

AGENDA ITEM NO: 8

Report To:	Community Health and Care Partnership Sub-Committee	Date:	26th February 2015
Report By:	Brian Moore, Corporate Director, Inverclyde Community Health and Care Partnership	Report No:	CHCP/14/1205/DG
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Subject:	WORKING TOWARDS A DEMENTIA FRIENDLY INVERCLYDE		

1.0 PURPOSE

- 1.1 To update the CHCP Sub- Committee on progress in respect of the Inverclyde Dementia Strategy, and to specifically consider the following:
- [1] The outcomes from Getting It Right for people with dementia, their families and carers: Working Towards a Dementia Friendly Inverclyde 16th May 2014.
 - [2] The Inverclyde Dementia Strategy Action Plan.
- 1.2 To build on previous reports to the CHCP Sub-Committee and provide an update on the position in relation to Inverclyde's objective to promote a Dementia Friendly Inverclyde.
- 1.3 To advise the CHCP Sub-Committee of the intention to progress this in conjunction with the Inverclyde Alliance.

2.0 SUMMARY

- 2.1 The CHCP Sub-Committee received a report in January 2014 in respect of the ongoing work and progress being made in respect of the Inverclyde Dementia Strategy. The CHCP Sub-Committee endorsed Working Together Towards a Dementia Friendly Inverclyde, the Inverclyde Dementia Strategy for 2013-2016; agreed the investment of £70,000 to support implementation of the Dementia Strategy; and agreed to receive annual updates on the implementation of the strategy.
- 2.2 In May 2014 the Inverclyde Dementia Strategy Implementation Group held an event Getting it right for people with dementia, their families and carers: Working Towards a Dementia Friendly Inverclyde. The event included contributions from the Joseph Rowntree Foundation, Joint Improvement Team, North Lanarkshire and the Scottish Dementia Working Group. The aim to increase community engagement locally was supported by the involvement of Community Learning and Development colleagues and active input from WOOP [Wider Opportunities for Older People Initiative].
- 2.3 A report of the event is attached at appendix 1. This identified recommendations from the event which the Implementation Group have considered further to develop the ongoing Action Plan.
- 2.4 The Action Plan reflects work undertaken since May 2014 to develop a detailed plan to enable work to achieve the outcomes identified within the Inverclyde Dementia Strategy to meet the needs of people with dementia, their carers and families:

1. Improved coordination, collaboration and continuity of care across services;
2. Improved access to services
3. Improved flexibility of services;
4. Improve the capacity of services to be responsive;
5. Increase awareness of dementia in the general public and community;
6. Increase the opportunities for people with dementia, their families and carers to contribute to service planning.

The work contained within the plan is continuing to be progressed, and is monitored by the Implementation Group. Appendix 2.

- 2.5 Specifically the Action Plan includes proposals in Outcome 5, Increase Awareness of Dementia in the General Public and Community, to develop a project for the promotion of a dementia friendly Inverclyde. This is supported by the existing agreed resources to enable employment of a senior community development worker which is now being recruited. Once this staff member is in post a project group will be established to take forward piloting of initiatives within a community in Inverclyde.
- 2.6 To support the wider development of the community capacity to respond positively to people with dementia requires a wider partnership approach. It is therefore proposed that this Action Plan is also taken forward via consideration by the Inverclyde Alliance.

3.0 RECOMMENDATIONS

- 3.1 The CHCP Sub-Committee is asked to note the work that is continuing to improve services for people with dementia, their families and carers, through the Action Plan for the Inverclyde Dementia Strategy, which will contribute towards a Dementia Friendly Inverclyde and to endorse the detailed Action Plan.
- 3.2 The CHCP Sub-Committee is asked to note that further work is required in partnership to develop a Dementia Friendly Inverclyde and that this will be taken forward through the Alliance, via the SOA Programme Board.

Brian Moore
Corporate Director
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4.0 BACKGROUND

- 4.1 It is estimated that there will be currently 1384 people over the age of 65 with dementia living in Inverclyde. 651 people were on the GP dementia register in September 2014. This figure is projected to rise significantly over the next 20 years.
- 4.2 Scotland's Second National Dementia Strategy 2013-16 was launched in June 2013 and focuses on providing timely, accurate diagnosis, and better post-diagnostic support, enabling good quality life at home for longer, and supports the development of dementia friendly local communities.
- 4.3 Improving services for people with dementia their families and carers is a key priority for both Inverclyde Council and NHS Greater Glasgow and Clyde. Dementia is an important theme within Reshaping Care for Older People and the Joint Commissioning Plan for Older People.
- 4.4 Creating a dementia friendly Inverclyde builds on good foundations already in place. A report to the CHCP Sub-Committee in January 2014 set out the actions that were underway to implement the Dementia Strategy. This report provides further detail of some of the key work streams underway and proposals that will contribute to creating a dementia friendly Inverclyde.
- 4.5 The concept of Dementia Friendly Communities is an emerging one. There is an increasing body of literature, guidance and examples from across the UK and beyond which highlight key areas that can help to make a community dementia friendly. The Inverclyde Dementia Strategy was written reflecting this guidance.

Creating a Dementia-Friendly York, a Joseph Rowntree Foundation publication, identified five key domains that should be addressed as part of developing a dementia friendly community:

- place - including environment, housing and transport
 - people - including the social attitudes of the community generally and how people treat you (stigma)
 - resources - not just health and social care services but shops, leisure, transport, community facilities and resources
 - networks - how people work together to support older people
 - the person with dementia their families and carers - whose voices should be at the heart of the process of building a dementia friendly community
- 4.6 A guide for local authorities on 'Developing Dementia – Friendly Communities' produced by the Local Government Association stated that "a dementia-friendly community may be defined as being a place:
 - in which it is possible for the greatest number of people with dementia to live a good life
 - where people with dementia are enabled to live as independently as possible and to continue to be part of their community
 - where they are met with understanding and given support where necessary."
 - 4.7 Priorities for developing a dementia friendly community from feedback from local consultation and engagement events are summarised below:

Information and awareness raising, to include the following:

- Retailers (particularly businesses important to older people eg post offices, pharmacies, local supermarkets etc)
- Buses/ other public transport providers
- Health services
- Police
- Fire service
- Schools

Working in partnership, across Council departments and with key partners including:

- Voluntary sector
- Housing services
- Environmental services (eg dementia friendly signage and lighting)
- Planning services
- Neighbourhood Partnerships

4.8 These priorities echo those identified within the growing literature about dementia friendly communities. It is clear that a cross-Council and wider partnership approach is essential to developing a Dementia Friendly Inverclyde and would require accessibility and support for people with dementia to become key considerations in wider policy development in areas such as planning, transport and environmental services. Creating a Dementia Friendly Inverclyde would also require buy-in from a range of partners including the business community, transport, housing and schools.

4.9 There is already a lot of work underway within Health and Social Care which will contribute to making Inverclyde Dementia Friendly, and meeting the objectives of the Inverclyde Dementia Strategy. The Strategy is being progressed by a number of work streams, through the Inverclyde Dementia Strategy Implementation Group, reporting to the Reshaping Care for Older People Project Board.

Work streams include:

- Improving the quality of care for people with dementia in a range of settings within the community and including hospitals and in care homes
- Raising awareness of the importance of living well with dementia
- Enhancing post-diagnostic support, through the partnership with Alzheimer Scotland employing a Link Worker working within the Older Persons Mental Health Team
- Enhancing capacity to work within the community in partnership with Community Learning and Development.

4.10 Awareness raising, communications and information provision are key elements for all work streams. Support from Corporate Communications has been obtained to enable the development of a communications plan for the existing dementia strategy. The focus is on website development and information in respect of Health and Social Care currently.

4.11 In order to take this further forward and to embed the dementia strategy more widely and involve more stakeholders, as outlined above, then a more sophisticated communication strategy will be required to develop a dementia awareness campaign. The dementia awareness campaign could lay the foundations for Inverclyde becoming a dementia friendly community. The objectives of the dementia awareness campaign would include:

- increasing public understanding of dementia, its symptoms and its impact on people's lives
- encouraging people with symptoms of dementia to get a diagnosis as early as possible so that they can access the support they need to best manage living with dementia
- ensuring that carers of people with dementia know how to access local information and support that will help them care as long as they wish to
- challenging the stigma of dementia with a view to gaining greater acceptance and recognition of the needs of people with dementia within the community.

