



Sharing practice to improve care for people with dementia – National Audit of Dementia (NAD) Round 3

Come Dine with Me! Southport and Ormskirk, see p 5

Last July, we published a one-off [bulletin](#) following up on hospital action plans to share good practice and innovative ideas. After publication, we were contacted by hospitals keen to share further articles and ideas. These updates on progress and positive changes to the quality of care for people with dementia, are compiled in this bulletin.

There are many positive stories to share about changing practice to make hospital care more dementia friendly. We hope to produce periodic bulletins which you can use to gain ideas you can use yourselves and so you can share schemes which you have found particularly successful, to help other hospitals and trusts. We hope that you find this issue a useful resource and stimulating in your work, and please, keep the updates coming!

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Dementia alerts/ pathway at James Paget Hospital

The James Paget Hospital in Great Yarmouth has worked to increase the speed with which patients with dementia receive specialised support.

Electronic dementia alerts have been introduced to inform the dementia team whenever someone with dementia (or suspected dementia) is admitted to the hospital. The alert provides the team with the patient's location so they can reach them quickly and easily.

The hospital has also named Kim Crosswell as Patient Pathway Co-ordinator for dementia. The role has been funded for two years by the CCG as a local CQUIN and was created after feedback from the hospital's dementia carers' audit. In the audit, carers identified admission, transfer and discharge as times when they and the patient required most support. Kim therefore provides the majority of support during these times but also monitors the patient's progress the whole way along their pathway through hospital.

For more information about the initiatives at James Paget Hospital, please contact Rebecca Ballard, Dementia Care Project Manager at Rebecca.Ballard@jpaget.nhs.uk

Tapping into carer expertise at Torbay Hospital and South Devon Healthcare

South Devon Healthcare Trust has introduced two new schemes to assist in their goal to develop and improve the care and support

they provide to patients with dementia, and their friends and family.

The first scheme, 'Building Bridges', has recently been launched as a Trust-wide carers initiative with the aim of encouraging carers and other family members to come and speak to staff about their loved ones' preferences and routines. The initiative is being used across all wards but has proved particularly successful on wards providing care for those with memory issues and dementia. Dementia patients often find a change in environment stressful so having familiar routines or foods can make them feel more at home and less anxious.

"A gentleman on our ward had a known dementia and was admitted for treatment of an infection. He was not eating or drinking well. While his dietary needs were discussed and whether he needed help with eating was addressed, he still ate very little. When his wife came onto the ward we discussed the issue with her and she explained that at home he always ate his meal on a tray on his lap in front of the television. At his next meal, we asked him if he would like to eat in the day room, we gave him a tray on his lap and put the television on. He ate everything! Having this vital information enabled us to create a more 'normal', recognised environment for him and this very small but significant change reassured him (and us) greatly."

'Building Bridges' encourages a drop-in approach – it is acknowledged that at times, it may not always be convenient for staff and families to talk immediately so the scheme allows family to approach staff at a convenient time for them. This ensures staff do not miss the chance to engage with those who know the patient best. Since launching the campaign, many more families and carers have approached staff to discuss their loved ones normal routines.

“The wife of a patient approached me with a list of things her husband normally did at home with regard to medication routines and his personal care routines. She knew staff would be busy so she simply wrote down items on a list we could include in his notes enabling us to build up a better personal profile for him. This kind of information is invaluable and may not have been offered had she not seen the ‘Building Bridges’ campaign posters.”



The ‘Building Bridges’ campaign poster.

The second scheme was the introduction of lunch clubs. The first lunch club was so successful, a second was set up and days have been added so that both clubs will run Monday to Friday. The lunch clubs allow patients to eat their meals in a more homely environment with furnishings and tablecloths and away from the hustle and bustle of the busy ward. The use of pictures and photographs of the local area are also a great talking and reminiscence focus.

“We find that this more relaxed atmosphere means patients enjoy their meals more.”

Volunteers called “Mealtime Companions” have been trained to provide eating support and where necessary, to feed patients. There is always a clinical member of the team present to ensure everyone feels well supported. A great bonus of the lunch clubs is that staff will often have their lunch with the patients too, allowing them to get to know the patients better, while also getting time to eat their meal! Family members are welcome to join their loved ones too which further promotes the social side of eating.

