

Service provider and commissioner responses to the Healthwatch Derbyshire Dementia Report: Experiences of Health and Social Care services in Derbyshire from the perspectives of people living with dementia, their carers and family members.

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## 1) Sustainable Transformation Partnership (STP) Dementia and Delirium



### Healthwatch Dementia Report

*Experiences of Health and Social Care services in Derbyshire from the perspectives of people living with dementia, their carers and family members*

#### Joined Up Care Derbyshire (STP) response

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Workstream Lead for Dementia and Delirium

April 2018

#### General comments:

The Sustainability and Transformation Partnership (STP), called Joined up Care Derbyshire, has a specific workstream for Dementia and Delirium. Many of the issues raised by the report have high level actions already in place to try and improve and develop services, the report is very important because it will further help to focus these high level actions into plans of work that will achieve improvements, it is also the case that the report has raised issues that the STP can develop plans on.

The Dementia and Delirium Workstream has two main partnerships, there is a strategy partnership and an implementation partnership and through these groups the work of translating national and local strategy, innovating, implementation, monitoring and review are managed. The actions described below will be coordinated through these two key partnerships, which in turn report to the Mental Health STP workstream and thus into Joined Up Care Derbyshire, the Derbyshire STP Board.

Recommendation (What should happen now?)	Action taken/planned (or not applicable N/A if it does not concern your service)	Progress	Review Date
<ol style="list-style-type: none"> <li>1. Continue to work to improve the provision of early education to raise awareness and understanding of dementia</li> <li>2. Increase information and communication around all types of dementia and provide clear information on all signs and symptoms</li> <li>3. Consider the images used for literature and campaigns to ensure the message is clear that dementia can affect anyone, regardless of age</li> </ol>	<p>1,2,3 The STP has a key goal to Minimise the risk of people developing dementia and delirium in dementia, and improving pre-diagnosis information and health promotion for prevention of dementia are important steps to this goal. Partners within the STP across the health and social care and voluntary sector have a stated commitment to improving the availability and quality of information for early education, awareness raising and the various types and manifestations of dementia. Partners also have a stated ambition to ensure their work is integrated to further support this, and other key STP goals. The STP, through the framework of operation, will monitor how this goal is progressed and achieved</p>		October 2018
<ol style="list-style-type: none"> <li>4. Ensure initial concerns around suspected dementia are listened to: Regardless of age Consider the concerns expressed by carers and family members</li> <li>5. Work to reduce language barriers to ensure this does not delay diagnosis</li> </ol>	<p>4,5 The STP workstream is in the process of developing an engagement strategy and reducing the impact of language barriers and improving response to the needs of our BME communities across Derby and Derbyshire is key to that development. Health and social care partners are considering integrated ways of working that could deliver to reducing language barriers and improved support for people living with dementia. Progress will be monitored through STP framework at strategic, implementation and monitoring levels</p>		October 2018

<p>and to ensure people are fully supported throughout their journey</p> <p>6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time</p> <p>7. DHCFT Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis:</p> <ul style="list-style-type: none"> <li>- At a later date, rather than immediately after diagnosis</li> <li>- Ensure carers and family members are able to ask questions around their loved one's diagnosis in private.</li> </ul> <p>8. Work to ensure all PLWD, their carers and family members are signposted to appropriate support following diagnosis and ensure the support is easily available to access</p>	<p>6,7 As the provision of information around preventing well develops (as per 1,2,3 above) the volume of information useful at the point of diagnosis can be reviewed. As uptake of the Living Well Programme improves (see 9 below) the volume of information provided at the point of diagnosis may also reduce. There is a stated commitment by health and social care partners to work in an integrated manner to deliver to the information needs of individuals and to review the way in which this happens in an ongoing manner. The STP implementation group will provide a format to enable review and monitoring of progress</p> <p>8 Working to ensure all PLWD, their carers and family members are signposted to appropriate support following diagnosis and ensuring that support is easily available is key to the activity of the STP workstream. Partners have a stated commitment to working in integrated ways to achieve this goal, not only within the bounds of what is available but also in seeking to advocate further for funding and services to support that aim.</p>		<p>October 2018</p> <p>October 2018</p>
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<p>at a later date, if not required immediately after diagnosis</p> <p>9. Promote the Living Well Programme and the question and answer sessions</p> <p>10. Ensure the care and support needs of PLWD are met and regularly reviewed, as suggested in the Dementia Well Pathway</p> <p>11. Ensure workers and professionals are able to identify patients/clients</p>	<p>The STP strategy and implementation partnerships will be key to this activity</p> <p>9 The transformation of day hospital services is a key goal of the STP and within this there are changes planned to the way the Living Well group is offered to improve take up. It is planned that individuals diagnosed with dementia will be contacted up to three times during the year following diagnosis to encourage take up of the programme. The STP key goal is to ensure that services available anywhere in Derby or Derbyshire are equitable and this transformation is planned for North and South services in partnership with the two Trusts who will deliver the service. It should be remembered that the Dementia Q&amp;A is run voluntarily by DHCFT staff, and although they work very hard to sustain the offer it is not always available. Under the STP partners have agreed to look at ways that this could become more sustainable as it is a valuable service</p> <p>10 The overarching key aims of the Derbyshire STP workstream for dementia and delirium are defined under the Dementia Well Pathway and there is a stated commitment by partners to ensure the needs of people with dementia are met and reviewed. The Strategy and Implementation partnerships will monitor this</p> <p>11 The Delirium partnership within the STP workstream is currently working to produce a low or no cost training package around dementia and delirium for roll out across all partnership members to try and enable better</p>		<p>October 2018</p> <p>October 2018</p>
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<p>with dementia and their carers/family members and have received adequate training to be able to meet their care and support needs in all settings</p>	<p>awareness and response for people with dementia to prevent and manage this dangerous condition that people with dementia are highly vulnerable to.</p>		<p>October 2018</p>
<p>15. Work to address the need for more support and activities for PLWD under the age of 65</p>	<p>The STP will review key deliverables to make more explicit the commitment to people of all ages with dementia and work within the implementation partnership to support partners in services designed for people below 65 years</p>		<p>October 2018</p>
<p>16. To ensure carers receive the correct level of support to effectively care for their loved one and also look after their own health and well-being</p>	<p>16-19 The STP fully recognizes the importance of the carer, the carers needs and the carer's own health as being key to the person with dementia and their health and well-being and the STP partnership will work to support the integrated ways of working, including working with carer's advocates and groups ensure appropriate responses to the needs of carers</p>		<p>October 2018</p>
<p>17. Improve co-ordination of support services for carers, so they know where to go for advice, signposting and referrals</p>			
<p>18. Ensure families who are self-funded have the correct level of information and support</p>			
<p>19. Address the lengthy process for accessing</p>			

respite care and to make it easier to access			
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## 2) Derbyshire Clinical Commissioning Group's (CCG's)