4.12 **Workforce development** is an important consideration within each of the work streams. A wider learning and development plan requires to be developed across the council and wider partners. Initiatives underway include:

- Training people within health and social care and disciplines to become Dementia aware.
- Opportunities for joint learning with the independent and voluntary sectors are being

developed.

- Dementia training has taken place within care homes, aligned to the national Promoting Excellence Framework.
- Awareness raising in the community will form part of the Community Learning and Development workers' role in challenging the stigma of dementia with a view to gaining greater acceptance and understanding of dementia.
- This can be extended to include training a wider range of people to become Dementia Friends/ Champions across the community. Discrete dementia awareness briefings could be developed and delivered for other service teams across the Council, and partnerships for example call handlers and housing support staff. Adopting and disseminating the How to Help people with dementia: A customer facing staff guide could support learning and development.

This is being taken forward through the learning and development group and will need to link in with OD&HR to embed learning and development within the corporate training plan.

4.13 Post Diagnostic Support in Dementia

Enhancing post-diagnostic support is a key commitment of Scotland's National Dementia Strategy 2013-16, with a national HEAT target which states that

“by 2015/16, all people newly diagnosed with dementia will have a minimum of a year's worth of post-diagnostic support coordinated by a link worker, including the building of a person-centred support plan.”

Post diagnostic support is provided via a Link Worker, with the aim being to ensure that everyone newly diagnosed with dementia has access to post diagnostic support. The Link Worker supports people for up to one year following their diagnosis of dementia, providing support and advice and linking people with dementia and their carers with other relevant services and support. The Link Worker also assists with planning and decision making in relation to future care arrangements and will work with the person with dementia their families and carers to develop a person centred plan.

The Link Worker has been in post since February 2013. During the first full year reporting in respect of the HEAT target between April 2013-14 67 people newly diagnosed with dementia were referred, and engaged with this support.

An evaluation of the first twelve months of the post diagnostic support service has identified a number of issues which are currently being considered to inform ongoing development of this provision, specifically:

- The point at which people seek diagnosis, the link to stigma, and impact on how people can make best use of support after diagnosis;
- Clearer referral pathways to support diagnosis and access to post diagnostic support through improved multi disciplinary working;
- Identified groups not accessing the service, specifically people living in care homes and people with Learning Disability;
- Methods of delivery of the 5 pillars of support model which ensure this is meaningful and useful to people with dementia and their families.
- Demand and the capacity required to meet this in the future.

The Link Worker is involved in the ongoing development of provision of post diagnostic support within the local mental health service development work, and within forums within NHS Greater Glasgow and Clyde to support shared learning and promotion of best practice.

4.14 Developing Community Capacity to respond to people with dementia

The Dementia Strategy aims to raise awareness of dementia by engaging with a wide range of stakeholders. The following events have taken place to date:

- Launch of Inverclyde Dementia Strategy Consultation April 2013

- Getting it right for people with dementia, their families and carers: Working Towards a dementia friendly Inverclyde 16th May 2014

These events have been well attended and provided an opportunity to raise awareness of dementia within our community, promote the Strategy, and update stakeholders on the work underway in Inverclyde. The May event in particular generated valuable feedback to inform the further development of a dementia friendly Inverclyde.

- 4.15 The partnership working with Community Learning and Development provides an opportunity to enhance the work within local communities. The current resource allocation provides for a senior community development worker post for a twelve month period to undertake community development initiatives and undertake scoping to progress this more widely in Inverclyde. This will utilise the experience of the model adopted by North Lanarkshire based in the community of Motherwell, informed by work done by the Joseph Rowntree Foundation in York.

The remit of this post is to:

- Raise awareness of dementia aimed at reducing stigma and developing greater understanding within the community;
- Improve knowledge of existing resources available to support people within the community out with services, and their capacity to respond to people with dementia;
- Develop and support community led initiatives for people with dementia to take part in (e.g. singing groups, dementia cafés);
- Engage the community via local events to celebrate the achievements of people who have dementia and develop intergenerational work with young people in Inverclyde.

It is proposed that this work will be undertaken on a pilot basis within a community/ locality within Inverclyde initially, acting as a test site to enable learning from the project to be used to inform roll out across Inverclyde in support of the overarching objective to enable a Dementia Friendly Inverclyde.

- 4.16 In order to take forward a dementia friendly Inverclyde, further work is required with wider members of our community, specifically engagement with the business community. Proposals from the May 2014 event included a dementia friendly award scheme where businesses, organisations and communities from across Inverclyde would be asked to pledge support for the initiative and take forward relevant actions towards becoming dementia friendly.

Adopting the Local Government Association Guidance and adapting this to develop a local toolkit to support broader engagement would provide the basis on which to launch a Dementia Friendly Award Scheme.

Experience from Motherwell and York indicates that this will require further investment and support. Future actions required will include briefings, training, and publicity for local shops and businesses.

- 4.17 The Inverclyde Alliance Partnership Board will be a key forum for embedding these initiatives demonstrating commitment to working towards a dementia friendly Inverclyde along with an action plan for how the work will be progressed across the partnership and within organisations. This would provide the strategic focus and facilitate the wider buy-in required to take the initiative forward, building on the infrastructure outlined above in respect of the work taken forward within health and social care.

5.0 PROPOSALS

- 5.1 This report outlines work that is already underway to implement the Inverclyde Dementia Strategy. Work following the May 2014 event and the development of the detailed action plan highlight further key areas to be considered in creating a Dementia Friendly Inverclyde.

Creating a Dementia Friendly Inverclyde requires a cross-Council approach, with commitment from all departments and partner agencies. The resources already committed as outlined above will continue to enable us to embed a dementia friendly approach. However consideration of resources will be required in order to extend reach and co-ordinate the cross

council and partnership work required to drive forward implementation of our objective.

- 5.2 It is proposed that this is taken forward via the Inverclyde Alliance and that the Action Plan and proposals in respect of developing further the community capacity building work will be presented to the Inverclyde Alliance on this basis.

6.0 IMPLICATIONS

Finance

- 6.1 This report outlines work being progressed through the Inverclyde Dementia Strategy. The Strategy relies on mainstream service budgets, with additional allocations made through Independent Living Fund earmarked reserves:

Alzheimer Scotland Link Worker: £30,000.

Community learning and development senior worker-Dementia Friendly Inverclyde: £35,000.

Community development investment and support costs: £5,000.

Additional costs to create a Dementia Friendly Inverclyde will need to be quantified as part of further scoping work.

Financial Implications:

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
Mental Health	Various	2015-16	£70,000	N/A	Funded from Independent Living Fund earmarked reserve

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments
N/A					

Legal

- 6.2 None

Human Resources

- 6.3 Employment of fixed term Senior Community Development Worker for 12 months.

Equalities

- 6.4 Developing a Dementia Friendly Inverclyde will contribute to the Council's advancement of the Public Sector Equality Duty (PSED) general duties which are to (i) eliminate unlawful discrimination, harassment and victimisation, (ii) advance equality of opportunity and (iii) foster good relations.

Equality and Rights considerations will be central to the development of this work and engagement with people living with dementia and their families and carers, along with other protected characteristic groups will help to ensure that the positive impact of the work is maximised and any potential negative impacts are mitigated. The Dementia Strategy supports

the Standards of Care for Dementia in Scotland and the Charter of Rights for People with Dementia.

Has an Equality Impact Assessment been carried out?

YES (see attached appendix)

NO - This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

Repopulation

6.5 The ageing population profile in Inverclyde will increase the prevalence of dementia.

7.0 CONSULTATION

7.1 The report provides details of engagement events that have informed the development of the Dementia Strategy. Further engagement will take place as the specific work streams progress, including the development of a Dementia Friendly Inverclyde.

8.0 LIST OF BACKGROUND PAPERS

- 8.1 CHCP Sub Committee Report January 2013
- CHCP Sub Committee Report September 2013
- CHCP Sub Committee Report January 2014
- National Dementia Strategy 2013-16; Scottish Government
- Creating a Dementia-Friendly York, a Joseph Rowntree Foundation report
- Developing dementia-friendly communities; Local Government Association
- Dementia Friendly Yorkshire First Steps in the Journey 2014
- Improving the design of housing to assist people with dementia: CIH
- How to help people with dementia: A customer facing staff guide
- Research into dementia services in Inverclyde for SAMH: Red Circle Communications: 2014
- Presentations from Getting it right for people with dementia their families and Carers: Working towards a dementia friendly Inverclyde 16th May 2014.

