

### Dementia Strategy Progress report

<b>Trust Board - Part 1</b>	<b>Item: 14</b>
<b>Date: 25<sup>th</sup> May 2016</b>	<b>Enclosure: J</b>
<p><b>Purpose of the Report:</b> In January 2014 the Trust Board approved the Dementia Strategy 2014-2017. The Trust Board received an update in October 2015 and the attached paper provides a further report on progress.</p> <p>The report demonstrates that overall good progress is being made against the ambitions of the Dementia Strategy 2014-2017. Key areas of further focus are on developing the dementia score card and setting an action plan to deliver a reduction in harms within patients with dementia, completion of the first ward refurbishment and expanding the training programme</p>	
<b>For: Information</b> <input type="checkbox"/> <b>Assurance</b> <input checked="" type="checkbox"/> <b>Discussion and input</b> <input type="checkbox"/> <b>Decision/approval</b> <input type="checkbox"/>	
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<b>Risk Implications – Link to Assurance Framework or Corporate Risk Register:</b>	EST_SEC006 22 Loss of high risk missing patients from both ED and within the ward areas.  G006 "Risk of falls resulting in harm for highly vulnerable patients
<b>Legal / Regulatory / Reputation Implications:</b>	CQC compliance
<b>Link to Relevant CQC Domain:</b> <b>Safe</b> <input checked="" type="checkbox"/> <b>Effective</b> <input checked="" type="checkbox"/> <b>Caring</b> <input checked="" type="checkbox"/> <b>Responsive</b> <input checked="" type="checkbox"/> <b>Well Led</b> <input checked="" type="checkbox"/>	
<b>Link to Relevant Corporate Objective:</b>	<ul style="list-style-type: none"> <li>Implement Year 3 of the Dementia Strategy</li> </ul>
<b>Document Previously Considered By:</b>	N/A
<b>Recommendations:</b>  The Trust Board is asked to: <ul style="list-style-type: none"> <li><b>Note</b> the progress being made with the Dementia Strategy 2014-17 and areas for further focus</li> </ul>	

## **1. Introduction**

- 1.1. The Dementia Strategy 2014-2017 was approved by the Trust Board in January 2014. The Trust is therefore currently in Year Three of the strategy (April 2016– March 2017).
- 1.2. The Dementia Strategy Delivery Group and Environments of Care sub-group continue to oversee improvements, take place monthly and reports to the Clinical Quality Improvement Committee.
- 1.3. Given the interest the Trust Board has taken in this area it was requested that frequent updates on progress are presented to the Trust Board, and this paper provides updates on key areas.
- 1.4. As envisaged in the strategy actions have continued to evolve as opportunities have arisen, or different needs identified.
- 1.5. Overall progress with the strategy is good in the majority of areas. Key areas of further focus are on developing the dementia score card and setting an action plan to deliver a reduction in harms within patients with dementia, completion of the first ward refurbishment, and expanding the training programme.

## **2. External Profile**

- 2.1 It is the aim of the Trust to be a leading centre for providing excellent care for patients with dementia. Throughout the last year steps have been taken to highlight the work the Trust is undertaking to external stakeholders. This is to enable influence on policy, funding and to enhance interaction with other centres of best practice to aid our learning. The following are key highlights of the work undertaken:
- 2.2 The Alzheimer's society launched its Fix dementia care campaign at the hospital in January 2016, with Jeremy Hughes, Chief Executive being interviewed in the activity room with exercise class going on in the background. This was featured on BBC national news
- 2.3 The Surrey Comet featured a full page article about the care of patients with dementia at Kingston hospital in April, focusing on the activity timetable
- 2.4 The activity room hosted a member's event on the 18<sup>th</sup> April which was well attended and showcased the different activities patients with dementia have access to
- 2.5 Justine Sweet, Head of Audiology is one of ten people working in the medical professions, to be awarded a Winston Churchill Memorial Trust Fellowship. As a Churchill Fellow Justine will be travelling to the USA to investigate innovative assessment and post diagnosis approaches in hearing loss and dementia
- 2.6 The Dementia rarely travels alone: Living with dementia and other conditions 'All-Party Parliamentary Group on Dementia (2016) report has now been published and the Trust is named as providing expert witness evidence to this.