### Derbyshire CCGs Response to the Recommendation of the Healthwatch Derbyshire Dementia Report April 2018

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#### Summary

The Clinical Commissioning Groups (CCGs) value the information contained within this report as it builds on findings from Carer engagement completed by Wellbeing Erewash between May and October 2017. Through engagement with over 200 carers in Erewash, similar themes were identified leading to recommendations comparable to those within the Healthwatch Derbyshire report.

Erewash and Southern Derbyshire CCG also carried out a period of engagement from May to August 2017 to understand what good would look like for specialist support after a diagnosis of dementia. Engagement took place with the local provider, dementia support services, people with dementia and their carers and wider stakeholders.

Both these reports and the Healthwatch report have provided greater understanding of the care and support people living with dementia and their carers experience in order to continually improve service provision.

Derbyshire County Council (DCC) has reviewed the service specific for dementia support and has amended the contents and requirements of the new specification in the light of the Healthwatch report and is working with the current service provider to ensure these recommendations are implemented in the current commissioned service. More information about this will be provided in the DCC response

In addition to the responses to the recommendations identified below, we have:

- Focussed on improving recognition, early intervention and information for people with dementia and their families/ carers.
- Re-established the Erewash Dementia Action Alliance with partners from the Voluntary and Community Sector, Public Health and local support providers and are working towards becoming a more dementia friendly community.
- Increased the delivery of dementia friends sessions for GP surgeries and Erewash CCG employees
- Reconfigured the Memory Assessment Service to provide early and timely diagnosis across Derbyshire and reduce waiting times for appointment and diagnosis, includes consultant assessment, the development of MAS24 in line with shared care agreement and

national standards, improves parity of referral process across the county, has cross nurse working, enables nurses to deliver diagnosis to speed up the process and improves links with the external services and third sector

- The Dementia Support service provides information, advice and support including peer support and activities groups
- The Dementia Rapid Response Team provide specialist assessment and treatment in the home to prevent a hospital admission
- The Dementia Reablement Service , which is rolling out across the county, to provide short term flexible care to enable people with dementia live in their own home longer.
- Dementia advisors in are starting to become aligned to general practices and a lead in Hardwick CCG is the link for the Dementia Advisors to ensure their introduction and establishment within practices .
- Local Area Coordinators in Derby City and the North of Derbyshire are also introducers to services and support for people with dementia. For Erewash area this role is carried out by the Community Connectors.

Recommendation (What should happen now?)	Action taken/planned (or N/A if it does not concern your service)	Progress	Review Date
<p>1. Continue to work to improve the provision of early education to raise awareness and understanding of dementia</p>	<p>Specific sessions relating to ‘early recognition and early intervention of dementia’ were commissioned in Erewash in November 2018.</p> <p>Dementia Friends training across the county is continuing and many sessions are being offered as part of the Dementia Action Week (May 21<sup>st</sup> - 25<sup>th</sup>)</p> <p>The CCGs are part of the local and county Dementia Action Alliance and are working on plans for Dementia Friendly Communities. Members of these alliances include retail, banks, pharmacies, local MPs and Councilors and local business.</p> <p>The STP also has a goal to reduce the risk of people developing dementia and delirium in dementia. Improving pre-diagnosis information and health promotion for prevention of dementia are important steps</p>	<p>Both sessions fully attended and evaluated well.</p> <p>Dementia awareness sessions are also offered by Health and Derbyshire County Council which encompasses awareness and understanding.</p>	<p>Oct 2018</p>

	<p>to this goal. Partners within the STP across the health and social care and voluntary sector have a stated commitment to improving the availability and quality of information for early education, awareness raising and the various types and manifestations of dementia. Partners also have a stated ambition to ensure their work is integrated to further support this, and other key STP goals. The STP, will monitor how this goal is progressed and achieved</p>		
<p>2. Increase information and communication around all types of dementia and provide clear information on all signs and symptoms</p>	<p>Specific sessions relating to ‘early recognition and early intervention of dementia’ were commissioned in Erewash in November 2018.</p> <p>Dementia Friendly Practices in some areas across the County (7 out of 12 in Erewash and 3 in the North). This continues to roll out but is a slow process.</p>	<p>Dementia awareness sessions are also offered by Health and Derbyshire County Council which encompasses the types of dementia, signs and symptoms.</p>	<p>Oct 2018</p>
<p>3. Consider the images used for literature and campaigns to ensure the message is clear that dementia can affect anyone, regardless of age</p>	<p>We are working closely with making Space and Alzheimer’s UK who are supporting us with the production of literature for activities and events such as those taking place for Dementia Action week in May</p>	<p>At a recent engagement event we ensured the room was a blank canvass and that other literature was removed to avoid confusion. Information used throughout the</p>	<p>Oct 2018</p>

	Current service providers “making Space” have reviewed and reproduced their literature in light of these recommendations.	engagement was inclusive of all areas and backgrounds.	
4. Ensure initial concerns around suspected dementia are listened to: - Regardless of age - Consider the concerns expressed by carers and family members.	<p>Awareness raising activities are taking place including :</p> <p>An individual with dementia and their wife have provided a presentation at the Practice Managers meeting in Erewash to share their experiences in order to raise awareness.</p> <p>Dementia patient and carer stories have been heard at the Governing Bodies of the CCGs to raise awareness of the lived experience</p> <p>The findings of all the reports and other service concerns are fed back through services for learning.</p> <p>The Memory Assessment Service has been newly configured and decommissioned to have one MAS for the county and a MAS 24</p>	Future presentation planned for a Practice Nurse QUEST session	Oct 2018