Getting it right for people with dementia, their families and carers: Working towards a dementia friendly Inverclyde, 16th May 2014, Event Feedback Report.

1. Introduction

This report summarises feedback from 204 delegates who attended the event on 16th May 2014. The event was organised by members of the Inverclyde Dementia Strategy Implementation Group in conjunction with the Joseph Rowntree Foundation, NHS Lanarkshire, Joint Improvement Team and the Scottish Dementia Working Group.

There was a wide range of delegates representing community, voluntary, third sector organisations and representation from Inverclyde Council, Inverclyde Community Health and Care Partnership, NHS. The event was organised specifically to consider how to create a dementia friendly community.

The number of people with dementia is expected to increase over the next 20 years. Creating a dementia friendly community that can support and sustain people in their homes, neighbourhoods and social networks is an important area of work that public services will need to address.

The dementia strategy provides a framework for the redesign of health and social care services for those people with dementia who require specialist services. The work on dementia friendly communities is designed to compliment the strategy as this focuses on supporting people in the early stages of dementia who are trying to live normal lives and how communities can become more inclusive of people with more complex needs in the later stages of dementia.

Inverclyde Alliance has made a commitment to work towards a dementia friendly Inverclyde.

We would like to thank everyone who attended the event your openness, involvement and willingness to think constructively made the event a success. We hope that this report will help inform the ongoing development of services and initiatives to support people with dementia, their families and carers in Inverclyde.

2. Dementia Friendly Community

The concept of dementia friendly communities is an emerging one. There is an increasing body of literature, guidance and examples from across the UK which highlights key areas that can help to make a community dementia friendly.

The Inverclyde Dementia Strategy was written reflecting this guidance with a strong focus on community inclusion, the event in May 2014 was arranged to consider how we can take the dementia friendly community concept forward.

Creating a Dementia-Friendly York, a Joseph Rowntree Foundation publication, identified four key domains that should be addressed as part of developing a dementia friendly community, the person with dementia, their families and carers being at the centre of building this community;

- Place - including environment, housing and transport
- People - including the social attitudes of the community generally and how people treat you (stigma)
- Resources - not just health and social care services but shops, leisure, community facilities and resources
- Networks - how people work together to support people

A guide for local authorities on 'Developing Dementia Friendly Communities' produced by the Local Government Association states that;

"A dementia-friendly community may be defined as being a place:

- *In which it is possible for the greatest number of people with dementia to live a good life.*
- *Where people with dementia are enabled to live as independently as possible and to continue to be part of their community.*
- *Where they are met with understanding and given support where necessary."*

The Joseph Rowntree Foundation has produced case studies which further demonstrate the potential of a cross council and whole town partnership approach, with examples across a range of public sector services and businesses which could contribute to creating a dementia friendly community.

The contribution from NHS Lanarkshire, sharing the experience of Motherwell Town Centre demonstrated how one aspect of developing a dementia friendly community could be taken forward.

The input from the Joint Improvement Team demonstrated how the role of Housing, planning and design could support this work.

A number of other resources were made available including a guide on customer care which could support staff in a range of frontline services to be able to respond more appropriately and effectively.

This report summarises the feedback from people who attended the event and completed a feedback form.

3. Feedback

The event hosted 19 roundtable discussions involving 195 people and 19 facilitators 204 people.

87 people completed a feedback form.

The feedback from delegates provides some valuable insight which can inform future activity to increase our capacity to create a dementia friendly Inverclyde.

We recognise that delegates who attended may not represent all the views of organisations or representative groups with an interest in dementia in Inverclyde.

4. Summary of Findings

From the feedback it was evident that there was differing levels of awareness ranging from those who had been involved with people with dementia, their families and carers through their work, those with an interest who wanted to find out more information to take back into their organisations, combined with strong representation from people living in Inverclyde who were members of community groups or wanted to find out more about what was available to support someone they knew who had a diagnosis of dementia.

There were 50 people who attended who were involved in the Wider Opportunities for Older People in Inverclyde (WOOPI) initiative. The initiative is supported by community learning and development and has grown based on principles of co-production. WOOPI members participated in either the presentation at the start of the event or as a member of the choir and contributed to the roundtable discussions. WOOPI members were keen to make a contribution and reach out to more people who could benefit from activities currently available within the community.

Participants were very supportive of the dementia friendly community approach and there was a real energy and enthusiasm expressed for the positive qualitative difference this could make to people's lives. Some organisations are already engaged with people with dementia, their families and carers most were planning to make changes to embrace this agenda, utilising the guidance and materials made available on the day. Many participants expressed an interest in becoming involved in a wider network or becoming a contact to receive and disseminate further information.

Most participants attending hoped to increase knowledge of dementia in respect of their current role, the opportunity to network and consider the potential for development opportunities was appreciated.

'It has been very good to network with others'

'Great opportunity to attend and participate in the vision for Inverclyde'

'I have a training role and feel the dementia strategy is leading the way for community based care and co-production in future service provision.'

5. Round table discussions

Most people appreciated the breadth of knowledge and experience reflected in the contributions from the speakers, with practical suggestions and a range of materials, including guidance and case studies, which can be utilised locally to consider how a dementia friendly approach could be taken forward.

Many suggestions were received on elements of a dementia friendly community. With a general consensus of the model adopted within the

strategy and described by the Joseph Rowntree Foundation. The presentation in respect of Motherwell Town Centre provided suggestions on how to extend reach and engage with a wider range of services including retailers and businesses.

The importance of housing, the role of housing providers as community connectors, with support from the Joint Improvement team was welcome. Most respondents commented that the environment in which a person with dementia experiences has an influence on health and wellbeing, stability and outlook with many comments received that a disabling environment can lead to challenging behaviour and in turn stigma and social exclusion. A view was expressed that housing and the built environment are of equal importance to the standard of care provided.

'As a housing support and housing provider in Inverclyde such events are very relevant in my work.'

Suggestions ranged from dementia friendly design, access to facilities and amenities, open spaces, requests to increase the range of facilities, venues and activities available for people to be able to participate.

A number of respondents supported the view that school based educational activity would be beneficial, with the aim of raising awareness of younger people.

A proposal for an Inverclyde dementia friendly award scheme and campaign to enhance partnership and involvement of local businesses were reflected in the responses.

Most people would like to see more localised targeted awareness raising about the support which is available. The need for raising awareness through publicity and media was commented on by the majority of respondents.

The need to ensure that campaigns are positive and deliver a message that early intervention and prevention along with good planning can improve the capacity to live well with dementia was raised.

The requirement for better training, skills and knowledge for everyone was a predominant theme with a particular focus on frontline customer services, adopting the guidance made available at the event.

Many respondents commented on how powerful and effective the presentations at the event were. Contributed and enabled positive discussions on how staff, across a wide range of services, and community leaders could develop the skills to respond more appropriately and effectively with people with dementia, their families and carers.

Access to structured and meaningful activities in the context of community inclusion was consistently raised.

The need to build on existing work, for example, WOOPi adopting principles of co-production was reinforced.

There is a need to extend community development and engagement work to support communities to become more dementia friendly.

Most of the feedback from respondents commented positively to the concept of a Dementia Friendly Community with many suggestions about how to develop initiatives to promote the concept and make this a reality. Better linkages with community planning and the single outcome agreement will be crucial to this aim.

Most respondents were positive about the potential and recognised there were things that can be done, reflected in the following comments.

'Inverclyde could do this if it keeps the momentum up –move away from community health and care partnership to involve more relevant organisations.'

'The JRF initiatives look terrific, very good research to underpin any developments.'

6. What people told us.

People told us the things that would make a difference and there was a perception that the building blocks were there to make this more of a reality. Inverclyde's strength includes a history of good community development and its size is an asset in that partnerships can form more easily making the connections and enabling necessary networks to become established.

People told us that a community can become more dementia friendly by;

- Increasing awareness of dementia.
- Support local groups for people with dementia, their families and carers.
- Provide more information, in particular accessible information, about local services and facilities.
- Take action to make local services and facilities more accessible adopting the guidance already available.

In order to do this;

- Communities need knowledgeable input
- There needs to be publicity and public awareness campaigns
- Communities will require access to some funding to support people with dementia, their families and carers, with support to encourage communities to make better use of existing resources.
- There was support for a wider steering group or network for organisations to work together more effectively.

