

# Dementia Care Strategy 2023- 2026



*|When I Walk*

*When I Walk, don't tell me to come and sit down*

*Walk with me.*

*It may be because I am hungry, thirsty, need the toilet. Or maybe I just need to stretch my legs.*

*When I call for my mother (even through I'm ninety!)*

*Don't tell me she has died.*

*Reassure me, cuddle me, ask me about her.*

*It may be that I am looking for the security that my mother once gave me.*

*When I shout out please don't ask me to be quiet or walk by.*

*I am trying to tell you something, but have difficulty in telling you what.*

*Be patient. Try to find out, I may be in pain.*

*When I become agitated or appear angry, please don't reach for the drugs fist.*

*I am trying to tell you something. It may be too hot, too bright, too noisy.*

*Or maybe it's because I miss my loved ones.*

*Try to find out first.*

*When I don't eat my dinner or drink my tea maybe because I've forgotten how to.*

*Show me what to do, remind me*

*It may be that I just need to hold my knife and fork I may know what to do then.*

*When I push you away whilst your trying to help me wash or get dressed, maybe it's because*

*I have forgotten what you have said, keep telling me what you are doing.*

*Over and over and over.*

*With all my thoughts and maybes, perhaps it will be you who reaches my thoughts, understands my fears, and will make me feel safe.*

*Maybe it will be you who I need to thank.*

*If only I knew how.*

*(Author Unknown) |*

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# 1. Executive summary



The purpose of this document is to set out a 3-year plan for East Kent Hospitals University Foundation Trust (EKHUFT) to deliver high quality person-centred care to people who are living with a formal or suspected dementia diagnosis and their carers.

## **Outcome summary EKHUFT Dementia Care Strategy 2019**

Since the last EKHUFT Dementia Care Policy (2019) there have been a number of improvements in how people with dementia are cared for at EKHUFT.

Across the trust in 2021 more than 3,900 (74%) of staff have attended dementia training and many have attended specific training focusing on understanding communication needs and behavioural support for people with dementia in an acute hospital environment.

We continue to support John's Campaign for patients living with dementia to have open visiting times and for carers to stay overnight on request. This has been relaunched in September 2022 with the introduction of carers' passports.

Dementia-friendly environments have been included in refurbishments across the trust, for example dementia friendly/quiet rooms in the new ED builds.

The environment is audited within the Patient-Led Assessment of Care Environment (PLACE) audit, with specific criteria relating to patients and dementia.

Patient and carers' feedback are collated and used to improve our future services.

We recognise that we do not always get it right and what when we don't we should acknowledge and learn from our mistakes.



## Our vision for future services

We want local people to have the best, most effective, hospital care when they need it – and more care, treatment and support out of hospital when they don't, by signposting to the most relevant organisation.

When hospital treatment is necessary, we aim to ensure it is safe, effective, and that discharge is facilitated with the appropriate level of support in a timely manner.

This strategy sets out how we will work with our patients, carers, staff and partners to deliver consistently high standards of dementia care at EKHUFT. It details the goals for improvement for 2023-2026 for people living with dementia and their carers when they are using our services or are admitted to hospital.

It outlines the six key objectives to improve care and experience of our patients who are living with dementia as well as their carers.

These are:

- Outstanding care
- Care relationship and staff skills
- Partnership with carers
- Active days and calm nights
- Environments of care
- Links with communities and community partners.

Each of these objectives will have an associated workstream tasked with achieving improvements. We will deliver these by working with our patients, carers, staff, community groups and partner organisations.

The care delivered will meet the Trust values of:

- People feel cared for as individuals
- People feel safe, reassured and involved
- People feel teamwork, trust and respect sit at the heart of everything we do
- People feel we are making a difference.



## 2. The National Context 2022/23

Dementia continues to be a growing challenge. As the population ages and people live for longer, it has become one of the most important health and care issues facing the world.

*Leading on from the prime minister's challenge 2020*

*“Aim to make England, by 2020, the best country in the world for dementia care, support, research and awareness. By 2020, England should be the best place for people with dementia, their carer's and families to live.”*

Living through a pandemic has also been a huge challenge for the NHS, People living with Dementia and their support network.