	<p>service. The Memory Assessment Clinic at Ilkeston hospital underwent a Quality review Visit at the end of last year and was evaluated very well with a recommendation to gather patient and experience feedback going forward.</p> <p>The STP workstream is in the process of developing an engagement strategy and reducing the impact of language barriers and improving response to the needs of our BME communities across Derby and Derbyshire is key to that development.</p> <p>Health and social care partners are considering integrated ways of working that could deliver to reducing language barriers and improved support for people living with dementia. Progress will be monitored through STP framework at strategic, implementation and monitoring levels</p>		
<p>5. Work to reduce language barriers to ensure this does not delay diagnosis and to ensure people are fully supported throughout their journey</p>	<p>Provision of information in other languages is greater in the City and we will work across County to look at this and assess need.</p>		<p>Oct 2018</p>

	<p>With regards to communication generally the Dementia Friendly training covers general communication with people with suspected dementia and/or memory issues.</p>		
<p>6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time</p>	<p>Feedback from individuals with dementia in Erewash identified the need for a local directory to support them/ their family post diagnosis.</p> <p>We are working with Derbyshire Carers around the general level of information given to carers at assessment and throughout the journey, especially as circumstances change. This is to improve the timeliness of information. There is also a specific intention to look at the information and support given when circumstances change and people need to consider care and residential support as this is often a time of pressure to make decisions in a short time period.</p> <p>Making Space are aware of this and work with their advisors to look at how they support this stage of the journey.</p>	<p>Erewash Dementia Directory produced and circulated January 2018</p>	<p>Oct 2018</p>

<p>7. Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis:</p> <ul style="list-style-type: none"> <li>- At a later date, rather than immediately after diagnosis</li> <li>- Ensure carers and family members are able to ask questions around their loved one's diagnosis in private.</li> </ul>	<p>This forms part of the Memory Assessment service/ diagnosis pathway where individuals are offered attendance at specific Living Well sessions. There is also an intention to look at the contents of the living well sessions as some people have said they would like a refresher or an update later on in the journey, or as needs change.</p> <p>The MAS has developed so that nurses can give the diagnosis, although this diagnosis will have been made by the consultant following a review of the assessments. This allows for greater time for the family and the patient to discuss the diagnosis and there are options for them to come back and see the nurse for more discussions at a later stage. There is also the option for them to arrange to see the consultant at a later stage and telephone discussion and conversation with the team is also encouraged.</p> <p>Staff from the Dementia Support Service attend all Memory Assessment Clinics to offer information and advice straight after diagnosis or arrange an appointment at a later date. Private appointments are also offered to carers / other family members.</p>		<p>Oct 2018</p>
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	Dementia Question and answer sessions are also held at Ilkeston Community Hospital.		
8. Work to ensure all PLWD, their carers and family members are signposted to appropriate support following diagnosis and ensure the support is easily available to access at a later date, if not required immediately after diagnosis	<p>Feedback from individuals with dementia in Erewash identified the need for a local directory to support them/ their family post diagnosis.</p> <p>The MAS has started to provide this level of signposting.</p> <p>Referral and signposting to the current service provider</p> <p>As part of the Dementia workstream of the Derbyshire STP, we will work with partners to ensure signposting and support for PLWD, their carers and family members is timely, appropriate and accessible.</p>	Erewash Dementia Directory produced and circulated January 2018	Oct 2018
9. Promote the Living Well Programme and the question and answer sessions	<p>This now forms part of the Memory Assessment Service/ diagnosis pathway where individuals are offered attendance at specific Living Well sessions.</p> <p>We will work with DCC, DHCFT and DCHS to promote the Living Well Programme and Question and Answer sessions more proactively.</p>		Oct 2018

	<p>The transformation of day hospital services is a key goal of the STP and within this there are changes planned to the way the Living Well group is offered to improve take up. It is planned that individuals diagnosed with dementia will be contacted up to three times during the year following diagnosis to encourage take up of the programme. The STP key goal is to ensure that services available anywhere in Derby or Derbyshire are equitable and this transformation is planned for North and South services in partnership with the two Trusts who will deliver the service. The Dementia Q&amp;A is run voluntarily by DHCFT staff, and although they work very hard to sustain the offer it is not always available. Under the STP, partners have agreed to look at ways that this could become more sustainable as it is a valuable service</p>		
<p>10. Ensure the care and support needs of PLWD are met and regularly reviewed, as suggested in the Dementia Well Pathway</p>	<p>The overarching key aims of the Derbyshire STP workstream for dementia and delirium are defined under the Dementia Well Pathway and there is a stated commitment by partners to ensure the needs of people with dementia are met and reviewed. The Strategy and Implementation partnerships will monitor this.</p>		<p>Oct 2018</p>

<p>11. Ensure workers and professionals are able to identify patients/clients with dementia and their carers/family members and have received adequate training to be able to meet their care and support needs in all settings</p>	<p>Specific sessions relating to ‘early recognition and early intervention of dementia’ were commissioned in Erewash in November 2018.</p> <p>Encourage uptake of the DCC awareness sessions across Derbyshire</p> <p>The Delirium partnership within the STP workstream is currently working to produce a low or no cost training package around dementia and delirium for roll out across all partnership members. The aim of this is to try and enable better awareness and response for people with dementia and to prevent and manage this condition that people with dementia are highly vulnerable to.</p>	<p>Dementia awareness sessions are also offered by Health and Derbyshire County Council which encompasses awareness, recognition and early intervention to support care needs.</p>	<p>Oct 2018</p>
<p>12. Maximise the need and importance of continuity, routine and training for homecare staff</p>	<p>NA</p>		<p>Oct 2018</p>
<p>13. Improve the experience of people involved with the DDSS in terms of more appropriate activities, more training for staff and ensure the one-to-one support is readily available</p>	<p>Derbyshire County Council and the NHS Derbyshire CCGs are in the process of re-procuring the DDSS. This will provide an opportunity to review and clarify the service priorities which include a high level of training for staff, a range of appropriate activity / peer support groups and accessible one to one support.</p>		<p>Oct 2018</p>