“Such initiatives are not difficult to set up, but would be difficult to consistently maintain without the support of our wonderful volunteers. The staff are also very committed to making the scheme work and try to encourage as many patients as possible to attend the lunch club.”

For more information on the ‘Building Bridges’ and ‘Mealtime Champions’ schemes, please contact Lisa Houlihan, Senior Matron for Elderly Care, Dementia and Stroke services at lisa.houlihan@nhs.net

Enhanced environments at Ipswich Hospital

Ipswich Hospital NHS Trust has implemented the King’s Fund Enhancing the Healing Environment (EHE) framework. The new Carers Cabin at the hospital provides support for family carers with the input of Alzheimer’s Society.

Two wards have been combined and refurbished to create a Complex Care Unit called the Constable Suite. The suite has been adapted to include:

- Colour and art

- Biorhythm lighting
- Lines on the floor to make finding the way easier
- Pictorial signs to maintain independence
- Social areas for dining
- Activities co-ordinated and supported by a Dementia Support Worker

The Senior Clinicians for the unit are working on an enhanced training programme for staff to make this the hub for expert advice. The Fracture Fragility Unit has also been refurbished to the same standard. The nurses' station has been removed completely, allowing the creation of a central social area, and making the ward much more dementia friendly. The learning from these 3 wards is now being used to aid work on a fourth ward.

In partnership with Suffolk Family Carers and the East of England Co-op, Ipswich hospital runs a Carers' Cabin, staffed by training support volunteers who offer sign posting and a listening ear over tea and cake. The Alzheimer's Society also holds drop-in sessions in the Cabin twice a month to offer people with concerns about dementia advice and support.

For more information on what Ipswich Hospital are doing to help patients and carers, please contact Julie Sadler, Senior Nurse, Dementia Care & Adult Safeguarding at Julie.Sadler@ipswichhospital.nhs.uk

Training, environment and dementia champions at Maidstone and Tunbridge Wells

In the last year, Maidstone and Tunbridge Wells NHS Trust have developed a Trust Dementia Strategy - a 3 year plan on the

development of dementia services within the organisation.

Staff education and training: A Dementia Awareness Training strategy has been developed which includes 'Training Needs Analysis' for staff groups to identify the level of dementia training they require. Although dementia training has not been made mandatory, there is an expectation that 95% of staff will achieve training in the areas specified for their position. A training and education programme has also been established which includes the use of face-to-face teaching and e-learning. A dementia awareness leaflet is given to all staff at induction and this meets Tier 1 requirements of Health Education England for dementia training.

Environment: The Trust has made significant environmental improvements to the acute medical wards to help improve the experience of those admitted with dementia.

A dementia café was set up at Tunbridge Wells Hospital, to give patients a non-clinical, sociable environment to eat their meals.



Dementia café at Tunbridge Wells Hospital.

At Maidstone Hospital, a dayroom has been reintroduced. A new dementia activities co-ordinator role, supports people with dementia and cognitive impairment. The activities co-ordinator arranges for patients to attend the dayroom to eat their meals, physiotherapy and exercise groups and activity and

reminiscing sessions. All of this can now happen in a sociable environment. This has enhanced the experience of patients admitted with dementia/cognitive impairment, and has also produced savings on the cost of one-to-one nursing requirements. Due to these observed benefits, the Trust is looking at trialling the dementia activities co-ordinator role on other wards.



Patients enjoying their lunch in the day room at Maidstone Hospital.

Support and information: Dementia champions have been established on all the acute wards on both sites as a resource for patients, relatives and staff. A dementia buddy volunteer scheme is also being piloted for a year in association with Alzheimer's and Dementia Support Services to enable patients with dementia to be supported with cognitive and social stimulation by a group of trained volunteers.

