How to become a Dementia Friendly Practice

All of us want to be treated compassionately and with respect. Patients who have dementia want exactly the same care.

Achieving this in a primary care setting is not complicated. It simply needs a team that can champion a culture of compassionate care supported by a few organisational adjustments.
In 2011 the Royal College of Nursing articulated the **SPACE** principles for Dementia care in a hospital setting.

With the help of our patients and our primary care team we have applied these principles to a GP surgery.

We have added an extra “i” to **identify** a Dementia Champion as a first step, making **iSPACE**, an easy acronym to remember.
6 Steps to becoming a Dementia Friendly Practice (including a star guide to show the impact, start up cost and time involved)

iSPACE
Identify a Dementia Champion

Staff who are skilled and have time to care

Partnership working with carers, family and friends

Assessment and early identification of Dementia

Care plans which are person centred

Environments that are dementia friendly
IDENTIFY a Dementia Champion in the practice

- Implement the iSPACE plan
- Sign up to the Dementia Action Alliance
- Start a spreadsheet of all patients who have Dementia in your practice
- Read the NICE guidance on Dementia
STAFF who are skilled and have time to care

- Arrange a clinical meeting for GPs with your local OPMH consultant to discuss your local dementia pathway and the resources available locally.
- Review your practice Dementia QOF template and make it meaningful to patients.
- Arrange a 1 hour training session for whole team which focuses on the experience of someone with Dementia – Dementia Action Alliance or Alzheimer’s society.
- Give each member of staff the booklet “customer facing staff guide” from the Alzheimer’s society. (Costs £5 for 25 booklets)
- Encourage staff to watch the online video “insights on living with and caring for those with Dementia” by Dr Jennifer Bute (a GP with dementia).
- Continuity of care matters - Allocate one GP to each patient with Dementia.
- Discourage use of antipsychotics - audit this.

Impact: ***
Cost: **
Time: **
PARTNERSHIP working with carers, family and friends

• Identify carers for all patients with Dementia by sending them a letter via the patient to ask them to identify themselves.

• Code the carers and ensure they are included and invited at all stages of the patient’s journey

• Refer the carers to your local carer support agencies

• Ensure the carers are copied in to hospital referral letters so that they are aware of appointment dates (this was the most common request from patients and carers)

• Give the carer and patient a list of helpful contacts in your area. We have printed this information out on business cards – each area will have different information

• Ensure the carer is offered a health check, flu jab and that we remind them that they can take a respite break if needed

• Encourage carers to look at the Alzheimer’s society website to make use of their excellent resources

Impact  ***
Cost    **
Time    *
ASSESSMENT and early identification of dementia

- Encourage a culture where dementia is not stigmatised.
- When someone is concerned about their memory do a formal assessment and refer if needed.
- Offer early support after diagnosis.
- Audit all codes such as “cognitive decline or mild memory disturbance” to ensure they have been converted to a Dementia code once a formal diagnosis is made.
- Once coded add a “major alert” to the patient notes so that everyone is aware of their diagnosis.
- Book double appointments for them – they need more time!
- When they have an appointment add a reminder to the booking so that someone rings them an hour before to prompt them to come.

Impact: ***
Cost: *
Time: **
CARE PLANS which are person-centred

• Encourage patients to complete the Alzheimer’s Society “This is me” document in advance of their review appointment
• Encourage patients and their carers to express their care needs at an early stage so that we make best use of the window of opportunity. Anticipatory care plans are very helpful
• Be aware of the natural stages of Dementia and the symptoms of advanced Dementia
• Identify those patients who are progressing and ensure we link up with social care and add patients to the multi disciplinary meeting list
• Refer on to Dementia “post diagnosis support services”

Impact ***
Cost *
Time *
ENVIRONMENTS which are dementia friendly

- **Good lighting**, a welcoming face at reception and **a sense of calm**
- Uncluttered floor space and plain carpets
- Clear signage for toilets and exits

<table>
<thead>
<tr>
<th>Impact</th>
<th>****</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cost</td>
<td>*</td>
</tr>
<tr>
<td>Time</td>
<td>*</td>
</tr>
</tbody>
</table>
Benefits of being a Dementia Friendly Practice

• Improved patient and carer experience
• Improved teamwork
• Improved clinical consultations – better prescribing and improved referrals
• Improved care planning for the future
• Improved quality of life for our patients
Having taken some time to listen and implement the organisational changes needed we are now in a better position to offer the compassionate, personal care that our patients with dementia and their carers deserve.

We will be looking to our patients to hold us to account.

Dr Nicola Decker
Oakley and Overton Partnership
NICE Fellow, North Hampshire CCG Lead for Dementia
April 2014