<p>14. Develop a role of a 'named person' to enable people to have one point of contact to be able to access the advice and support needed</p>	<p>Within service provider the Dementia Advisors form this. There are also different models across the county, for example in Erewash the Community Connectors act as referrers and introducers to services as do the local area coordinators in the City and then North.</p>		<p>Oct 2018</p>
<p>15. Work to address the need for more support and activities for PLWD under the age of 65</p>	<p>Through the living Well Sessions  As part of the Derbyshire STP Dementia workstream DCC and other key partners are reviewing service access and support available for PWLD under the age of 65.</p>		<p>Oct 2018</p>
<p>16. To ensure carers receive the correct level of support to effectively care for their loved one and also look after their own health and well-being</p>	<p>We have been working with Derbyshire Carers regarding the feedback we had around carers assessment and support provision. The responsibility for this contract does sit with Derby City Council but Derbyshire Carers have taken up our offer for Person Centered Care training which helps them to have conversations focused on the carers needs and assets and their own wellbeing.</p> <p>Across the county there are also many discretionary voluntary and community groups and services funded to support carers. This includes day to day support for carters to go out and also a carers retreat facility in derby City - Haven House.</p>	<p>The contract for carers assessment and support has recently been reviewed by the City Council and they are in the process of agreeing the future service provision and the assessment process and provider. This should be communicated after the period of Purdah. A connection for this at the City Council is Christine Collingwood.</p>	<p>Oct 2018</p>

<p>17. Improve co-ordination of support services for carers, so they know where to go for advice, signposting and referrals</p>	<p>Erewash Dementia Directory produced and circulated to a range of professionals in January 2018.</p> <p>As part of the Derbyshire STP Dementia workstream, DCC and other key partners will co-ordinate and integrate support services so they are more accessible and help to build carer's confidence and resilience</p>	<p>DCC, NHS Commissioners and a range of providers are working together within the Derbyshire STP Dementia workstream to identify opportunities for further co-ordination and integration of services. The views of carers of are particularly important as many PLWD are not able to express their views.</p>	<p>Oct 2018</p>
<p>18. Ensure families who are self-funded have the correct level of information and support</p>	<p>NA</p>		
<p>19. Address the lengthy process for accessing respite care and to make it easier to access</p>	<p>NA</p>		
<p>20. Provide clear information around Continuing Healthcare and the use of jargon, so people are able to easily understand the process.</p>	<p>The CCGs have revised their web site information on this.</p> <p>We are working with DCC, STP and other providers to ensure there is a targeted approach to ensure carers supporting those in receipt of fully funded CHC are proactively identified and supported to access the carer's service</p>	<p><b><i>The Carers Information, Advice and Support service continue to identify and support more carers in need of support to understand Continuing Healthcare processes</i></b></p>	<p>Oct 2018</p>

### 3) Derbyshire County Council (DCC)

11.04.18



#### Healthwatch Dementia Engagement Report - Derbyshire County Council Response

Derbyshire County Council welcomes the findings of the Healthwatch Dementia Engagement Report as it builds on the findings of other engagement completed including the annual carers survey.

The Council are committed to working with key partners as part of Joined up Care Derbyshire (Derbyshire STP) to develop and improve support services for people with Dementia and their carers. In addition to the actions identified in the table below, our priorities will be:

- To provide appropriate, accessible and timely information for people who are living with or have symptoms of Dementia and their carers.
- To advise and signpost people with Dementia and their carers to access support options at diagnosis and throughout the Dementia pathway.
- To improve access for currently under-represented groups including BME communities, young onset Dementia, people with sensory impairments and those with a learning disability.
- To reduce the risk of social isolation for people with Dementia and their carers by providing opportunities to access and be involved in peer support groups.
- To provide practical support for people with Dementia and their carers to support their independence including welfare, legal and financial advice.
- To increase the knowledge of carers by providing specific information to develop their confidence and resilience.

- To actively promote partnership working and co-ordination between services and build social capital for people with Dementia and their carers.
- To provide opportunities for people with Dementia and their carer(s) to access education and equip them to plan for their future care and support.
- To engage with and empower more people living with Dementia and their carer(s), businesses and organisation; helping to create more dementia-friendly communities across Derbyshire

Recommendation (What should happen now?)	Action taken/planned (or not applicable N/A if it does not concern your service)	Progress	Review Date
1. Continue to work to improve the provision of early education to raise awareness and understanding of dementia	One of the key commitments outlined in Derbyshire County Council’s (DCC) Council Plan is to develop support services for people with dementia to help them live well and independently. DCC will continue to provide opportunities for its staff to attend awareness raising sessions to improve understanding of dementia	DCC continues to jointly develop services for people living with dementia and their carers including the Dementia Reablement Service and Dementia Support Service. DCC continues to offer ‘Dementia Friends’ training to staff through its corporate training & development offer on a quarterly basis and ad-hoc sessions can be arranged for public-facing staff	October 2018  October 2018
	DCC will continue to improve and develop a range of information and signposting to	DCC are working closely with a range of partners to improve the information available to	October 2018
2. Increase information and communication around all types of dementia and provide clear			