## **3. Progress**

- 3.1 The sections below provide key areas of progress on the 5 core components of the strategy

### **3.2 Care relationships and staff skills**

- 3.2.1 Olivia Frimpong commenced as the service improvement lead for dementia and delirium in December 2015.
- 3.2.2 Induction for all band 5 nurses now includes a full day on dementia awareness and management. All New band 2 nursing assistants have training on dementia as part of their care certificate
- 3.2.3 In response to the recent staff survey, which highlighted training needs on how to deal with aggressive and challenging behaviour, extra dementia management study days for permanent staff been added to the training brochure.
- 3.2.4 To reinvigorate the dementia champion role, in clinical areas, two hour training sessions have been held to enable champions to model good practice.
- 3.2.5 Corporate induction has been reconfigured and dementia awareness is taught on clinical induction day two alongside a stand for non-clinical staff to view on day one.
- 3.2.6 Individual training sessions have been organised with radiology and audiology as part of their department study days. Bite size teaching is being introduced in A &E on a fortnightly basis for 30 minutes at the beginning of their day.

### **3.3 Environments of care**

- 3.3.1 **Yellow toilet doors with new signage** - Toilet doors in ward areas on Esher wing and in A&E are being painted yellow. Yellow is one of the last colours to fade for people living with dementia. The environment of care advisory group reviewed the evidence behind painting doors to help with orientation and way finding and together with a specialist paint consultant selected a yellow that contrasts with the surroundings to stand out to patients with dementia. New blue pictorial toilet signs are going up across the trust in all ward areas on Esher wing and Kingston surgical centre to aid with way finding to bathrooms. Corresponding shower signs are also being put up in ward areas across Esher wing and Kingston surgical centre. Pictorial Toilet signs will also be put up across outpatient areas and in the emergency department
- 3.3.2 **Dementia clocks** - Red analogue clocks with clear time and date, day and month are up across all inpatient areas and A&E. These are to help with orientation.
- 3.3.3 **Derwent ward** - As part of year two of the dementia strategy we have commenced plans to make the first of our elderly care wards dementia friendly. Through meetings with architects and consultation with staff, patients, carers and the local community we have now finalised design plans for the new ward. Work will commence in July 2016 with the aim to be back open by the beginning of November 2016. The main focus is to improve flooring, lighting, using colour for way finding and art work to help calm and create a homely environment. We have also introduced more social spaces for patients and their families to meet and promote independence during their stay.

- 3.3.4 **Furniture showcase** - To help decide which furniture would be most appropriate for the newly refurbished ward a furniture show case was held at the end of April 2016. There was an excellent turn out of staff, patients and carers and the design team gained lots of valuable feedback to inform the choices of furniture for the ward.
- 3.3.5 **Derwent ward staff training** - Whilst the ward is decanted and the work occurs, Derwent ward staff will have some training about the changes in how they care for patients when they return to the newly refurbished ward, for example encouraging patients to get up and walk around in order to make use of the social areas and activities and maintain independence.
- 3.3.6 **Visits to other sites** - To learn from best practice visits to other sites have been undertaken by members of the environment of care advisory group. This has included the Royal Star and Garter care home, West Middlesex Hospital, St. Helier Hospital, Warrington Hospital, Amy Woodgate care home.
- 3.3.7 **Trial of Important Things About Me (ITAM) above bed on Cambridge Ward** - Different ways of displaying personalised information about the patient by the bedside are being trialled. The forget me not scheme's 'important things about me' booklet often gets tidied away and is not visible. Cambridge ward have been trialling a reversible picture that has the same information displayed above the bed on a wipe clean poster and we are looking at whether it can fit on to the bedside locker.
- 3.3.8 **Audiology review** - The dementia Service Improvement Lead has visited the audiology department to advise on how to make it more dementia friendly and there are planned reviews of ED and radiology as well.
- 3.3.9 **PLACE** - The trust annual PLACE assessment (Patient Led Assessment of the Care Environment) was conducted on the 8<sup>th</sup> April 2016. The team was led by the dementia strategy group carer representatives. The assessment for dementia friendly environments was completed with improved guidance on how to interpret the questions. The results are currently going through national review process for approval and have not yet been published.