Better outcomes for people with dementia, their families and carers can be achieved when practical support is seen to be friendly and helpful to boost confidence and slow down the potential for withdrawal from situations which could become untenable for the person with dementia.

Staff awareness to help understanding the issues dementia creates and how best to respond, what dementia means in terms of progression and the potential of fluctuating symptoms. People receiving services are supported to retain independence and self-determination through encouragement, support and training to participate in user-led groups, where peer support can develop with the support of statutory and voluntary sectors. Some of the most valuable support comes from other individuals and groups.

For communities to become dementia friendly people with dementia need to feel confident and encouraged to remain engaged and active in all services and activities where ever they are.

The business case for dementia friendly communities is based on the fact that more of us will need to live more healthy and active lives drawing on support from the wider community for as long as possible and delaying the need for support from intensive health and social care services.

The presentations from the speakers identified a number of key areas that can be progressed that are important to people with dementia and should not be viewed in isolation this was supported in the feedback as follows key messages were;

'Inspiring and I will take ideas and suggestions and use these in services I work within.'

1. The physical environment

There is a lot that can be done to make the physical environment easier for people with dementia, for example, by making signage and directions simple and easier to read, improving lighting and use of colour, signs in the town centre, for example, crossings, pavements, toilets.

Introduce environmental audits in planning and new developments.

2. Local facilities

People have consistently said what was important to them is being able to access shops, banks, transport, leisure facilities as well as mainstream services, supporting health and care needs and access to universal services.

3. Local Groups

People said being members of groups can provide the means and confidence to be part of the wider community.

4. Social Networks

People said social networks can help promote community inclusion and prevent social isolation, this is particularly important as people with dementia can withdraw from networks for fear of stigma associated with diagnosis.

5. Support services are essential from the point of diagnosis.

A key message from the event was to recognise there are things we can all do which can improve lives.

Inverclyde has the building blocks in place to drive this forward and a little investment, primarily leadership, time along with training and a communication strategy could make a difference.

'I have found today exceptionally helpful and has given me hope and reassurance for my family member's ability to be safe and independent.'

'Dementia without walls; informative very relevant liked the positive aspect of building on what you have.'

7. Recommendations

The following recommendations were taken from the feedback and notes taken from the event which will be the subject of further discussion within the Inverclyde Dementia Strategy Implementation Group, Inverclyde Council, Community Health and Care Partnership and with a wider range of stakeholders.

- Establish a higher level wider cross council partnership steering group to progress the following;
- Adopt Local Government Association Guidance and develop a toolkit for local use to embed dementia friendly approach.
- Plan a communications strategy, including kite mark and dementia friendly award scheme, to engage with local retailers and businesses. Sponsoring business through Chamber of Commerce.
- Develop corporate training strategy adopting How to help people with dementia: A customer facing staff guide and explore training and awareness options appropriate to all levels of staff.
- Consider use of small grants to support initiatives within communities.
- Consider ethical commissioning to positively influence development of support services to people with dementia, their families and carers.
- Explore opportunities through regeneration, for example, Broomhill, to develop dementia friendly approach in planning and design of the area including housing and local facilities.
- Investment already agreed to recruit a community development worker to pilot approach within an area of Inverclyde, the learning and outcomes from this initiative will be shared for further roll out across Inverclyde.
- Consider adopting model used in Motherwell for Greenock Town Centre, outline as follows;

'I was impressed by the presentation on Motherwell and the holistic approach highlighted the value of co-ordinated services.'

8. Building a Dementia Friendly Community in Inverclyde - Greenock Town Centre Project Proposal

Summary of resources and activity proposed:

- Establish a steering group involving statutory, voluntary and third sector partners
- Identify town centre as target area, List shops, businesses and organisations in the area
- Work with corporate communications, business community, members of the Inverclyde Dementia Strategy Implementation Group, local voluntary and third sector providers, Alzheimer Scotland to develop a brand.
- Develop awareness raising materials and briefings for shops and businesses
- Recruit local organisations and businesses utilising the Hints and Tips leaflet for employees, develop an action plan of commitments that each business organisation will sign up to.
- Use the national Promoting Excellence DVD resource in training and awareness raising.
- Undertake environmental audits in shops/ facilities- train key staff in for example Stirling Dementia Services Development Centre's environmental design audit tool)
- Full time development post to work within Community Learning and Development to undertake community development role in a geographical area within Inverclyde this post will complement the above work.

These examples could provide the potential to lever in support from local businesses and harness wider engagement of organisations to become involved with the strategy. This concurs with recommendations within the Scottish Government's Second National Dementia Strategy.

Further scoping is required anticipate costs can be met through commitment of staff time and existing resources to engage with a wider range of stakeholders.

'A dementia friendly specific forum consisting of reps from wider range of services for example, education, carers, business, statutory services, NHS, Community Learning and Development, Transport, Leisure, Planning, Regeneration, housing providers, voluntary and faith groups.'

'Carry on and maximise publicity.'

'A website about dementia services and DFC information links and updates.'

9. Summary

A dementia friendly community is one that recognises and embraces the challenges that living with dementia presents to people with dementia, their families and carers, enabling them to live life to its full potential.

If there is the will to take the dementia friendly community forward, a cross council partnership approach is required, in conjunction, with a focus on community development with a commitment to developing a model of excellence for people with dementia, their families and carers, so that anyone newly diagnosed with dementia can participate as active citizens. By working collaboratively and building on the strengths that already exist to develop a dementia friendly community that will provide the cornerstones to enable people to live well with dementia. It is recommended that our objectives over the coming months are to;

- Identify the key partners, services, activities and businesses within Inverclyde to develop a local map of the people and the place;
- Engage with and by increasing the knowledge and understanding of all key players raise the profile of dementia.
- Embrace the positive opportunities creating a dementia friendly approach can bring.
- Work with local services and businesses to make the community a dynamic and friendly place for people with dementia, their families and carers, to live and work.
- Work collaboratively to increase the opportunity for people with dementia their families and carers to remain engaged in their chosen activities for as long as possible.
- Work together to increase support for carers by developing a shared understanding of the emotional and practical challenges they face.

The dementia strategy has developed within health and social care in line with national priorities. A shift is required to enable the development of the dementia friendly community approach to reflect wider corporate responsibilities and implement guidance and recommendations to emerge from the event.

'It is absolutely essential that Inverclyde becomes dementia friendly, want to be part of it.'

'I was interested to find out more and I also want to be part of this fantastic project.'

'I was asked to attend but have taken a lot away and will be able to pass information on to friends, family, work colleagues and other professionals.'

10. References

1. National Dementia Strategy 2013-16; Scottish Government
2. Inverclyde Dementia Strategy
3. Creating a Dementia-Friendly York, a Joseph Rowntree Foundation report
4. Developing dementia-friendly communities; Local Government Association
5. Dementia Friendly Yorkshire First Steps in the Journey 2014
6. Improving the design of housing to assist people with dementia: CIH
7. How to help people with dementia: A customer facing staff guide.
8. Research into dementia services in Inverclyde for SAMH: Red Circle Communications: 2014
9. Presentations: Getting it right for people with dementia, their families and carers: Working towards a dementia friendly Inverclyde 16th May 2014;
 - Motherwell Town Centre
 - Housing and the built environment
 - Dementia without walls

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

**Getting it right for people with dementia, their families and carers:
Working towards a dementia friendly Inverclyde.**

Inverclyde Dementia Strategy: Action Plan 2013-2016



INVERCLYDE DEMENTIA ACTION PLAN

(August 2014)

The Community Planning Partnership vision for Inverclyde is Getting It Right for Every Child, Citizen and Community. This means the Inverclyde Alliance will work in partnership to create a confident inclusive Inverclyde with safe, sustainable, healthy, nurtured communities and a thriving prosperous economy, with active citizens who are resilient respected and responsible and able to make a positive contribution to the area.

The aim is that our communities are more capable and resilient and are co-producers in achieving positive outcomes for themselves, moving away from dependency to self-reliance.

The Single Outcome Agreement and partnerships are committed to;

All older people living in Inverclyde have healthy, productive, active and included lives preferably living in their own homes with access to the services they need, when they need them.

All our communities have good mental health and wellbeing integral to the achievement of all the local outcomes for Inverclyde.

There is high level political commitment to working towards a dementia friendly Inverclyde.