<p>information on all signs and symptoms</p> <p>3. Consider the images used for literature and campaigns to ensure the message is clear that dementia can affect anyone, regardless of age</p>	<p>improve pre-diagnosis information and health promotion for the prevention of dementia.</p> <p>DCC Public Health commission Alzheimer’s Society to deliver the dementia friendly communities (DFC) project highlighted in the report that uses stakeholder engagement and awareness raising to empower people, businesses and organisations to become more dementia friendly and help people living with dementia maintain their independence in the community.</p> <p>DCC has expanded its ‘Safe Places’ scheme to include those people living with Dementia. The Dementia Support Service provided by Making Space plays a key role in disseminating information about all types of Dementia. DCC are working closely with Making Space to ensure the service reach is as wide as possible including younger people affected. The Adult Care Information service will review the leaflet and webpage that it produced about dementia to take account</p>	<p>those living with dementia / the symptoms of dementia. As highlighted in the report, Derbyshire is in process of becoming more dementia friendly. There are more and more businesses, organisations and community facilities becoming dementia friendly. Some leisure centres, GP surgeries, high streets, activities such as cinema and swimming are supported, but there is more to be done to ensure that these developments are replicated and are equitable.</p> <p>The Safe Places scheme is in the process of being expanded to include more PLWD. DCC are working closely with Making Space to ensure this service responds to the recommendations in this report and reaches as many people as possible living with Dementia or the symptoms of Dementia.</p> <p>DCC review of information leaflet and webpage has now commended.</p>	<p>October 2018</p> <p>October 2018</p> <p>October 2018</p> <p>October 2018</p>
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	<p>of the point raised about the images used. We will also consider adding more information about younger onset dementia to our information set.</p> <p>The Carers in Derbyshire website (<a href="http://www.carersinderbyshire.org.uk/">http://www.carersinderbyshire.org.uk/</a>) which has been developed by DCC will be reviewed to ensure there is sufficient information provided about younger onset dementia.</p>	DCC are reviewing the Carers in Derbyshire website to ensure there is further detail about young onset dementia.	
<p>4. Ensure initial concerns around suspected dementia are listened to:</p> <ul style="list-style-type: none"> <li>- Regardless of age</li> <li>- Consider the concerns expressed by carers and family members.</li> </ul>	DCC Adult Care assessments are needs led and take into account any concerns regardless of age. DCC will continue to ensure that all services provided or commissioned by the Council are responsive to concerns expressed by carers.	DCC continue to work closely with a range of partners to ensure services are responsive to carers. In particular Derbyshire Carers Association (DCA) are focusing on improving access to services and assessment for carers.	October 2018
<p>5. Work to reduce language barriers to ensure this does not delay diagnosis and to ensure people are fully supported throughout their journey</p>	<p>The Council are working with key partners, in particular the BME forum to consider how to respond more proactively to the needs of BME communities across Derbyshire.</p> <p>All services provided or commissioned by DCC are required to facilitate access for those who may experience language barriers.</p>	<p>There is an action plan in place for carers which will focus on reviewing all written information for BME Carers.</p> <p>DCC are working with the BME forum to review how we can improve uptake of services from the BME population.</p>	<p>October 2018</p> <p>October 2018</p>

<p>6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time</p> <p>7. Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis:</p> <ul style="list-style-type: none"> <li>- At a later date, rather than immediately after diagnosis</li> <li>- Ensure carers and family members are able to ask questions around their loved one's diagnosis in private.</li> </ul> <p>8. Work to ensure all PLWD, their carers and family members are signposted to appropriate support following diagnosis and ensure the support is easily available to access at a later date, if not required immediately after diagnosis</p>	<p>In partnership with the NHS and others, DCC will review the information made available following diagnosis to ensure people do not feel overwhelmed.</p> <p>Staff from the Dementia Support Service attend all Memory Assessment Clinics to offer information and advice straight after diagnosis or arrange an appointment at a later date. Private appointments are also offered to carers / other family members.</p> <p>As part of the Dementia workstream of the Derbyshire STP, we will work with partners to ensure signposting and support for PLWD, their carers and family members is timely, appropriate and accessible.</p>	<p>The review has commenced and already identified that the DCC 'Guide to Dementia Services' leaflet should be provided at all MAS clinics. DCC are continuing to work closely with Making Space and Derbyshire Healthcare Foundation Trust (DHCFT) to ensure the offer of information / advice following diagnosis is timely and proportionate.</p> <p>The Council and NHS CCGs are working together to re-procure the Derbyshire Dementia Support Service (DDSS), which will provide an opportunity to clarify and improve the service offer following diagnosis.</p>	<p>October 2018</p> <p>October 2018</p> <p>October 2018</p>
<p>9. Promote the Living Well Programme and the question and answer sessions</p>	<p>DCC will work with DHCFT and DCHS to promote the Living Well Programme and Question and Answer sessions more proactively.</p>	<p>Discussions have taken place with DCHS and DHCFT to ensure the Living Well programme and Q&amp;A sessions are promoted further.</p>	<p>October 2018</p> <p>October 2018</p>

	Staff from the Dementia Support Service commissioned by DCC already attend both Living Well and the Q&A sessions and we will consider options to integrate the service even more closely.	Discussions are underway as part of the Derbyshire STP about how we can integrate Dementia services more closely to improve the offer for PLWD and carers using services.	
10. Ensure the care and support needs of PLWD are met and regularly reviewed, as suggested in the Dementia Well Pathway	DCC has adopted the Dementia Well Pathway as its framework for commissioning services for PLWD and their carers. This includes a commitment that all commissioned services will review needs regularly throughout the different stages of the pathway.	DCC are in the process of reviewing all services for PLWD to ensure they review the changing needs of people they support regularly.	October 2018
11. Ensure workers and professionals are able to identify patients/clients with dementia and their carers/family members and have received adequate training to be able to meet their care and support needs in all settings	DCC welcome the positive feedback within the report regarding the Council's own homecare staff support. DCC offers a specialist Dementia training programme for care staff in addition to care certificate training to ensure they work to the highest standards.	DCC will continue to make the specialist Dementia training programme available to the Council's care staff in order to continue to improve the standard of care available.	October 2018
12. Maximise the need and importance of continuity, routine and training for homecare staff	DCC is developing and expanding the Dementia Reablement Service, a short term specialist homecare service with a focus on continuity, routine and flexibility to help stabilise support at home.	DCC will continue to develop and expand this service so it is available in all areas of Derbyshire.  DCC and DHCFT are reviewing how these teams can work closer together and provided a more coordinated service for PLWD.	October 2018  October 2018