For more information about the initiatives at Maidstone and Tunbridge Wells NHS Trust, contact Liz Champion, Lead Nurse for Dementia Care: liz.champion@nhs.net

Come Dine with Me! at Southport and Ormskirk Hospital

At the Southport & Ormskirk Hospital NHS Trust, Sue Johnson (Matron for Quality) and Carla Howgate (Senior Clinical Audit Officer) shared with us how they initiated nutritional and patient support improvements to the care of patients with dementia.

Initially, the Listening Into Action (LIA) project was undertaken by the Trust at the end of 2013. LIA was an initiative for staff to get involved in improvement projects which benefit themselves as well as patients. The programme was then extended to include the "Come Dine With Me" volunteer programme which was launched in the spring of 2013.

The "Come Dine with Me" volunteer programme finds Dining Companions to sit with patients who need additional help at mealtimes. As well as assisting with eating, Dining Companions can chat and support vulnerable patients such as those with dementia or other additional needs. Dining Companions can range in age from 18 to 84 years and decide to volunteer for a variety of reasons. Some volunteer because they want to experience working in a hospital setting (perhaps to help decide if they want a career in the National Health Service). Others want to help because they or a family member have received care in the Trust and they want to give something back.

Since the extension from the LIA project, many more volunteers have been appointed. The volunteers do not just undertake dining companion roles but also assist with clerical duties and welcome patients to ward and outpatient areas, enabling staff to concentrate on their clinical duties.



Dining companions with a patient.

For more information about the Listening Into Action project, please email Carla Howgate, Senior Clinical Audit & Effectiveness Officer/TARN Coordinator at carla.howgate@nhs.net

Dementia and Delirium – specialist support at Guy’s and St Thomas’

In 2011, Guys and St Thomas’ NHS Foundation Trust created a Dementia and Delirium (DaD) team as part of the Dementia CQUIN. The team provide advice to staff over the phone or visit a patient when primary care staff feel that caring for the patient on the ward may exceed their skill set.

The DaD team was formed by pulling existing resources into one team – only a clinical nurse specialist was employed especially. This meant there was little extra cost in the set up. The team is multidisciplinary which allows referrals to be shared out to best fit the needs of both patient and referrer. Since launching, the DaD team has received about 120 referrals a month which demonstrates that staff often feel the need for more support in

cases like these. About 70% of referrals are for delirium and about 30% for dementia.

The DaD team use the hospital’s electronic systems to aid and educate primary care staff. Making a request to DaD produces a delirium and dementia bundle (different versions available for doctors and nurses) which prints out at bed side to provide instant advice and support on the processes to follow. The team (as part of the vulnerable adult’s team) has also helped to roll out ‘Barbara’s story’ to 12,000 staff members.



Steps shown in the dementia bundle for staff.

DaD has been part of a multipronged approach to improving care of patients and carers in Guy’s & St Thomas’ NHS Foundation Trust.

For more information on the Dementia and Delirium team, please contact Dr Kinirons at mark.kinirons@gstt.nhs.uk

Preventing pain and dementia friendly design at West Suffolk

West Suffolk NHS Foundation Trust has been working to improve pain assessments of people with cognitive impairment as well as incorporating dementia friendly designs onto wards.

The dementia practitioner for the Trust has been working with the pain team at West Suffolk Hospital to improve pain assessments for people with dementia. All nursing staff are encouraged to complete a questionnaire to find out:

- How they assess pain in patients with communication difficulties, including dementia
- Whether they are aware of and / or use the Abbey Pain Scale (and if not, what assessment strategy they do use)
- How they assess the effectiveness of pain medication
- Whether the patients family / carers are involved in pain assessment