We intend to develop specific elements of the Single Outcome Agreement to raise the profile of people with dementia, their families and carers. Taking a wider perspective, community capacity building will enable people to avoid social isolation and live more independently.

On this basis the dementia strategy and action plan sets out Inverclyde's response to Scotland's National Dementia Strategy. Its purpose is to outline what services for people with dementia, their families and carers exist at present, what we want to develop, identifying where we think there are gaps. The primary aim of the strategy and action plan is to ensure that significant improvements are made to the lives of people with dementia, their families and carers.

The strategy is underpinned by 4 objectives and 6 strategic outcomes, which will contribute to influencing action on dementia.

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Dementia Strategy Objectives

1. Improve Dementia Awareness and Knowledge
2. Improving Community Inclusion
3. Early Diagnosis and Support
4. Living Well with Dementia

Dementia Strategy Outcomes

1. Improve coordination, collaboration and continuity of care across services
2. Improve access to services
3. Improve flexibility of services
4. Improve capacity of services to be responsive
5. Increase awareness of dementia in the general public and community
6. Increase opportunities for people with dementia, their families and carers to contribute to service planning.

The action plan has been written referencing the actions within the dementia strategy to the four objectives and six outcomes. A further mapping exercise has been undertaken to highlight relevance with the Single Outcome Agreement Wellbeing Indicators. To ensure that appropriate linkages are made at all levels of the organisation and partnerships, to better reflect the needs of people with dementia, their families and carers. More importantly to inform the development work required to embed the strategy and action plan. Illustrated as follows;

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Getting it right for people with dementia their families and carers: Wellbeing indicators

S1.SAFE: People with dementia are protected from harm. Have access to a safe environment to live and are enabled to understand and take responsibility for actions and choices to live well with dementia.

H1.HEALTHY: People with dementia, their families and carers have access to suitable health and social care and are supported to make healthy and safe choices. Achieve the highest standards of physical and mental health through, early diagnosis and support and improving dementia awareness and knowledge.

A1.ACHIEVING: People with dementia, their families and carers are supported and guided in their lifelong learning. Have opportunities to develop their skills, confidence and self- esteem to live well with dementia at home and in the community.

N1.NURTURED: People with dementia have access to a nurturing place to live, in a homely setting, with additional help if needed or, where this is not possible, in a suitable setting. Where there are opportunities to build positive relationships within a supportive dementia friendly environment.

Act 1.ACTIVE: People with dementia their families and carers have opportunities to take part in activities and experiences, such as social and recreational activities, which contribute to living well with dementia, both at home and in the community.

R & R 1

RESPECTED: People with dementia, their families and carers have opportunities to be heard and involved in decisions which affect them.

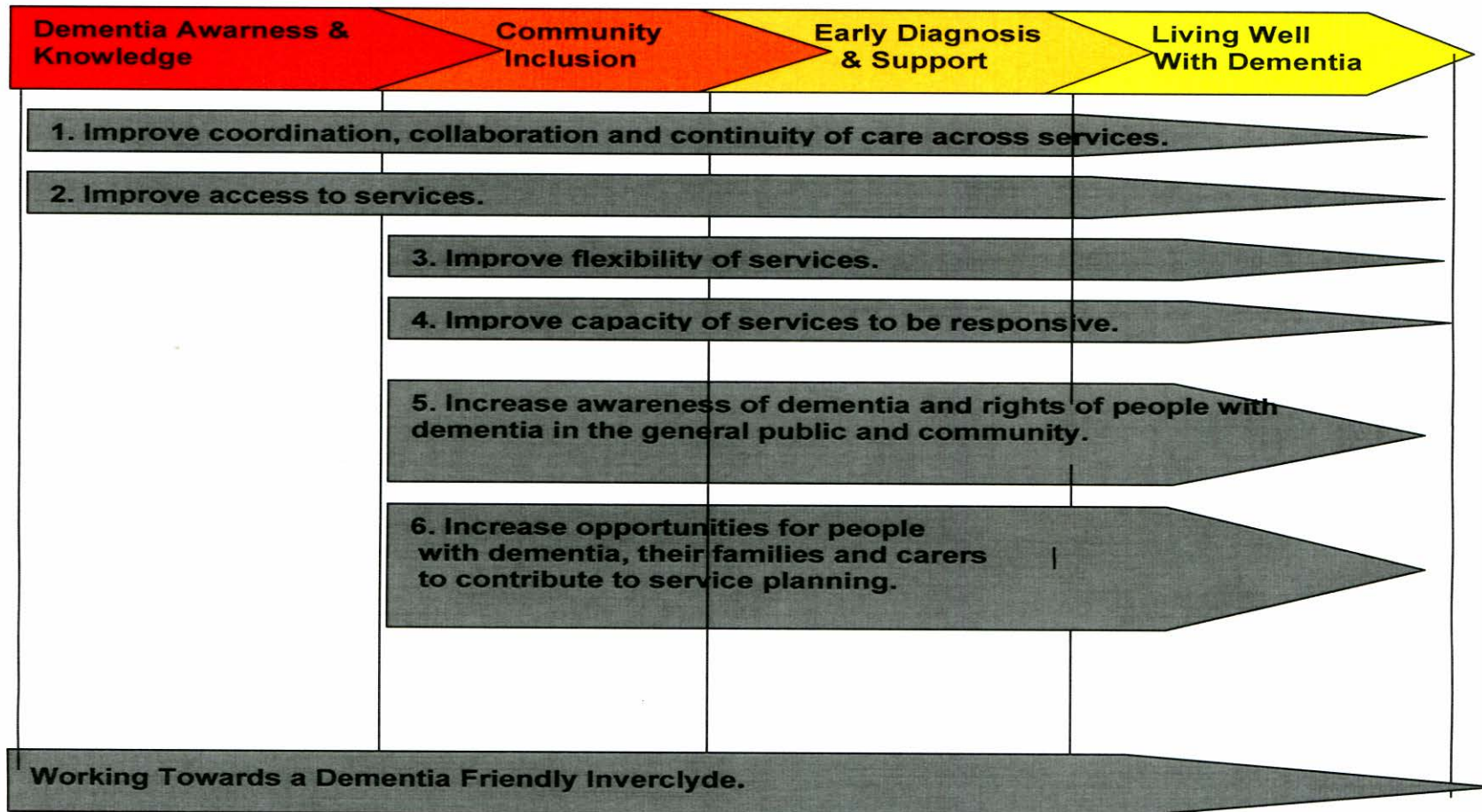
R1 RESPONSIBLE: People with dementia are encouraged and supported in decision making and to play an active role in the community, where they live. Where necessary are supported, having access to appropriate guidance, representation and advocacy, in making decisions that affect them.

I1.INCLUDED: People with dementia their families and carers have support to improve opportunities for community inclusion.To overcome social, educational, physical and economic inequalities and being valued as part of the community in which they live.

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Getting It Right for People with Dementia, their families and carers in Inverclyde

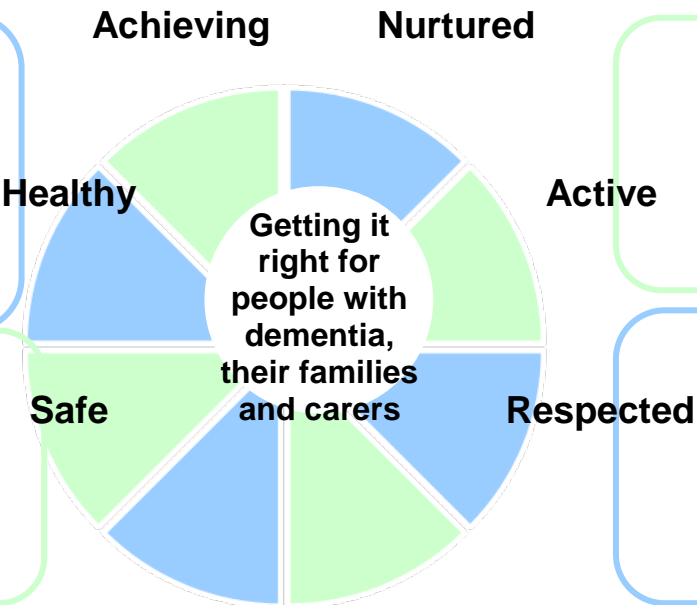


INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

People with dementia, their families and carers are supported and guided in their lifelong learning. Have opportunities to develop their skills, confidence and self-esteem to live well with dementia at home and in the community.