	<p>DCC aim to integrate the Dementia Reablement Service closely with the new NHS Dementia Rapid Response Teams and share resources and training where possible.</p> <p>In May 2018 DCC will be holding a Best Practice in Dementia Care Conference targeted at Health and Social Care professionals to enable further reflection and skill sharing when working with people with Dementia. The Carer's Information, Advice and Support service provided by DCA now offers training and learning opportunities for carers, based on what carers have told us they would benefit from.</p>	<p>This conference is now being promoted for up to 100 delegates to attend as part of our commitment to improving support for PLWD.</p> <p>The Carer's information, Advice and Support service, commissioned by DCC identify training and learning opportunities for carers to take advantage of.</p>	<p>October 2018</p>
<p>13. Improve the experience of people involved with the DDSS in terms of more appropriate activities, more training for staff and ensure the one-to-one support is readily available</p>	<p>Derbyshire County Council and the NHS Derbyshire CCGs are in the process of re-procuring the DDSS. This will provide an opportunity to review and clarify the service priorities which include a high level of training for staff, a range of appropriate activity / peer support groups and accessible one to one support. DCC will continue working with the service provider to ensure</p>	<p>The process for re-procuring this service is now underway and will include input from PLWD and carers where possible to ensure the service responds to the collective feedback.</p> <p>DCC continue to meet regularly with Making Space to discuss service improvements and responding to feedback.</p>	<p>October 2018</p> <p>October 2018</p>

<p>14. Develop a role of a 'named person' to enable people to have one point of contact to be able to access the advice and support needed</p>	<p>that all clients accessing the service have the contact details for a named worker.</p>		
<p>15. Work to address the need for more support and activities for PLWD under the age of 65</p>	<p>As part of the Derbyshire STP Dementia workstream DCC and other key partners are reviewing service access and support available for PWLD under the age of 65. Service user review panel groups set up as part of the DFC project consider the need for a more diverse support and activity offer, linking with local DAAs in some areas of the county to facilitate new activities such as dementia friendly swimming.</p>	<p>Dementia Service Providers are currently being asked to review their offer for those PLWD under 65 in response to this report.</p> <p>Engagement process working well in Amber Valley, Chesterfield, South Derbyshire but need to ensure better consistency across all districts/boroughs.</p>	<p>October 2018</p> <p>October 2018</p>
<p>16. To ensure carers receive the correct level of support to effectively care for their loved one and also look after their own health and well-being</p> <p>17. Improve co-ordination of support services for carers, so they know where to go for advice, signposting and referrals</p>	<p>Ensuring carers in Derbyshire have access to the support, advice and information to best meet their needs is one of the priorities outlined in the Council Plan. Therefore we will continue to ensure that services respond proactively to supporting carers.</p> <p>As part of the Derbyshire STP Dementia workstream, DCC and other key partners will co-ordinate and integrate support services so they are more</p>	<p>DCC has involved carers in co-producing services including the Dementia Support Service and Dementia Reablement Service and will continue to involve carers where possible.</p> <p>DCC, NHS Commissioners and a range of providers are working together within the Derbyshire STP Dementia workstream to identify opportunities for further co-ordination and integration of services. The views of carers of</p>	<p>October 2018</p> <p>October 2018</p>

	accessible and help to build carer's confidence and resilience.	are particularly important as many PLWD are not able to express their views.	
18. Ensure families who are self-funded have the correct level of information and support	<p>DCC continues to develop the Adult Care information offer for those who self fund their care and support in line with the Care Act (2014).</p> <p>The Carers in Derbyshire website offers a range of vital information for self-funding families and we are committed to ensuring this information is accurate, up to date and relevant for self-funders.</p>	<p>DCC are continually updating information available on the corporate website regarding health and social care services.</p> <p>The Carers in Derbyshire website provides a key source of information for self funders and is updated regularly by the DCC Adult Care Information Team.</p>	<p>October 2018</p> <p>October 2018</p>
19. Address the lengthy process for accessing respite care and to make it easier to access	DCC will review the information it provides regarding how to access respite care, to ensure this is accurate, up to date and easily accessible.	DCC are ensuring that key partners, particularly within the NHS understand and can access Adult Care eligibility and referral processes when required.	October 2018
20. Provide clear information around Continuing Healthcare and the use of jargon, so people are able to easily understand the process.	<p>DCC will continue to signpost people to free and independent advice such as that provided by Beacon (<a href="http://www.beaconchc.co.uk/">http://www.beaconchc.co.uk/</a> 0345 548 0300) regarding the Continuing Healthcare process. There will be a targeted approach to ensure carers</p>	<p>DCC assessment staff continue to work with NHS partners to improve information about Continuing Healthcare so it is clearer to understand.</p> <p>The Carers Information, Advice and Support service continue to identify and support more</p>	<p>October 2018</p> <p>October 2018</p>

	<p>supporting those in receipt of fully funded CHC are proactively identified and supported to access the carer's information, advice and support service.</p>	<p>carers in need of support to understand Continuing Healthcare processes</p>	
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4) Chesterfield Royal Hospital NHS Foundation Trust (CRH):

Chesterfield Royal Hospital (CRH) - Response to Healthwatch Derbyshire Dementia Report

03 April 2018

Recommendation (What should happen now?)	Action taken/planned (or not applicable N/A if it does not concern your service)	Progress	Review Date
<p>1. Continue to work to improve the provision of early education to raise awareness and understanding of dementia</p>	<p>CRH aims to have an outstanding ‘dementia friendly’ culture of care which will be achieved by ensuring that all Trust staff are dementia aware. Specialist staff will lead by example and equip the workforce with the confidence necessary to improve the care and experience of dementia patients and their carers at CRH.</p> <p>The Trust’s Dementia Strategy includes dementia education which aligns with national education frameworks with clear compliance goals tiered to the needs of individual clinical areas.</p> <p>The Trust will continue to run and promote an extensive portfolio of Dementia training, which currently includes:</p> <ul style="list-style-type: none"> <li>• Induction - all staff receive dementia awareness training at induction</li> <li>• Annual essential training - dementia awareness training for all staff</li> <li>• Care Certificate Training - a nationally recognised qualification, including an agreed set of standards setting out the knowledge,</li> </ul>	<p>Dementia training strategy created and training programme already fully established</p>	<p>December 2018</p>