During the pandemic there has been a recognised decline in the dementia diagnosis rates. There is now a renewed focus on early diagnosis post pandemic and this has been the main aim of the Alzheimer's campaigns.

This focus on early diagnosis, research and support remains a national priority as it is predicted that the number of people with dementia is forecast to increase to 1,142,667 by 2025 – an increase of 40%.

Of the population 1 in every 14 people over 65 years has dementia.

1 in 3 people who die over the age of 65 years are living with a dementia diagnosis.

Dementia now accounts for 11.6% of all recorded deaths in the UK.

In the UK 61% of people with dementia are female and 39% are male.

There are approximately 944,000 people in the UK living with dementia. This is expected to reach 1.1 million by 2030, 1.4 million by 2040 and 1.6 million by 2050 (Alzheimer's Research 2020).

The Department of Health estimates that 25% of hospital beds are occupied by someone living with dementia.

### **National Dementia Strategy**

In 2009 the Department of Health published “Living well with dementia: A National Dementia Strategy” which identified improving dementia care and services as a key national priority. The Trust strategy is based on the principles of the national agenda.

### **Local Context: Current position**

Dementia and Alzheimer disease has replaced ischemic heart disease as the leading cause of death in England and Wales. The number of deaths registered for people over the age of 75 living with dementia has doubled in the last 10 years.

The number of people with dementia is increasing as people live longer. It is expected to increase in Kent from under 20,000 in 2012 to just under 25,000 in 2020. (Kent Public Health Observatory)

### 3. Strategic Aim and Oversight



The strategic plan is driven by the need to ensure that all patients receive care that is safe, effective and caring. To make this a reality requires clear procedures and processes to oversee its delivery.

The Executive Lead is the Chief Nurse. The Lead Clinicians are a Consultant in Elderly Care and the Lead Dementia Specialist Nurse.

Playing an integral role will be people with dementia, carers of people living with dementia, a Lead Specialist Dementia Nurse, Estates and Environment Leads, Medical Staff and Allied Health Professionals (AHPs) as well as Senior Nurses including Ward Managers.

The Trust Dementia Action and Strategy Group (DASG) is formed from many key staff plus carer representation and third sector representation. This group meets on a monthly basis to manage the Dementia Strategy Work Plan.

Our Dementia Strategy priorities for 2023/2026 will build upon work that has already started and will be focused on delivery improvements in the care people receive when they are admitted to hospital.

## 4. EKHUFT Dementia Care Strategy 2023-2026

The 2023-2026 Dementia Strategy is designed to place patients living with dementia, their families and carers at the centre of care.

Each of these objectives will have an associated work stream tasked with achieving improvements. We will deliver these by working with our patients, carers, staff, community groups and partner organisations.

### Vision for 2023-2026

Delivering consistently outstanding dementia care, using latest evidence and innovation to allow patients to maintain their independence whilst in hospital and where possible return to their previous levels of functioning and home as quickly as possible, whilst minimising the impact of a hospital admission and change of environment.

- **Outstanding care**

All patients over 65 who are admitted will be screened for cognitive impairment on admission and regularly throughout their stay to ensure that delirium is treated promptly and any unresolved cognitive impairment is further investigated by our community partners.

This will be clearly communicated in the discharge summary to GPs for further investigation if required.

- **Care relationships and staff skills**

Staff will have the training to provide them with skills to deliver outstanding care consistently to patients living with dementia, specifically in supporting them when they are distressed.

Staff will be trained in recognising the signs and symptoms of delirium and be able to act quickly to implement treatment strategies to prevent further complications.

- **Partnership with carers**

Ensure carers of patients living with dementia have excellent communication with the multi-disciplinary teams (MDT) and are involved in and have a clear understanding of discharge plans.

Carers and patient should feel supported at all times, be able to seek advice and work with the MDT on the ward to deliver patient centred care.

Information for carers will be available detailing how to support a loved one with dementia and delirium during their stay in hospital.