### 3.4 Active days and calm nights

- 3.4.1 **Therapeutic activity role** - The therapeutic activity team is undergoing restructure to better suit the current needs of the service. The plan is to have a full time therapeutic activity coordinator with support from activity assistants to deliver group and individual sessions.
- 3.4.2 **Memory café** - Memory Café continues to run twice a month on a Tuesday afternoon in conjunction with Home Instead. There is a full programme for the year including belly dancing, autoharps, sensory experiences, painting, crafts and events themed around the calendar. We are working with Home Instead to market this more widely to the community and expand the café to include information sessions for carers.
- 3.4.3 **Activity boxes** - Each ward area has its own activity box filled with reminiscence tools and puzzles for the ward to use. These are to enable staff to engage patients with dementia to take part in activities on the ward and reduce boredom and agitation.
- 3.4.4 **Hairdressing** - Regular hairdressing started in January 2016 ran by a volunteer who is a beautician. Following a successful bid to Friends of Kingston Hospital, the activities room is now

fully equipped to wash and blow dry hair on Monday and Thursday afternoons. This is a very popular activity and has a very positive influence on patient's mood and wellbeing.

3.4.5 **Other Activities** - The bingo club runs on a Wednesday morning and patients receive small toiletries prizes that have been donated by staff members. Animal bingo with sounds has been ordered for patients that struggle with numbers. A seated exercise class runs weekly with support from the physiotherapy team Miko, a pat dog is another very popular activity; he visits on a Wednesday afternoon and goes round the wards visiting patients with dementia by their bed side.

3.4.6 **Calm Nights - Milky drinks** - Giving out milky hot drinks at bed times have been trialled on several wards to promote calm nights, with a view to roll out across all wards.

### 3.5 Involving carers

3.5.1 **Carer feedback sessions** - As part of the consultation process for Derwent ward we held carer feedback sessions on a weekly basis for 5 weeks to discuss the refurbishment plans and gain comments and thoughts about the refurbishment. We also visited a carer support group in the community to show the plans and talk in general about care of people living with dementia at Kingston hospital. We also invited carers to our furniture showcase.

3.5.2 **Carer representatives** - We continue to have two carer representatives who sit on both the environment and the strategy group and have been very involved in all improvement work.

3.5.3 **Carer information** - We are in the process of redesigning the carer leaflet and have consulted the above groups about what they feel needs to be included on carer information. One idea is to create a 'what to expect' video for carers of patients with dementia similar to one produced for elective surgery at the South West London Elective Orthopaedic Centre. We are working with Kingston Carer's Network to develop this.

3.5.4 **John's Campaign** - We remain signed up to John's campaign and use this philosophy in welcoming carers to the hospital as experts in how to look after their loved ones with dementia.

3.5.5 **Dementia Hub** - The Trust is progressing a bid for approximately £500,000 to the Big Lottery to create a dementia hub with a network of partnerships and programme of support activities. This would act as a central point in the community for people living with dementia and their carers to come and seek advice and support. The dementia Service improvement lead and the trust's bid writer have visited the Merton Dementia Hub to see how it could work in Kingston, and what is required from the bid.

3.5.6 **Theatres leaflet** - Theatres have produced a leaflet for carers explaining that they are welcome to be with their loved one in the anaesthetic room prior to surgery and then be there when they wake up in recovery. This is to reduce fear and anxiety for patients with dementia who undergo surgery

3.5.7 The Q4 2015/16 **Carers FFT** result was 83.78%, based on 37 responses. Further analysis is taking place to review reasons for this rating and will be discussed at the next Dementia Strategy Delivery Group.