	<p>skills and behaviours expected of Healthcare Assistants (HCAs)</p> <ul style="list-style-type: none"> <li>Promoting Quality in Dementia - provides a better understanding of dementia and lived experience; this helps to equip staff in providing appropriate care and supporting people to live well with dementia - available for all staff</li> </ul> <p>Best Practice in Dementia Care - in line with National Dementia Strategies, this programme helps organisations to achieve national and regional care standards. The programme is accredited by the Royal College of Nursing with 16 CPD hours and recognised by Skills for Care.</p>		
<p>2. Increase information and communication around all types of dementia and provide clear information on all signs and symptoms</p>	<p>In addition to the above training, CRH has several avenues of support, where staff, patients and carers are able to seek further information.</p> <ul style="list-style-type: none"> <li>The Trust has established an Enhanced Nursing Support team (ENST) to offer a gold standard of care; ENST is a dedicated team of HCAs that provide a level of increased supervision to patients, including those with severe dementia. The team have received specific training and reside in a virtual ward managed by the Older People's Matron; this provides a flexible workforce with staff allocated on a shift by shift basis</li> <li>A Trust Older Person's Team is available for support, advice and assessment</li> </ul>	<p>Continuous availability</p>	<p>April 2019</p>

	<ul style="list-style-type: none"> <li>• The trust also has dementia information resources and packs available from Library Services</li> <li>• Dementia drop-in sessions are held every Tuesday afternoon and are currently run by Making Space - patients and carers are able to access information, advice and support about Dementia</li> <li>• In January 2018, a Carers Liaison Officer came into post, who offers support, information and signposting to carers and works with staff to ensure that they are able to provide this support.</li> <li>• The Trust also has support from Derbyshire Healthcare NHS Foundation Trust's (DHCFT) Liaison Team</li> </ul>		
<p>3. Consider the images used for literature and campaigns to ensure the message is clear that dementia can affect anyone, regardless of age</p>	<p>A key part of Trust dementia training is to discuss the potential for patients under the age of 75 to have dementia, to equip staff with the knowledge and understanding dementia can affect all ages.</p> <p>The Trust aims to be inclusive with all images used in publications including those regarding dementia. The Communications team have been made aware of this recommendation and the Older Person's Team will ensure they liaise with this team when producing any future publications for dementia at the Trust.</p>	<p>To discuss with Communications Team to raise awareness.</p>	<p>April 2019</p>
<p>4. Ensure initial concerns around suspected dementia are listened to:</p> <ul style="list-style-type: none"> <li>• Regardless of age</li> </ul>	<p>The Trust takes initial concerns around suspected dementia seriously and are able to listen to patients and carers via several avenues, including:</p>	<p>To continue development of role of</p>	<p>September 2018</p>

<ul style="list-style-type: none"> <li>Consider the concerns expressed by carers and family members.</li> </ul>	<ul style="list-style-type: none"> <li>Part of the Trust’s Older Person’s Team role is to find, assess and refer patients with dementia. All patients over the age of 75 will be assessed within 72 hours of admission to hospital. Those under 75 are assessed on referral from staff or self-referral.</li> <li>The Trust is establishing Dementia Champions, with the aim that every ward and clinical environment in the Trust will have a nominated champion to act as a link to the Trust developments in dementia, provide support and training to staff and work as a champion for excellence in care</li> <li>The Carers Liaison Officer is able to offer one to one support, advice and signposting to carers; carers can be referred by staff, or can self-refer to this support service. Carers champions are available across the Trust and carers can turn to them for advice</li> <li>The Trust has signed up to John’s Campaign, the principles of which recognise the valuable contribution of carers to the health and wellbeing of dementia patients; similarly, the Trust’s Carers Charter pledges that we will support the needs of carers and work with them as partners in care; the Trust has developed a Carers Passport to support this</li> <li>24/7 support is available from DHCFT’s Liaison Team; who are keen to focus on the whole ‘well pathway’ for dementia, a comprehensive interface with health, social</li> </ul>	<p>Dementia Champion</p> <p>To promote availability of Carers Liaison Officer and support for dementia patients and carers</p>	
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	care, voluntary, private and the PLWD personal network, at all stages of the illness.		
5. Work to reduce language barriers to ensure this does not delay diagnosis and to ensure people are fully supported throughout their journey	The Trust has access to interpreting services to support communication with patients and carers. The Trust recognises that patients with additional communication needs may need additional support and provides this via all avenues mentioned above.	To continue to support patients with additional communication needs	December 2018
6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time	The Trust provides patients and carers with information regarding dementia that they are able to take away and read at their convenience. There are also trained staff members available (as above) to offer additional support, information and signposting to patients and carers as appropriate.	To promote availability of support and information for patients and carers	September 2018
7. Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis: <ul style="list-style-type: none"> <li>At a later date, rather than immediately after diagnosis</li> <li>Ensure carers and family members are able to ask questions around their loved one's diagnosis in private.</li> </ul>	As above, the Carers Liaison Officer, Older Person's Team, DHCFT Liaison Team, Carers Champions and Dementia Champions are available to answer questions and provide further information whilst patients/carers are at the hospital, including one to one discussions. Trust staff will also signpost to support services in the community.	To promote availability of support and information for patients and carers	September 2018
8. Work to ensure all PLWD, their carers and family members are signposted to appropriate support following diagnosis and ensure the support is easily available to access at a later	In addition to the above: <ul style="list-style-type: none"> <li>The Carers Liaison Officer offers a follow-up phone call with carers two weeks following discharge of the PLWD to ensure their support needs have picked up in the</li> </ul>	To promote availability of support and information for	September 2018

