Overview of the National Dementia Strategy Social Care- Services for Older People

THE IRISH NATIONAL DEMENTIA STRATEGY



Background

- Launched on December 17th 2014
- The aim of the Strategy is to improve dementia care so that people with dementia can live well for as long as possible, can ultimately die with dignity, and can have services and supports delivered in the best way possible.
- The Strategy seeks to raise awareness of dementia and its modifiable risk factors and to reduce stigma.
- It seeks to ensure that appropriate supports and services can be accessed in people's own homes and local community in the first instance, and in other settings as required.
- Seeks to progress the dual and overarching principles of personhood and citizenship by enabling people with dementia to maintain their identity, resilience and dignity and by recognising that they remain valued, independent citizens who along with their carers, have the right to be fully included as active citizens in society.
- Refocus current service delivery to address the individual needs of people with dementia and their carers in a way that is responsive and flexible.

Strategy Development

- A National Dementia Strategy group was established to develop the National Dementia Strategy.
- The group was representative of a range of stakeholders with an interest and an expertise in dementia

The group used a range of approaches which included the following:

- Research review
- Review of international dementia policies/plans/strategies
- Review of Irish policy contexts
- Public consultation process
- Clinicians Roundtables on the National Dementia Strategy
- Workshops with People with Dementia and Carers



Key Priorities under the NDS

- ▶ The following priority areas for action have been identified
 - Better awareness and understanding
 - Timely diagnosis and intervention
 - Integrated services, supports and care for people with dementia and their carers
 - Training and education
 - Leadership
 - Priority Actions are considered to be key to implementation of the Strategy and to be capable of implementation within existing resources or by reconfiguring these resources. These Actions are drawn from across all five of the Strategy's Priority Action Areas, and some have relevance across more than one Action Area.

Priority 1 – Better awareness and understanding

- Public awareness and health promotion measures in order to:
 - Provide a better understanding of dementia in society generally
 - Reduce the stigma that can be associated with dementia
 - Target populations particularly at risk, including people with an intellectual disability
 - Support the implementation of Healthy Ireland (2013) by highlighting the modifiable lifestyle and cardiovascular risk factors which can beneficially impact on risk and time of onset of dementia

Priority 2 – Timely diagnosis and intervention

- Develop a National and Local Dementia Care Pathway
- ▶ The following material will be developed and made available to GPs:
 - Dementia-specific reference material to broaden skills base
 - Guidance on national and local pathways to investigation and diagnosis
 - Information about health and social supports available in the local community.
- Develop guidance material on the appropriate management of medication for people with dementia
- Modifiable lifestyle risk factors, such as tobacco and alcohol use and physical inactivity, should be actively managed as part of the care plan for people with dementia
- Review existing service arrangements so as to maximise the access that GPs and acute hospital clinicians have to specialist assessment and diagnosis of dementia, including, Old Age Psychiatry, intellectual disability services, geriatric medicine, neurology services and memory clinics.

Priority 3 – Integrated services, supports and care for people with dementia and their carers

- Review health and personal social services for people with dementia, to:
- identify gaps in existing provision, and prioritise areas for action in accordance with resource availability,
- Consider how best to configure resources currently invested in home care packages and respite care so as to facilitate people with dementia to continue living in their own homes and communities for as long as possible and to improve the supports available for carers.
- Evaluate the potential of assistive technology to provide flexible support both to carers and to people with dementia.
- Ensure that information on how to access advocacy services, voluntary organisations and other support services is routinely given to people with dementia and their families/ carers.

Priority 4- Training and Education

ANSE will engage with relevant professional and academic organisations to encourage and facilitate the provision of dementia-specific training, including continuous professional development, to relevant occupational and professional groups, including peer-led support and education for GPs.





Priority 5 - Leadership

- The implementation of the National Dementia Strategy will fall within the remit of the Cabinet Committee on Social Policy, to which the Department of Health will report annually on progress
- Minister for Health will appoint of an Advisory Group to advise on the implementation of the Strategy.
- Clear overall responsibility for dementia will be assigned to a person at senior management level within the Health Service.
- The Clinical Strategy and Programmes Division of the Health Service will establish a Workstream on Dementia Care as part of its Integrated Care Programme for Older Persons
- A named key worker in primary care will be appointed to liaise with both primary and secondary care services to support the person with dementia and their carer.

Additional Actions

- A number of actions additional to the Priority Actions have also being identified.
- These actions, in some cases, require resources additional to what is currently available, and will be considered as the required resources become available in the future.

Research and Information Systems

- Funding for clinical, non-clinical (including psychosocial research) and Health Service Executive research on dementia to be a priority.
- Better evidence in relation to dementia in Ireland, including:
 - the needs and preferences of people with dementia and their carers and their experiences and care outcomes;
 - improved national, regional and local estimates of current and future prevalence across all care settings;
 - diagnostic rates, sub-types, use of anti-psychotics, clinical outcomes;
 - the need for and use of health and personal social services by people with dementia and their carers;
 - health and social care system's responses to the needs of people with dementia and their carers;
 - impact of training on quality of care and quality of life;
 - evaluation of psychosocial interventions.
- Better collection of data and use of evidence to inform health and social system responses to the needs of people with dementia and their carers.
- A Programme in Applied Dementia Research (HRB) aligned to the themes, principles and values of the National Dementia Strategy up to €4.57m was launched in 2014

Additional Actions

- Promote an awareness of the Assisted Decision-Making (Capacity) Bill, when enacted
- Consider, following evaluation, the provision of ASI Dementia Advisors
- Develop and implement a dementia and delirium care pathway
- Assignment of responsibility to, a senior clinician within each hospital to lead the development, implementation and monitoring of the pathway.
- Hospitals will be required to ensure that people with dementia have a specific pathway through Emergency Departments and Acute Medical Units

Additional Actions

- Develop guidelines on dementia-friendly ward specification
- Hospitals will prioritise the assessment of social and environmental supports to meet the needs of people with dementia and their carers, including appropriate access to social work support.
- Examine a range of appropriate long-term care options to accommodate the diverse needs of people with dementia, including those with behaviours that challenge.
- Take appropriate account of the potential of new residential models, including housing with care, for people with dementia in future planning
- Develop appropriate training courses for family and other informal carers in keeping with the priorities highlighted in the National Educational Needs Analysis completed by the Health Service Executive in 2010 and Dementia Skills Elevator 2014

Elements of the NDSIP

- Establishment of a NDS Implementation
 Office through the HSE-Social Care
- Provision of Intensive Home Supports for People with Dementia
- Development of a Dementia Awareness Programme
- Education programme targeted at GP's and Primary Care Teams

Evaluation

1. An Evaluation Framework is being developed to capture learning about the overall impact of the NDSIP and the outcomes from the 3 investment priority activities. An evaluation framework will be developed by the HSE in conjunction with an Expert Panel of Evaluators.

THANK YOU

Ireland has published its National Dementia Strategy. Please follow link to read it: http://health.gov.ie/wp-content/uploads/2014/12/30115-National-Dementia-Strategy-Eng.pdf