grampian's Chaplaincy service available at points of need.</p> <p>By exploring how staff awareness of the spiritual needs of people can be increased.</p> <p>By promoting the Getting It Right At The End (GATE) Project.</p>	<p>The Chaplaincy service is freely available on an ongoing basis.</p> <p>The initial audit of staff awareness of spiritual needs has been done. Chaplaincy is now following up by encouraging people to become dementia friends.</p> <p>The GATE support pack is now complete and available to all.</p>
<p>6.3 Identify that the individual is at risk of dying in the next 12 months</p>	<p>By using NHS Grampian's Palliative & Support Care Plan Identification Guidance (SPICT).</p> <p>By providing education for care workers about the identification of people who have palliative needs.</p> <p>By adding the person's name to the Palliative Care Register in general practice.</p>	<p>All of primary care and care homes have been shown how to use SPICT (identification element).</p> <p>The 'Fundamentals of Palliative Dementia Care' training course is currently funded until March 2017. Application is being made to the AH&SCP for continued funding.</p> <p>The Palliative Register is being updated on an ongoing basis.</p>
<p>6.4 Assess and monitor the individual, responding to individual need</p>	<p>By using the Palliative Performance Scale (PPS) to monitor functional change.</p>	<p>All primary care and Care Homes have been shown how to use the NHS Grampian Palliative and Supportive Care Plan – PPS element.</p>
<p>6.5 To ensure comfort care is delivered when the individual is dying</p>	<p>By reviewing medications and interventions to ensure that they are promoting comfort and symptom control.</p>	<p>Prescribers have access to the end of life care guidance on the NHS Grampian clinical guidance intranet and in SPICT.</p>