Session 1: The Carers’ Academy

Informal carers of people with dementia often receive no formal training or education in dementia care, despite the fact that the majority of people with dementia are supported at home by family members. A multidisciplinary team comprising of nursing, academic, AHP and voluntary sector staff came together to design and implement a Carers’ Academy Programme. This presentation will report on the findings and evaluation of a pilot programme which involved carers supporting people with early onset dementia, people with dementia and learning disabilities and people with advanced dementia. Simulated and practice based approaches were used to support the development of enhanced levels of knowledge and practical skills, whilst ensuring careful attention was given to ensuring a supportive and caring learning environment.

Session 2: Promoting Excellence Using Cognitive Simulation Therapy (CST)

A substantial evidence base has developed, supporting the use of CST for people with mild to moderate dementia. However, there is a dearth of research available examining the efficacy of CST within Specialist Dementia Units (SDUs). This presentation will describe the implementation of CST within an SDU. Quality of life, pre and post intervention measures were used as a measurement of improvement, along with other measures, including monitoring progress forms, and utilising parameters such as: interest, mood, communication and enjoyment. CST aims to inspire hope and empowerment for people living with dementia and families/carers through focusing on peoples’ abilities. This presentation will outline that once the initial CST programme is complete, carers/family members can subsequently continue the intervention. This can improve the relationship between family members and the person living with dementia, and provide them both with a common interest.

Session 3: NHS Lothian Rapid Response Team (RRT)

This presentation will outline the work of the Rapid Response Team. This is a nurse led community mental health team which provides an alternative to hospital admission for older people, and people with early onset dementia, by providing intensive support at home. The team was developed in December 2016 with the aim of avoiding unnecessary admissions and reducing inappropriately long stays in hospital. The team achieve their aims by providing assessment and support for older people in mental health crisis, where the person is at risk of hospital admission. They also support people through multiple home visits and telephone calls, tailoring the frequency of visits to the individuals needs, and also support and facilitate early discharge from the older peoples’ acute mental health admission wards, as well as from the acute general hospitals. In the first year the team had 547 referrals (35% of whom had a diagnosis of dementia) and facilitated 87 early discharges. The average length of stay in assessment wards has reduced by 44% and in the assessment wards for people with dementia by 27%, compared to the year prior to RRT being established. The team are now in the process of reviewing Year 2 which has seen a 20% increase in referrals and an increase to 48% of those referred having a diagnosis of dementia, and have prevented 65% of people referred being admitted to hospital.
Session 4: Recognising, Assessing and Care Planning for People Living with Dementia Who Want to Walk During their Admission to an Acute General Hospital

Presenters: Nicola Wood and Debbie Wynd, NHS Forth Valley

Traditionally the term ‘wandering’ has been used to describe people with dementia who regularly walk around their environment. The term is associated with various negative connotations, including the presumption that there is no purpose to the person walking. This presentation will outline work undertaken in NHS Forth Valley to look at causes and to support safe walking for people with dementia in an acute hospital environment. It will outline how following consultation, focus groups, a review of the evidence base and involvement of an expert in the field, a walking guidance document was devised which includes a risk assessment and care plan template. Dementia Champions in NHS Forth Valley have been instrumental in driving this work and embedding it in practice. Follow up focus groups have demonstrated increased awareness / understanding and a shift in attitudes. Full reviews are carried out when the locked door policy is initiated which evidences full risk assessments, care plans and less restrictive options have been explored prior to locking the door.

Session 5: Reducing Stress and Distress for People in a Specialist Dementia Assessment Unit in NHS Lothian

Presenters: Charlotte Monk and Claire McGovern, NHS Lothian

This presentation will outline work undertaken in Canaan Ward in the Royal Edinburgh Hospital, aimed at providing people with the most positive hospital experience, through delivery of care that is underpinned by a values-led, evidence-based approach. The Newcastle Model of understanding stressed and distressed behaviours allows our team of healthcare professionals to visualise how each person is experiencing their unique journey with dementia. This is conducive to the development and implementation of personalised support strategies, which aim to fulfil people’s needs holistically, whilst enhancing the dignified and compassionate way in which care is delivered. The team will outline their commitment to looking beyond an individual’s cognitive impairment, and ensuring that people are supported to achieve their full potential using a co-ordinated approach to care.