- **Active days and calm nights**

Patients with dementia or delirium will be offered the chance to take part in meaningful activities appropriate to their cognitive ability and medical plan.

This will range from reminiscence therapy that helps maintain and stimulate independence and cognitive function to relaxing, sensory based therapies that help calm agitation and provide comfort to patients nearing the end of their lives.



All activities will encompass memories through the senses including music, hand massage, familiar sights and faces and encouraging eating and drinking.

- **Environments of care**

The Trust will continue to build on the Frailty Assessment Units and as the sites are developed dementia friendly principles will be incorporated into all capital projects.

In addition, dementia friendly rooms will be developed within all of our Emergency Departments to support the care patients on the emergency pathway.

- **Links with community partners**

People living with dementia will have the information collected in hospital handed over to community colleagues in a timely manner to ensure seamless transfer of care and to avoid patients and families having to undergo duplication.

There will be improved communication between acute, community and voluntary sector organisations.

## **5. The Strategic Objectives.**

- **Outstanding Care – Diagnosis, Clinical Care and Treatment**

We have historically achieved over 90% in our dementia screening tools to help support the diagnosis within the community.

We will adopt a simple tool that assesses for cognitive impairment which all staff can use.

We have taken the opportunity of post covid to relaunch our visiting times and commitment to “John’s Campaign” and all wards offer compassionate visiting.

### **Objectives for 2023-2026**

Improve screening, prevention and management of delirium to align with NICE guidelines.

A new delirium care bundle will be developed and be included on Sunrise for staff to use and access across all inpatient wards.

A new Enhanced Care Policy will be launched to provide staff with a tool kit to help care for patients with cognitive impairment and distressed behaviour.

Improve care of patients with delirium and dementia through the specialist nurse having oversight on all complex cases and giving guidance and advice to patients, carers and staff.

Develop a dementia and delirium dashboard that reviews incident reports relating to falls and challenging behaviour. Support leaders to focus on the root cause of the incident.

Work with the appointment booking teams to ensure that carers of patients living with dementia can be informed of appointments to reduce DNAs and be able to present to support the patient if they wish.

The Palliative care team will work collaboratively with the Dementia team to support patients and their carers at the end of their life.

### **Where we want to be**

By 2026 there will be an effective delirium care plan on Sunrise that ensures all patients over 65 are screened for cognitive impairment.

An established dementia team will support staff to deliver excellent care throughout inpatient settings.

There will be a significant improvement in National Audit for Dementia results.

Patients will be able to access outpatients with the support for their carers.

## **• Care Relationships and staff skills**

Tier 1 training is delivered to all staff as part of their induction.

This is also delivered on bespoke training for departments including support staff such as 2gether and volunteers.

Tier 2 training is held on a monthly basis and Dementia Friends training is offered ongoing and as a bespoke method of supporting the Trusts' ambition of all staff being Dementia Friends.

### **Objectives for 2023-2026**

Relaunch the Dementia Team with a clear referral pathway and presence on all inpatient wards and emergency departments.

Develop and deliver a new dementia education programme that enables staff to access training appropriate to their role, including caring for people at the end of their life.

Renew the "This is me" so that it is more visible at the bedside, but also review how we can upload the information to a patient's notes so that it does not duplicate on future visits.

By ensuring information is available at the bedside, enable staff to deliver person centred care.

Ensure staff are skilled and confident in communicating with patients and carers to facilitate timely discharge.

Deliver regular training for staff on caring for people who are confused and lack capacity, including those who may exhibit distressed behaviours that are challenging. This will be known as enhanced care.

Continue to review the skill mix of our inpatient wards using the Safer Staffing methodology to ensure we have a workforce that is fit for purpose.

## Where we want to be

By 2026 the Trust will have an established education programme in varied formats for dementia and delirium that meets the needs of all roles whether clinical or no-clinical and in all areas of the hospitals.

This will cover all aspects of care including end of life, behaviours that are challenging and how-to deliver patient centred care.

Each patient with dementia will be identified both electronically on the Trusts' PTL system and a copy of personalised information by their bed.

## • Partnership with carers

As part of our covid recovery plan, we have relaunched Johns' Campaign and have initiated carers passports.