People with dementia, have access to a nurturing place to live, in a homely setting with additional help if needed or where this is not possible, in a suitable setting. Where there are opportunities to build positive relationships within a supportive dementia friendly environment.

People with dementia have access to suitable health and social care and are supported to make healthy and safe choices. Achieve the highest standards of physical and mental health through, early diagnosis and support.



People with dementia have opportunities to take part in activities and experiences, social and recreational activities, which contribute to living well with dementia, both at home and in the community.

People with dementia are protected from harm. Have access to a safe environment to live, are enabled to understand and take responsibility for actions and choices to live well with dementia.

People with dementia, their families and carers have opportunities to be heard and involved in decisions which affect them.

People with dementia have support to improve opportunities for community inclusion. To overcome social, educational, physical and economic inequalities and being valued as part of the community in which they live.

People with dementia are encouraged and supported in decision making and to play an active role in the community, where they live. Where necessary are supported, having access to appropriate guidance, representation and advocacy in making decisions that affect them.

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference
Where do we want to be?							
Outcome 1: Improve coordination and collaboration across services to enable improved continuity of care							
1.1	Implement training needs analysis across all services, promote learning and development opportunities.	Learning and development opportunities being developed and incorporated into CHCP Learning and Development Plan.	Ongoing to March 2016	Training needs analysis undertaken.	CHCP Learning and Development Sub-group David Ramsay & Paul Watt	Existing Resources	1 & 4 S1 Safe N1 Nurtured I1 Included R Respected R1.Responsible
1.2	Develop consistent approach and response to dealing with behaviour that staff and carers find distressing.	Guidance is available in order that staff and carers can respond in a positive and supportive way. Plan to roll out training to reach more staff and carers in a wide range of settings, with a focus on frontline/customer facing staff.	Ongoing 2016	Number of staff trained. Consistent model developed. Make available training and resources to provide support in a wide range of settings.	CHCP Learning and Development Group David Ramsay & Paul Watt	Existing Resources	1 & 4 S1 Safe N1 Nurtured I1 Included R Respected R1.Responsible
1.3	Ensure relevant agencies and providers can recognise signs of harm and are supported appropriately.	A robust training programme is in place in respect of Adult Support and Protection. Training will be developed in line with 1.1 and 1.2 above and incorporated into the third party reporting initiative.	Ongoing 2016	Number of training sessions carried out on ASP. Number of reported ASP cases among people with dementia.	Adult Protection Committee	Existing Resources	1 & 4 S1 Safe N1 Nurtured I1 Included R Respected R1.Responsible

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

1.4	Deliver awareness raising sessions in wider settings to help staff recognise dementia e.g., residential, sheltered housing, community organisations.	Proposals incorporated within CHCP Learning and Development Strategy. This will be enhanced through work to implement Dementia Friendly Community pilot project. (cross refer with 5.9,5.10,5.11below)	Ongoing 2016	Number of sessions carried out. Number of people trained.	CHCP Learning and Development Group in conjunction with Inverclyde dementia Strategy Group	Existing Resources	2,4 & 5	S1 Safe N1 Nurtured I1 Included R Respected R1.Responsible
1.5	Continue to develop evidence based practice and maximise opportunities to harness funding to develop dementia friendly approach.	<p>The Inverclyde Dementia Strategy Implementation Group through involvement of range of partners has access to national forums to consider best practice.</p> <p>Research proposal complete. Report available to inform local developments.</p> <p>The group is currently exploring potential avenues of funding with Inverclyde Council's External Funding Officer.</p>	<p>Ongoing 2016</p> <p>April 2014</p> <p>August 2014 - ongoing</p>	<p>Develop research proposal to promote best practice in dementia care.</p> <p>Explore potential to leverage funding Life Changes Trust</p>	<p>Inverclyde Dementia Strategy Implementation Group.</p> <p>SAMH</p> <p>Inverclyde Dementia Strategy Implementation Group.</p>	<p>Existing Resources</p> <p>Regeneration Fund</p> <p>Big Lottery/Life Changes Trust</p>	2,3 & 4	A1.Achieving H1. Healthy Act 1. Active I1 Included R Respected R1.Responsible

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

1.6	Roll out of anti-stigma and awareness raising activity (cross-refer 5.3)	Develop awareness raising activity in respect of dementia through re-established anti-stigma partnership.	2015/16	Number of targeted sessions delivered	Anti- stigma partnership	Existing Resources	6	S1 Safe N1 Nurtured I1 Included R Respected R1.Responsible
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INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference	
Where do we want to be?								
Outcome 2: Improve access to services								
2.1	Implement dementia care pathway, including access from acute services	Implementing the dementia pathway and good progress is being achieved within mental health services. Referral pathways will be developed in respect of: <ul style="list-style-type: none"> • People with early onset dementia. • People with a learning disability. • People with more complex needs. 	Ongoing 2016	Referral protocols developed Number of referrals following assessment	RCOP Health and Community Care Groups	Existing Resources	2	H1. Healthy S1. Safe N1. Nurtured
2.2	Develop models of post diagnostic support guided by national priorities	ICHCP is making good progress in respect of post diagnostic support with the appointment of a link worker. The evaluation of link worker role will inform wider development of	Ongoing 2016	Develop local model of post diagnostic support building on learning from post diagnostic support link worker.	Service Manager MH&W and Alzheimer Scotland	Existing Resources RCOP Change Fund	4	H1.Healthy S1.Safe N1.Nurtured

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		post diagnostic support.						
2.3	Continue to support GP led early diagnosis	<p>Progress is being achieved in respect of diagnosing dementia as early as possible along with referrals to specialist diagnostic services.</p> <p>The aim is to continue to maintain momentum and consistency of approach.</p>	Ongoing 2016	<p>Number of cases on dementia registers</p> <p>Number of referrals to specialist diagnostic services.</p>	Service Manager MH&W	Existing Resources	2	H1. Healthy S1. Safe N1 Nurtured
2.4	Liaison nurses supporting staff to recognise signs of dementia aligned with mental health and wellbeing strategic outcomes.	Liaison service established to increase potential of dementia being diagnosed as early as possible.	Ongoing 2016	<p>Number of people with a diagnosis of dementia.</p> <p>Link with mental health strategy.</p>	Service Manager MH&W	Existing Resources	4 & 5	A1. Achieving H1 Healthy N1. Nurtured R Respected
2.5	Develop better local data on admissions, delayed discharge and support within the community	Progress achieved in respect of HEAT target. Further development will enable CHCP to analyse data to coordinate planning and support.	Ongoing 2016	<p>Develop capacity to evidence relationship between dementia admissions and delayed discharge, with positive alternatives to admission.</p> <p>Evidence that good planning and support</p>	Service Manager P&P SWIFT Team	Existing Resources	1 & 4	A1. Achieving H1 Healthy N1. Nurtured R Respected

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				arrangements are in place aligned to service redesign.				
2.6	Support Mental Health liaison nursing within wards and A&E	This builds on 2.4 above and is aimed at improving the dementia care pathway within hospital and access to post diagnostic services.	Ongoing 2016	Number of referrals to post diagnostic services	Service Manager Mental Health and Wellbeing	Existing Resources	5	A1. Achieving H1 Healthy N1. Nurtured R Respected
2.7	Ensure the End of Life and Palliative Care Strategy includes actions in relation to people with dementia (cross-refer 3.1)	Work will relate to developing care pathway to ensure people with dementia, their families and carers access timely support where required.	Ongoing 2016	Improve access to End of Life Care for people with dementia, their families and carers. Number of people receiving palliative approach.	Service Manager Performance and Planning	Existing Resources	4	A1. Achieving H1 Healthy N1. Nurtured R Respected
2.8	Develop and implement models of post diagnostic support (PDS)	Delivered through link worker further work envisaged to facilitate wider embedding of PDS within service delivery.	Ongoing 2016	Increase choices and options available for people with dementia. No of people receiving post diagnostic support.	Service Manager Mental Health and Wellbeing and Alzheimer Scotland	Existing Resources RCOP Change Fund	2	A1. Achieving H1 Healthy N1. Nurtured R Respected
2.9	Adapt models of support in line with service redesign and commissioning plans. RCOP	Work underway through a number of work streams to ensure people with dementia their families and carers access support.	Ongoing 2016	Models reviewed in line with national guidance and local implementation of e.g. RCOP.	Service Manager M H and W RCOD, Health Community Care Groups	Existing Resources	3	H1 Healthy N1. Nurtured R Respected R1 Responsible