Session 6: Enhancing Inpatient Care in Specialist Dementia Units Using the Promoting Excellence Framework in NHS Fife – Describing the Impact on Practice

Presenters: The NHS Fife SDU Team
Session facilitated by Gillian Grubb and Kerry Lowe, NHS Fife and Theresa Douglas, NHS Education for Scotland

This interactive session will include important contributions from front line staff members in NHS Fife, illustrating the crucial role of Health Care Support Workers, who have taken forward a range of improvements following the award winning work regarding the implementation of Promoting Excellence, recognised at the 2018 Dementia National Awards Ceremony as the ‘Best Educational Initiative’. See https://sda.alzscot.org/finalists-2

The session will describe how the training was disseminated in NHS Fife and led to a huge range of improvements and innovations in practice. Examples will include: developing a multisensory room and the use of sensory boxes; enhancing student education and experience; life story work; welcome boards and personalised signage; a CST programme for patients in the moderate to advance stages of their journey; an increase in therapeutic interventions; and initiatives that involved relatives in promoting nutrition and hydration and enhancing visiting experiences.
Concurrent session – 13.30 – 14.15

Session 7: e-Dementia Champions: Dementia Champions in NHS 24

Presenters: Matilda McCrimmon, Emma Cummins, Elaine McKenna, Laura Anne McKinney and Mary Smith, NHS 24

NHS 24 is a relatively new service in the health and care landscape of NHS Scotland, and is continually adapting to meet the needs of stakeholders. In 2016 an Alzheimer Scotland Lead Nurse for Dementia was appointed to support the service to meet the needs of people living with dementia and their carers. This appointment coincided with the first NHS 24 Nurse Advisors completing the Dementia Champions programme. The Lead Nurse and Dementia Champions identified the need to raise awareness of dementia internally, and also awareness of how NHS 24 supports people living with dementia with external stakeholders. NHS 111 is the first point of contact for non-emergency cases and will increasingly have a role supporting people living with dementia to continue to live in their own communities. This presentation will illustrate, with a number of call scenarios, how NHS 24 supports people through their dementia journey, and the improvements implemented to help staff and support callers, and plans for future.

Session 8: Improving Communication and Shared Decision Making – Speech and Language Therapy Adult Service and Briery Park Care Home

Presenters: Helen Fletcher, Helen Moores-Poole and Avril Gilmour-Graham, NHS Dumfries and Galloway

This presentation will describe how the Dementia Champion’s course enabled a Care Home Manager, and a Speech and Language Therapist, to establish a sustained partnership aimed at improving care for people living with dementia in rural Dumfries and Galloway. A proactive collaborative model of intervention was introduced to promote an inclusive communication culture and increase the overall ‘satisfaction with interaction’ inspection score within the care home. Four improvement streams were prioritised and trialed, including: revising the resident’s questionnaire to a communication inclusive format; direct training to care home staff; introducing a box of resources to support communication; establish a ‘how I make choices’ into peoples’ care plans. Co-production was embedded with people living with dementia and care staff giving feedback and contributing to the tools used. The tools provided a means for people living with dementia to participate in the ‘what matters to me’ conversation despite having communication challenges. This presentation will show how this work has contributed to positive and ongoing improvements for people living with dementia to support their daily decision making and communication within the care home environment.