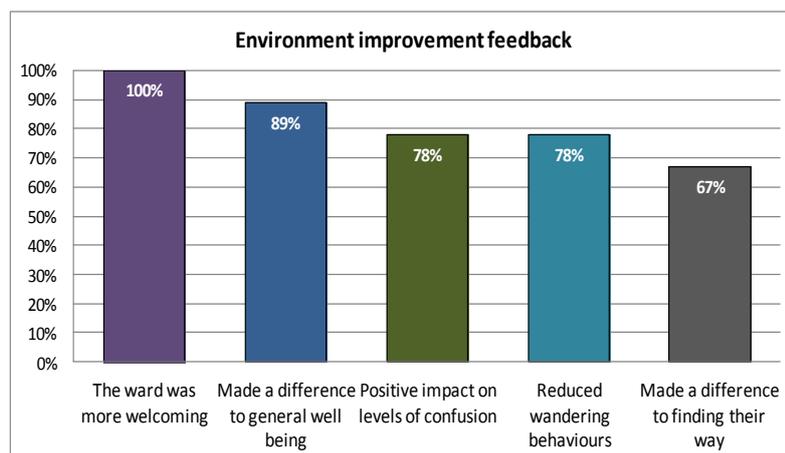
Feedback received will improve training and will support the promotion of improved pain assessment and management for this group of patients.

A 'Dementia friendly design' programme has been carried out on one of the medical wards, involving:

- Day room providing space for reminiscence activities, eating and drinking and quiet time away from the busy bay areas
- Colour identified bays to help orientation

- Maximising colour contrast on doors to aid patients with memory or visual perception problems
- Easily visible clocks in ward areas
- Larger, brighter signs with pictures and words for ward bathrooms and toilets
- Contrasting colours in toilets and bathroom facilities so that things like toilet seats and handrails are all easily identifiable against their background

Overall, staff surveyed liked the changes and thought they made a positive difference to patients with dementia. The graph shows the percentage of staff who agreed with statements about the impact of the changes.



Results of the staff survey of environmental changes on the ward.

For more on the initiatives at West Suffolk NHS Foundation Trust, please email Julie Fountain, Lead Nurse for Dementia & Frail Elderly at Julie.Fountain@wsh.nhs.uk

Compassionate Care shortlisted programme at Royal Devon and Exeter

The Royal Devon and Exeter NHS Foundation Trust was shortlisted for the Compassionate Care category in the recent Health Service

Journal Awards for the work they have done to improve the quality of care for patients and their families living with dementia.

Staff education and training: All staff were equipped with the knowledge, skills and confidence to provide compassionate care for patients and their families. Staff caring for patients with dementia or delirium also receive the 'Confusion, Delirium and Dementia Care Plan & Delirium Guidelines' and other associated guidelines, to ensure care provided is in line with best practice.



Staff who have received dementia awareness training.

Information and communication on dementia/delirium: A 'Forget me not' campaign was introduced to improve communication with patients who have confusion of any form. A series of leaflets were developed, covering:

- Standards of care for people with dementia while in hospital
- Eating and drinking for patients in the later stages of dementia
- Information on dementia and delirium in hospital.

Patient/staff support: 'This is Me' is used to support patients in the unfamiliar hospital environment. Dementia champions have also been established, where staff who are local experts are able to provide advice and

support to other staff and patients on dementia issues.

Patient and carer involvement: Feedback is continually and routinely sought from patients, carers and staff through 'What went well...even better if' cards. A carers survey is carried out on a monthly basis by the governors. Results are analysed by the Steering Group monthly and reviewed by the Board twice yearly.

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Patient Feedback Royal Devon and Exeter NHS Foundation Trust

We encourage patients and relatives to tell us how we are doing.
If you are able, please can you tell us what went well for you today?

The dedication to care by all staff was excellent. Everyone showed compassion and kindness and couldn't be more helpful during my Dad's admission to Tomidge Ward in April-May. I can't thank you enough for what you did for my Dad [redacted]. Care was excellent, staff were very helpful and only too happy to discuss ongoing care and treatment. Thank you everyone, you are the true face of the N.H.S. Thank you.

An example of a patient feedback form.

Diagnosis and assessment of dementia: Early diagnosis of dementia has been established through the use of the Find, Assess, Investigate, Refer (FAIR) assessment. Compliance with the FAIR assessment has increased from 65.15% in September 2013 to 93.2% in June 2014. The Trust has also rolled out blue ID bands for patients with a formal diagnosis of dementia.

Nutrition: Tables and chairs have been set up in bays which mean that frail, older patients, including those with dementia, can now enjoy eating meals out of bed. This has enabled positive social interaction and significantly improved nutrition and hydration. The Dementia and Delirium Steering Group also implemented continual provision of finger foods for patients on these wards. Feedback from patients and families has been positive.