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2.10	Increase uptake of Self- directed support among people with dementia.	Self- directed support options are made available.	Ongoing 2016	No of people with dementia, their families and carers directing the support they receive.	Service Manager Contracts, Commissioning & Complaints, RCOP, Health & Community Care	Existing Resources	3	H1 Healthy N1. Nurtured R Respected R1 Responsible
2.11	Develop link worker approach and protocol.	Link Worker appointed 2013	Ongoing to 2016	Encourage greater access to anticipatory care plans (ACP's) Number of ACP's developed for people with dementia.	Service Manager M H & W and Alzheimer Scotland	RCOD Change Fund& ILF	4 & 5	H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
2.12	Continue to implement SIGN Guidelines and Heat Targets, including post diagnostic support	ICHCP has achieved good performance in reaching and maintaining Heat Targets reported (QPSR & OPR). Currently reporting on post diagnostic support through appointment of link worker.	Ongoing 2016	No of people being offered post diagnostic support and a support plan.	Service Manager MH&W Alzheimer Scotland. Service Manager P&P	Existing Resources	1 & 4	H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
2.13	Continue to develop support plans maximising use of Assistive Technology, Tele-care, Tele-health (RCOP)	Inverclyde CHCP has been progressing this through RCOP.	Ongoing 2016	Number of people with dementia supported.	RCOP Service Managers MH&W, Community Care	Existing Resources	1 & 4	S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
2.14	Continue to promote use of	Inverclyde CHCP has been progressing this	Ongoing 2016	Number of people with dementia	RCOP Service	Existing Resources	1 & 4	S1.Safe H1 Healthy

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	Aids and Adaptations (RCOP)	through RCOP.		supported.	Managers MH&W, Community Care			A1. Achieving N1 Nurtured Respected R1 Responsible
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INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference
Where do we want to be?							
Outcome 3: Improve flexibility of services							
3.1	Implement asset based and outcome focussed assessment and support planning, including, pillars of support models.	Currently being developed within service and enhanced through link worker.	Ongoing 2016	No of assessments undertaken No of people with dementia with support plans in place	Service Manager MH & W Alzheimer Scotland Service Manager Assessment & Care Management	Existing Resources RCOP Change Fund	4 & 5 S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
3.2	Ensure that Guardianship, Power of Attorney and related matters are discussed at an early stage of care planning (cross refer to 2.1)	Currently underway as above and supported by MHO Service. Communication Strategy will include awareness raising to support advanced care planning.	Ongoing 2016	No of staff trained No. of people receiving advice to support advance care planning-dealing with Guardianship & Powers of Attorney	Service Manager MH&W Service Manager Assessment & Care Management	Existing Resources	2 & 5 S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected
3.3	Develop guidance and training for staff on meaningful advance planning (Cross refers with 3.2 above).	Currently underway through RCOP.	Ongoing 2016	No. of staff trained Guardianship, Power of Attorney and related matters are addressed	Service Manager MH&W Alzheimer Scotland	Existing Resources	2 & 5 S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
3.4	Develop guidance, training on alternatives to hospital (cross refer to 2.1)	Currently underway through RCOP, redesign and commissioning plans. Training will be	Ongoing 2016	No. of people accessing alternatives to hospital.	RCOP Health and Community Care	Existing Resources	2 & 5 S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

		delivered in line with transitions from hospital to community.						R1 Responsible
3.5	Develop and promote alternative models of care.	Currently underway through a number of CHCP work streams, for example, redesign of mental health services, RCOP and Commissioning Strategy.	Ongoing 2016	No. of people supported	RCOP Health & Community Care Mental Health Management Group	Existing Resources	3	S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference	
Where do we want to be?								
Outcome 4: Improve capacity of services to be responsive								
4.1	Promote Dementia Champions and Dementia Friends across services and wider settings including independent and third sectors.	There are identified people working within ICHCP with a role. The aim will be to explore initiatives to increase the number of people with to extend reach cross council and partnerships.	Ongoing 2016	No of Dementia Friends/ Champions trained	Inverclyde Dementia Strategy Implementation Group Learning and Development Group OD&HR	Existing Resources	1 & 2	S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
4.2	Implement Promoting Excellence Training made available to all staff to develop skills and knowledge in relation to dementia.	Training is in place to develop skills and knowledge of key staff which will be extended to include staff in different settings.	Ongoing 2016	Training modules designed appropriate to different levels and settings. Number of staff completing training.	Learning and Development Group OD&HR	Existing Resources	4 & 5	S1.Safe H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible
4.3	Maximise evidenced based practice in service development and redesign in respect of dementia care.	The ICHCP currently has a number of work streams underway through RCOP, Redesign of Mental Health Services which will change the way in which services are delivered. The dementia strategy has a strong focus on links being made with	Ongoing 2016	There is good planning and support available for people with dementia, their families and carers. Number of people supported.	RCOP, Health and Community Care Mental Health Management Group	Existing Resources	4	H1 Healthy A1. Achieving N1 Nurtured Respected R1 Responsible

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		these work streams to ensure the needs of people with dementia, their families and carers are reflected.						
4.4	Develop links to local and national networks to inform local developments.	This is being achieved through links with e.g. Scottish Government, ADSW, NHS Quality Improvement & Workforce Development Planning & Strategy Groups	Ongoing 2016	Appropriate links are made engaging with wider range of stakeholders and partnerships	Service Manager MH&W& Learning & Development Group Inverclyde Dementia Strategy Implementation Group	Existing Resources	4	H1 Healthy A1. Achieving N1 Nurtured R Respected R1 Responsible
4.5	Review policies and procedures to ensure they are underpinned by the Charter of Rights for people with dementia their families and carers.	Audit of policies and procedures undertaken within CHCP Mental Health services. Wider roll out planned aligned to the learning and development strategy.	Ongoing	Number of assessments completed Number of policies reviewed Approaches in Inverclyde are underpinned by the principles set out in the Charter of Rights.	RCOP Mental Health Management Group Health & Community Care	Existing Resources	5	H1 Healthy N1 Nurtured R Respected R1 Responsible I1. Included
4.6	Ensure dementia friendly audits apply to redesign of services.	Undertaken in respect of ICHCP and Mental Health Service redesign. Guidance will be made available to extend reach across a wide range of services,	Ongoing 2016	Number of audits undertaken Increase number of dementia friendly environments across Inverclyde.	RCOP Mental Health Management Group Health & Community Care	Existing Resources	2	H1 Healthy N1 Nurtured R Respected R1 Responsible I1. Included

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		Undertake Equality & Human Rights Impact Assessments		Assess opportunities to improve outcomes for people with a protected characteristic.				
4.7	Ensure the Learning Disability Strategy enhances action for people with a learning disability and dementia.	This will be achieved through developing referral pathways based on needs assessment.	2016	Undertake needs assessment and scope provision for people with dementia their families & carers. Develop pathways into support services for people with a learning disability, their families and carers.	RCOP Health & Community Care	Existing Resources	1 & 5	H1 Healthy N1 Nurtured R Respected R1 Responsible I1 Included
4.8	Implement actions committed to in Inverclyde Carers Strategy.	This will be achieved through the Carers Development Group.	Ensure carers access range of services, including carers assessment, access to respite and short breaks.	No of carers supported.	Carers Development Group (Maureen Hamill, Susan Chandler, Lorna McDonald)	Existing Resources	1 & 2	H1 Healthy N1 Nurtured R Respected R1 Responsible I1. Included

INVERCLYDE DEMENTIA ACTION PLAN (August 2014)

Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference	
Where do we want to be?								
Outcome 5: Increase awareness of dementia – in the general public and community								
5.1	Contribute to implementation of Local Housing Strategy to ensure the needs of people with dementia, their families and carers are reflected.	<p>Arrangements in place for strategic planning through the ICHCP Housing and Accommodation Sub Group & Local Housing Strategy Steering Group</p> <p>Further work requires to be undertaken to consider; dementia friendly design in all planned housing developments</p> <p>Suitability of existing accommodation for people with dementia, their families and carers.</p>	Ongoing 2016	<p>No of people supported through nominated referrals to RSL's.</p> <p>No of housing developments available</p> <p>Accommodation reviewed increasing range of housing options & accommodation available</p>	<p>ICHCP Extended Management Team</p> <p>Housing & Accommodation Subgroup</p>	Existing Resources	1 & 4	N1 Nurtured A1. Active R Respected R1 Responsible I1. Included