Session 9: Developing an Observation Guideline for Acute Care

Presenters: Andy Shewan and Alison McGurk, NHS Tayside

People with dementia are increasingly admitted to acute hospitals with medical complications. Increased levels of confusion, often presenting as delirium, frequently require nursing staff to raise their levels of observation or use ‘restrictive care’ such as pressure pads to protect individuals from harm such as falls. Generally any protocols which direct on increased levels of observation have been confined to specialist mental health settings and do not readily transfer to acute care. This presentation will describe the process of development from initial engagement, using an report called ‘Treat as One’ and through various tests of change and education, leading to a completed protocol for observation in acute care. Engagement is being coordinated with people living with dementia to develop information booklets to ensure observation is person centred.
Session 10: Crossing Health and Social Care Boundaries: Education to improve the Experiences and Outcomes for People Living with Dementia at Home in NHS Highland

Presenters: Anne Campbell and Lorraine Watson, NHS Highland

The aim of this session is to show case and share innovative cross sector and award-winning work led by Anne and Lorraine, Community Mental Health Nurses, in NHS Highland. This work was shortlisted for the 2018 Scottish Dementia Awards, and subsequently went on to win the best ‘Dementia Care Initiative Award’ and the prestigious ‘Overall Winner Award’ at the Mental Health Nursing Forum for Scotland 2018 awards ceremony. The session will outline how enabling cross sector learning, by reaching out to the third sector Care at Home providers, can lead to positive and proactive improvements in support for people living with dementia at home. This can also improve outcomes to prevent hospital admission and referral to Community Mental Health Teams. The session will also demonstrate how their participation in the NES Dementia Specialist Improvement Leads (DSILs) Programme enabled this. The presenters will also show how training programmes can empower, support and inspire staff to implement changes in practice, through partnership and cross sector education and training.

Session 11: The Holistic Older Adult Assessment Tool (HOAT)

Presenters: Kerry Lowe and Gillian Grubb, NHS Fife

This presentation will describe the ongoing implementation of the HOAT in NHS Fife. The purpose of the tool is to resource the care provider with information that can create a vision of what the person is able to do for him or herself and how we can support them to optimise their independence. There are 10 statements of wellbeing which are: I have the best possible wellbeing, I am generally in good health, I sleep well, I care about my appearance, Communication, I am safe, I lead a healthy lifestyle, I have meaningful relationships and my future is valued and supported. Within each statement of wellbeing there are sub statements which highlight the level of independence the person has e.g. I can express when I want food or drink, I can prepare a meal for myself, I can consume my food and drink independently, I enjoy the company of others at meal times. There is a comments box with each statement to record individual personal preferences whether it is food, a bath or shower, which clothing they prefer etc. There are also prompts for planning and anticipatory care. This approach promotes individual, person centred care while focusing on the person's strengths, what outcomes they hope for and includes their informal carers and family members. It also treats people as individuals and promotes and protects their rights. The document can follow the patient to every care setting and changes can be recorded on the tool so that there is a whole story.

Session 12: Dementia Specialist Improvement Leads: Promoting Excellence in NHS Lothian

Presenters: Siobhann Keay and Mairi Johnston, NHS Lothian

This presentation will showcase the work that the NHS Lothian DSIL's have done over the last three years, how that has impacted the service that is provided, and the future for dementia training in Lothian. NHS Lothian has 6 Dementia Specialist Improvement Leads (DSILs) who have developed and are delivering an education programme for mental health staff across Lothian. The aim of the programme is to advance education in dementia care in line with the National Dementia Strategy (2017). They hope to train all staff to enhanced level of the Promoting Excellent Framework. They initially developed a Dementia Skilled course, which is delivered several times throughout the year, in different sites across Lothian for registered and unregistered staff who work in specialist dementia units. This is reviewed on a regular basis informed by the feedback from participants. The feedback has consistently been excellent as staff state that they will make changes to their practice based on the education they have received. In addition, they have now developed a Physical Complex Care Needs in People with Dementia course. This is a one day programme for unregistered staff and two days for registered staff. For the registered staff we have half a day spent on pharmacology which is delivered by NHS Lothian's Specialist Dementia Pharmacist. This course also takes place across Lothian throughout the year. The training incorporates experiential learning, which staff find very useful, and is often the part of the training we get most of the feedback from staff who feel they have been able to understand the experience of living with dementia.