The Group plan an audit to determine the effectiveness of the interventions.



Patients dining at the table in their bay.

The Devon Garden & Memory Walk at the Royal Devon & Exeter Hospital (Wonford):

The Dementia and Delirium Steering Group made it a priority to develop a garden space away from the clinical ward environment. The garden aims to improve the hospital environment for those with dementia by providing a therapeutic place for peaceful interaction between patients, their family & friends, and hospital staff. The garden is also a place where patients could be assessed for cognitive ability and mobility capacity to inform onward care.

Stephen Pettet- Smith manages Arts & Culture for the Trust and is project lead. He explained the concept:

“The real breakthrough came with the announcement of the Department of Health’s ‘Improving the environment of care for people with dementia’ challenge fund – which we gleefully bid for, the Trust also contributed charitable funds. The project is one of the national pilot schemes, and will now feature with seven other projects in a NHS England Building Note.”

The key wards for dementia care are on the second floor of the hospital, which meant

there were access problems. However, the Steering Group took the opportunity to build a Memory Walk along the route to the garden - panels depicting a time line of popular culture between the 1930s and 1980s.

The design takes inspiration from a village green and is planted in a cottage garden style. The ‘Devon Banks’ divide the space to promote privacy for families and the ‘decades’ incised seats echo the ‘memory walk’.

A ‘stories’ telephone box uses technology to deliver stories of bygone times. The ‘Tuneful’ memories corner delivers popular music, enabling patients’ prime years to be recalled. The ‘Cabinet of Scent’ displays a range of materials and objects, from cold tar soap to lavender, chosen to summon up memories. A carefully designed feature was placed to naturally amplify the sound of babbling water while wrought iron seating continues the theme of a village green. The Pavilion is intended to provide a stage for performing arts and is also a pleasant place to sit.



The memory garden.

For more on the Royal Devon and Exeter NHS Foundation Trust, please contact Dr Jane Sword, consultant physician at j.sword@nhs.net

Interesting reads:

Dr Inderpal Singh, a Consultant Physician and Geriatrician at Aneurin Bevan Health Board, was part of a review which discussed the implications and benefits of the Birmingham Rapid Assessment Interface and Discharge (RAID) model in improving the quality of care for older people or those at risk of dementia. Overall, the model has been shown to be effective in reducing both length of stay and avoiding readmissions in hospitals. For more information on RAID model see [the article](#).

Dr Singh has also sent us a review article on the assessment and management of dementia in a general hospital setting. The review highlights that current medical training not only generates relatively low numbers of geriatricians and specialists with interest in dementia, but also there is a lack of appropriate training in assessment and management of dementia. It was identified that there remains a huge need for better staff training and support to provide safe, holistic and dignified dementia care. See the article [here](#).

For more information on these articles, please contact Dr Inderpal Singh, Consultant Physician & Geriatrician at Aneurin Bevan University Health Board at Inder.Singh@wales.nhs.uk

The CQC '[Cracks in the Pathway](#)' report provides an easily readable good and poor care comparison about the discharge episode and includes illuminating feedback from carers and patients.

Resources:

See the King's Fund Enhancing the Healing Environment tool referenced in the Ipswich Hospital NHS Trust article [here](#):

Acknowledgments:

We would like to say a big thank you to all those who have taken the time to share their ideas and stories with us. Your contributions are greatly appreciated. If you have an article or idea which you would like to share with us for the next bulletin, please send any information to NAD@rcpsych.ac.uk

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Guidance for contributors

We welcome all contributions and aim to publish periodic bulletins on hospital progress with action plans. To structure your contribution it can be helpful to think about:

Why – what led you to make the change?

How – what did you need (resources, personnel, lead input)

Who – who was involved and who did the change benefit? Have you got evidence of the benefits of change?

Where now – what are you planning next to build on this achievement or to make sure the initiative continues?

Please include a contact email which we can publish with the article. Accompanying artwork – photographs, simple diagrams -and patient comments are always good. Do contact us with any queries.