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5.2	Promote potential of dementia friendly design and undertake environmental audits.	Environmental Audits undertaken within NHS/CHCP Mental Health Services. Guidance and briefings will be developed to extend reach as part of the development work involved to create a dementia friendly Inverclyde	Ongoing 2016	No. of environmental audits undertaken No of people trained	CHCP Health and Community Care Groups. Community Planning SOA delivery groups.	Existing Resources	1 & 2	N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.3	Develop communication strategy.	Communication and awareness raising has taken place. A corporate communication strategy will be required to support embedding the strategy and proposals in respect of creating a dementia friendly Inverclyde. (cross refer with 5.9 below)	2016	No of communication and awareness raising events. No of people attending events. Implementation of communication strategy.	Inverclyde Dementia Strategy Implementation Group. Corporate Communications Community Planning SOA delivery groups	Existing Resources	1 & 6	N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.4	Promote the Charter of Rights for people with dementia.	Inverclyde signed up to the Charter of Rights in 2010. Encourage a wide range of stakeholders	2016	No of service providers adopting the Charter of Rights.	ICHCP Inverclyde Dementia Strategy implementation	Existing Resources	5	R Respected R1 Responsible I1. Included

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		and service providers to adopt the Charter of Rights. (cross refer with 5.9 below)			Group Community Planning			
5.5	Support the implementation of Standards of Care for Dementia in Scotland.	ICHCP and NHS are currently implementing the standards of care to reflect the rights of people with dementia.	Ongoing	No of ICHCP/ NHS hospital settings providing the best possible care for people with dementia.	Service Manager Mental Health and Wellbeing Inverclyde Dementia Strategy Implementation Group	Existing Resources	5	H1. Healthy N1 Nurtured R Respected R1 Responsible I1. Included
5.6	Target health improvement activity on lifestyle changes which may reduce incidence and slow progress of dementia.	Health improvement activity will be progressed in conjunction with identified Health Improvement Officer	Ongoing 2016.	No. of people supported. No. of Interventions which support maintenance of health No. of initiatives that can minimise onset of conditions including dementia.	Service Manager Health Improvement, Inequalities & Personalisation.	Existing Resources	1 & 5	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.7	Develop intergenerational work with schools in conjunction with CLD. (Cross refers with 5.9, 5.10 & 5.11below).	Intergenerational work. Pilot DFC project will include awareness raising activity with schools and the community.	2015-2016 More young people and members of the community have a greater understanding of the needs of people with dementia, their families and	No. of intergenerational events and people attending these events.	Service Manager CLD &Service Manager MH&W. Inverclyde Dementia Strategy Implementation Group.	Existing Resources	1 & 5	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included

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			carers.					
5.8	Develop community led initiatives to support people with dementia, their families and carers.	<p>A number of community led initiatives have been facilitated through RCOP there is a need to expand these initiatives.</p> <p>Community Learning & Development have a focus on community capacity building and co-production supporting a number of community led initiatives including Wider Opportunities for Older People(WOOPI)</p> <p>Your Voice facilitate and support people with dementia, their families and carers through the ICHCP Advisory Group</p>	Ongoing -2016	<p>Increase social support and networks and opportunities for people to access universal services.</p> <p>Increase capacity of community organisations to be able to respond.</p> <p>Increase participation and involvement through ICHCP</p>	Inverclyde Dementia Strategy Implementation Group. RCOP Community Planning SOA Groups.	Existing Resources RCOP Change Fund	1 & 5	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included

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5.9	Develop project for the promotion of a dementia friendly Inverclyde.	Pilot project proposal developed with CLD, including a senior community development worker. Lessons learned on best practice will be shared for further roll out across Inverclyde.	Project implementation 2014/2015 Ongoing 2016	Greater understanding on the establishment of dementia friendly communities.	Service Manager M H&W Service Manager CLD	Existing Resources (ILF funding)	1	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.10	Develop Dementia Friendly Award Scheme. (cross refer 5.3 above)	Proposals to involve businesses and wider stakeholders to contribute to dementia friendly Inverclyde Arrange briefings and engagement with businesses.(Adopting methods used in Motherwell & York)	Dementia Friendly Award Scheme developed 2015/16	More businesses and stakeholders contributing to the dementia friendly approach Communication strategy implemented to encourage businesses and stakeholders to sign up to the initiative.	Corporate/ Inverclyde Alliance Inverclyde Dementia Strategy Implementation Group.	Scoping required	1	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.11	Develop remit and terms of reference for Single Outcome Delivery Groups(SOA)	Consider report of the outcomes of the dementia friendly community event within relevant cross council and partnership structures.	Ongoing- 2016	Needs of people with dementia, their families and carers reflected in relevant cross council structures and the Single Outcome Agreement.	Community Planning Manager/ Inverclyde Alliance Inverclyde Dementia Strategy Implementation Group.	Existing Resources	1 & 5	H1. Healthy N1 Nurtured A1. Active R Respected R1 Responsible I1. Included

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5.12	Develop links with local and national groups to support implementation of the Inverclyde Dementia Strategy.	Inverclyde Dementia Strategy Implementation Group includes representation from local and national networks. This requires expanding to embed the dementia strategy within universal services.	Ongoing Ongoing	Promote best practice and research to inform local strategic development. Networks are representative and reflect cross council partnership approach	Inverclyde Dementia Strategy Implementation Group.	Existing Resources	1 & 5	A1 Achieving N1 Nurtured A1. Active R Respected R1 Responsible I1. Included
5.13	Adopt national guidance to support implementation to work towards a dementia friendly Inverclyde.	Inverclyde dementia friendly community event referred to guidance available. The aim would be to adopt these resources to support development work, e.g. Local Government Association Guidance	Ongoing	Toolkit developed to support promotion of a dementia friendly Inverclyde, supported by learning and development activity.	Implementation of Corporate Commitment. Community Planning and SOA delivery Groups	Existing Resources	1 & 5	A1 Achieving N1 Nurtured A1. Active R Respected R1 Responsible I1. Included

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Activity	Where are we now?	How will we get there (including timescale)?	How will we know we are getting there?	Who is responsible?	How much will it cost?	Dementia Strategy Outcomes	SOA, Wellbeing Reference	
Where do we want to be?								
Outcome 6: Increased opportunities for people with dementia, their families and carers to contribute to service planning.								
6.1	Develop consultation and involvement arrangements, including monitoring and evaluation of the strategy.	Two annual events have taken place to engage with a wide range of stakeholders. Consultation exercise has been undertaken on the strategy. Arrangements in place through ICHCP Advisory Group and People Involvement Strategy.	Ongoing 2016	No. of engagement events No. of people involved.	Inverclyde Dementia Strategy Implementation Group and ICHCP Advisory Group.	Existing Resources	6	I1. Included R Respected R1 Responsible
6.2	Sustain and support the development of peer support for people with dementia, their families and	A number of specialist opportunities currently exist the aim would be to enhance opportunities within the community.	Ongoing 2016	Increased social support and social networks.	RCOP and relevant Health & Community Care Groups.	Existing Resources	5 & 6	I Included R Respected R1 Responsible

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	carers.	Build on work through Community Learning and Development with a focus on co-production, WOOPi, DFC Community Development Post and project.		More support and wider variety of opportunities available in the community for people with dementia, their families and carers.	Community Learning and Development			
				Increased access and participation in universal services.	Community planning and SOA delivery groups.			
6.3	People with dementia, their families and carers are recognised as equal partners in the delivery of care and support.	People with dementia their families and carers are involved through care and support plans through post diagnostic support.	Ongoing 2016 Increased learning and development opportunities for staff to respond to people with dementia	Increase number of care and support plans for people with dementia in the community. No. of staff trained.	Frontline staff	Existing resources	6	S1 Safe N1 Nurtured I1 Included R Respected R1 Responsible
		Build on work currently underway through Carers Development Group and Carers Strategy	Ongoing 2016	Increase number of carers supported through the EPIC Programme	Carers Development Group			

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Terminology

RCOP-Reshaping Care for Older People

ICHCP-Inverclyde Community Health and Care Partnership

CLD-Community Learning and Development

QPSR-Quarterly Performance Service Review

OPR-Organisational Performance Review

SOA- Single Outcome Agreement

DFC- Dementia Friendly Community

EPIC-Equal Partners in Care

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