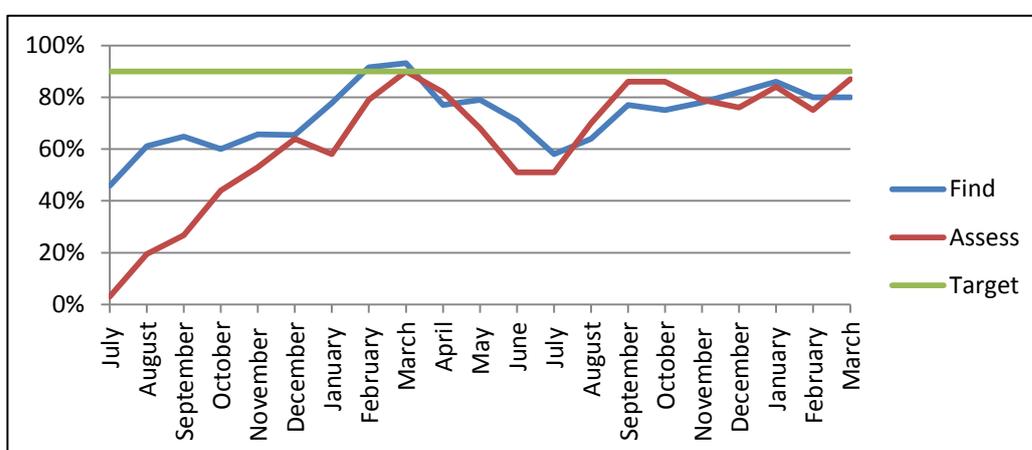
### 3.6 Diagnosis and clinical care and treatment

3.6.1 The CQUIN (Commissioning for Quality and Innovation) for Dementia 2015/16 required 90% compliance with indicators of patient care regarding dementia assessment to obtain the agreed income. There are two parts to the patient care aspect of the CQUIN:

- *Find*: Ask the Dementia Screening Question – ‘Have you become more forgetful during the past 12 months to the point where it has affected your daily life?’
- *Assess*: Carry out a Dementia & Delirium Screen if the patient answers ‘Yes’ to the Dementia Screening Question and/or the patients AMTS $\leq$ 8.

3.6.2 The sample is all the inpatients aged 75 and over who have been admitted for 72 hours or more. The overall results from July 2014-March 2016 are displayed in the graph.

**Dementia CQUIN results from July 2014 – March 2016**



3.6.3 This is no longer a national CQUIN, however results will still be sent to UNIFY

3.6.4 To improve this, the dementia service improvement lead and audit lead have met with IT to make completing the assessments on CRS easily accessible.

3.6.5 **Dementia score card** - A dementia score card has been developed in conjunction with business intelligence. As part of year two of the strategy we are monitoring the scale of harms for patients with dementia and as such the score card looks at the following measures

- Falls rates including falls with moderate or severe harm
- Incidents of violence and aggressive behaviour
- Serious incidents involving patients with dementia
- Number of patients admitted with dementia
- Average length of stay for patients with dementia
- Number of patients screened and assessed for dementia
- Number of patients accessing therapeutic activities
- Impact of therapeutic interactions on mood and wellbeing

3.6.6 **National Audit for Dementia** - After assisting the National College of Psychiatry in the pilot rounds of the audit, the first national audit commences in June 2016. This includes an organisational audit, staff surveys, carer survey and review of individual case notes.

### **3.7 Future Dementia strategy plans**

3.7.1 This Autumn the Trust is developing plans to hold another dementia conference to celebrate the progress made to date and bring in fresh ideas and latest research to create the next 3 year strategy

## **4 Recommendations & Actions Required by the Board**

4.1 Overall good progress has been made during the second year of implementing the Trusts Dementia Strategy.

4.2 Key areas of further focus are on developing the dementia score card and setting an action plan to deliver a reduction in harms within patients with dementia, completion of the first ward refurbishment and expanding the training programme

4.3 The Trust Board is asked to:

- **Note** the progress being made with the Dementia Strategy 2014-17 and areas for further focus