We welcome the carers of patients living with dementia at any time and staff can access pull out recliner style chairs for carers to be more comfortable.

### Objectives for 2023-2026

Clear carer information posters that detail visiting times, carers rights and how they can support loved ones at meal times will be developed.

All information sent out to patients and carers meets the Accessible Information standard.

Continue to support Johns' Campaign and ensure carers are made welcome across all inpatient wards.

Update the dementia carers leaflet and the trust website to include a downloadable "This is me" that can be emailed back to staff.

Ensure that carers who are admitted themselves receive appropriate support and help to care for their loved one living with dementia.

Develop a Dementia Service User Group that can be consulted on new projects and innovations.

Ensure, where possible to provide services for carers, such as showering and washing facilities.

Ensure carers feel confident that they know how to access support on discharge.

Will support from the dementia team, improve communication between carers and staff, specifically if they cannot be present on the ward.

Ensure carers are supported with end of life care planning.

Recruit and train a dedicated team of volunteers to provide carer support to relatives of patients living with dementia.

## Where we want to be

By 2026 the trust will work in partnership with carers to ensure their knowledge about the person they care for is used to deliver personalised care.

Carers should feel they can continue to give the care that they do at home and will be supported to do this if they wish to.

There will be up to date information for carers to understand how they can support their loved ones during their inpatient stay.

They will be able to seek support and advice from staff, volunteers and community partners.

## • Active days and calm nights

We have established methods of giving all wards access to dementia friendly activities by the introduction of activity boxes on every ward.

Hydration rounds are now going ahead across all 3 sites, WHH, K&C and QEQM. They are a great way to promote social interaction between staff and patients and also support in the hydration of patients in our acute hospitals. The hydration rounds are supported by the Dementia Team, The Nutrition and Hydration Team and the 2gether Staff working in collaboration to support all patients.

We have recently trained our first cohort of enhanced care champions in methods and strategies to improve the care given to cognitively impaired or distressed patients.

### Objectives for 2023- 2026

Develop tailored interventions for patients including more advanced interventions such as music, sensory and aromatherapy.

Ensure that patients with dementia and delirium have access to RITA's (Reminiscence Interactive Therapy and Activities) an interactive system to support dementia patients during their admission to aid sensory stimulation.

Explore opportunities for patients living with dementia to access the outdoors on a regular basis.

Re-introduce breakfast and lunch club and ensure they are running across elderly care wards.

Expand therapeutic activities to other areas – specifically orthopaedics in recognition of the needs of the patient cohort.

External entertainment performers will be invited to perform on a regular basis as part of the therapeutic intervention programme.

Therapeutic interventions post pandemic need to be adapted to more focused onto each ward and closer to the patient.

Create "Enhanced Care" tool boxes for staff giving 1:1 care with activities and puzzles to help staff engage patients who are distressed



## **Where we want to be**

By 2026 patients will have access to the right therapeutic activity for them, at the right time in the right place.

Reminiscence and sensory therapy will be available to help manage agitation and distress for patients with more advanced dementia.

## **• Environments of care**

We are in the process of refurbishing and developing expanding emergency departments. Using dementia friendly principles, we have included a designated room for patients who find the environment of the emergency department distressing and over whelming.

These dementia friendly cubicles will help support the patient experience of people living with dementia in our emergency department.

We will work with the results of our PLACE visits to inform future improvements.

### **Objectives for 2023-2026**

Create an accessible outside space that patients and carers can visit in each hospital.

Main receptions need to be welcoming and incorporate dementia friendly design.

Identify washing and changing facilities for carers.

Develop a carers lounge/advice area on each hospital.

Continue to strive to improve PLACE scores by ensuring all areas of the hospitals meet dementia friendly principles.

Continue to ensure that all capital projects incorporate dementia friendly design.

## **Where we want to be**

By 2026 the Trust will have identified carer's lounges on each of its three main hospital sites.

By 2026 the Trust will create accessible out door spaces that patients can carers can use.

All capital projects undertaken to develop the sites will incorporate dementia friendly design.

## **• Linking with our communities**

The Trust has strong links with our local communities and aims to be an active member.

We frequently liaise with local care homes to share best practices and work actively with the community care teams.

## Objectives for 2023-2026

Link with our local mental health services to share knowledge and learning and also liaise regularly regarding patients accessing both services.

Work with Trust and community services to ensure patients living with dementia are discharged back to their own environment as soon as they are medically optimised.

Work with community partners and ensure trust staff are kept up to date with the services that are available.

Develop the dementia volunteer role to encompass knowledge of local services to support carers and people living with dementia.

Ensure that knowledge learned about the patient during their admission is handed over to their place of discharge, including “This is me” information.

Increase the links with service users through local carer groups in order to listen to and understand the needs of the population.

## Where we want to be

People living with dementia will have the information collected in hospital hand over to community colleagues in a timely manner to ensure seamless transfer of care.

There will be improved communication between acute, community and voluntary sector organisations.

Local groups, carers and patients living with dementia will feel their view are listened to and are included in our plans for future services.

## 6. Measuring and continuously improving our Dementia Care

Through the Dementia Strategy and Action Group (DSAG), we will regularly receive feedback on key performance indicators including:

A Dementia Strategy Action Plan will be developed to ensure delivery of the strategy. This will be reviewed as part of the monthly DSAG.

Dementia Scorecard. This will be developed using the current data collected. This will review the number of falls, incidents and harm incidents related to patients with dementia and as a proportion of all incidents.

Dementia Report. This will review how effective the trust is as screening patients for dementia and then referring onto GPs for referral to memory clinic.

PLACE dementia assessments take place yearly and reviews how dementia friendly the environment is both on the wards and in outpatient departments. This will be used to measure and track improvements to the environment over time.

Training figures. Quarterly reports on Tier 1 and 2 training figures mapped against the training plan.

National Audit for Dementia.

Complaints and Feedback will be monitored via the Complaints and Feedback Steering Group and the Patient Experience Teams.

The DSAG will report into the Fundamentals of Care Steering Group monthly.

## **7. Ensuring our strategy is delivered: governance**

In order to make this strategy a reality, there needs to be clear systems to oversee delivery.

The executive lead for dementia is the Chief Nurse and Midwifery Officer.

The clinical lead is a named consultant within the Care of the Elderly Team and Senior Specialist Nurse.

The senior nursing lead is a Site Director of Nursing who will support the Lead Nurse for Dementia.

The Dementia Strategy and Action Group (DSAG) consist of staff, carer representatives and community partners. The group is also recruiting service users to contribute to the strategy delivery. The group meets monthly to oversee progression of the strategy. The Terms of Reference and membership of this group will be reviewed to ensure the team is able to support delivery of the strategy.

The Dementia Strategy and Action Group (DSAG) will report into the Fundamentals of Care Committee.

The Fundamentals of Care Committee (FOC) is a non-executive group and is responsible for seeking and obtaining assurance via all care groups on all aspects of care.

If not assured the FOC will oversee the appropriate actions to improve or to escalate of relevant issues to the Quality Committee for consideration.

Its objective is to receive assurance through the provision of evidence sharing the effectiveness of actions taken to deliver the FOC framework. This is including monitoring and ongoing audits to demonstrate compliance and improvements.

This committee reports to the Trust Quality Board and the programme of Works is led by an associate Director of Nursing for the Fundamentals of Care.

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## **8. Ensuring our strategy is delivered: resource**

This strategy will require us to continue to build on the achievements of previous years and the commitment of staff, volunteers, patients and carers to ensure delivery.

Fully utilising the skills and expertise offered by patients and carers coupled with increasing the volunteer involvement in dementia care will aid this.

Working collaboratively with our local community partners and other third sector groups will also support.

Expanding the involvement of staff, patients, carers and user groups across all areas of the trust will ensure support and commitment to the ideas set down in this strategy.

### **Strategy review**

This strategy is a live document. It will be reviewed on a regular basis to ensure it remains relevant to our aims and objectives. It will also be updated with any changes in national policy or local circumstances.

It will be reviewed no later than July 2026. |