<p>date, if not required immediately after diagnosis</p>	<p>community. There is also a self-referral slip for Derbyshire Carers within Trust carers packs</p> <ul style="list-style-type: none"> <li>Trust staff are trained to recognise and identify carers - including at induction and annual essential training</li> <li>There are Dementia and Carers links provided on the Trust web pages, which signpost to further support</li> </ul>	<p>patients and carers</p>	
<p>9. Promote the Living Well Programme and the question and answer sessions</p>	<p>The Trust will continue to work closely with DHCFT Liaison Team, who would refer into the Living Well Programme on behalf of the Trust, at diagnosis.</p> <p>The Trust has 2 GP practices as part of its portfolio of services, which include mental health practitioners and GPs, who are able to refer into the programme. The Carers Liaison Officer is due to undertake Carers Awareness training with GP staff and GP Carers Champions will be launched in June 2018.</p> <p>The Trust will work to actively promote the Living Well Programme in both primary and secondary care settings.</p>	<p>To launch Carers Champions at Royal Primary Care</p> <p>To raise awareness of the Living Well Programme with staff, patients and carers.</p>	<p>June 2018.</p>
<p>10. Ensure the care and support needs of PLWD are met and regularly reviewed, as suggested in the Dementia Well Pathway</p>	<p>The Trust undertakes a continuous patient experience survey to understand the experience of patients with dementia who use Trust services. In addition, Friends and Family feedback, concerns and complaints are regularly reviewed to identify</p>	<p>To continue surveying dementia patients/carers</p>	<p>October 2018</p>

	any areas of good practice and opportunities for improvement.		
11. Ensure workers and professionals are able to identify patients/clients with dementia and their carers/family members and have received adequate training to be able to meet their care and support needs in all settings	<ul style="list-style-type: none"> <li>• See recommendation 1, regarding staff training for dementia awareness. In addition, the Carers Liaison Officer provides Carer Awareness training to staff. Champions will also be available to identify and support patients with dementia and carers.</li> <li>• Each carer seen by the Carers Liaison Officer is offered an application for a carers emergency card, which alerts emergency services that a patient is a carer and that someone relies on them for support; staff are currently being educated on the recognition and utilization of these cards, particularly in ED.</li> <li>• The Older Person's Team is in the process of establishing digital identification of patients with dementia, via the Trust's electronic patient systems. Bed head magnets have also been ordered to assist visual identification of patients with dementia at the bedside.</li> </ul>	<p>To continue training staff to recognise, identify and signpost patients with dementia and their carers, including understanding of the emergency card</p> <p>To establish digital and physical identification of patients with dementia</p>	September 2018
12. Maximise the need and importance of continuity, routine and training for homecare staff	Not applicable.	NA	NA
13. Improve the experience of people involved with the DDSS in terms of more appropriate activities, more training for staff and ensure the one-to-one support is readily available	<ul style="list-style-type: none"> <li>• The Enhanced Support/Older Person's Teams and Carers Liaison Officer are able to provide one to one support and ensure activities are appropriate for patients.</li> </ul>	To raise awareness of reminiscence packs	December 2018

	<ul style="list-style-type: none"> <li>• The Trust does have several reminiscence packs available for patients, including a music pack.</li> <li>• Funding has been agreed for an activity room and Activity Coordinator, to support patients with dementia and social isolation during their stay in hospital.</li> </ul>	To establish Activity Room / Coordinator	
14. Develop a role of a 'named person' to enable people to have one point of contact to be able to access the advice and support needed	<ul style="list-style-type: none"> <li>• In our Primary Care Settings, the named person to enable people to have one point of contact to be able to access the advice and support needed would be the Care Coordinator.</li> <li>• Within the Trust, advice and support is provided by the Enhanced Support, Older Person's and DHCFT Liaison Teams; the Carers Liaison Officer acts as the named person for carers</li> <li>• In addition: <ul style="list-style-type: none"> <li>○ The role of Carers Champions is being promoted across the Trust, in line with the new role of Carers Liaison Officer and will be available on each ward.</li> <li>○ Dementia Champions are also being developed, to complement the Carers Champion role.</li> </ul> </li> </ul>	To establish the role of Dementia Champion To promote the role of Carers Champions	December 2018
15. Work to address the need for more support and activities for PLWD under the age of 65	Funding has recently been agreed for an activity room and Activity Coordinator, which will be available to all patients of all ages.	To establish Activity Room / Coordinator	
16. To ensure carers receive the correct level of support to effectively care for their loved one	The Carers Liaison Officer is keen to ensure that the health and wellbeing of carers is supported within the role.	To promote availability of support and	September 2018

and also look after their own health and well-being	The Carers Liaison Officer is able to offer one to one support and advice, as well as signposting to additional and future support services as appropriate, as are Carers Champions. The Carers Liaison Officer will continue to work with carers for up to two weeks after patient discharge; they will be referred to Derbyshire Carers after this time, should they require further support.	information for patients and carers	
17. Improve co-ordination of support services for carers, so they know where to go for advice, signposting and referrals	The Trust Carers Liaison Officer has established links with carers support services locally. The Trust's Carers Working Group includes representation from Derbyshire Carers and other local agencies, as well as carer representatives.	To continue working with carers and other agencies to increase awareness of support services	September 2018
18. Ensure families who are self-funded have the correct level of information and support	The Trust's discharge team liaise with Social Services who will then visit patients and discuss their requirements.  The Carers Liaison Officer is also able to support carers in finding information and support.	NA	NA
19. Address the lengthy process for accessing respite care and to make it easier to access	Not applicable	NA	NA
20. Provide clear information around Continuing Healthcare and the use of jargon, so people are able to easily understand the process.	The Trust's discharge team liaises with Social Services, to support the discharge process. The Trust is keen that patients and carers understand the discharge process and utilises the 'Red to Green' process, which keeps patients and carers	To continue using the 'Red to Green' process to communicate with patients	December 2018

	<p>informed of what needs to happen prior to discharge.</p> <p>The Carers Liaison Officer is also able to support carers in finding information and support.</p>	<p>regarding their discharge</p>	
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5) Derby Teaching Hospitals NHS Foundation Trust (DTHFT):

Recommendation (What should happen now?)	Action taken/planned (or not applicable N/A if it does not concern your service)	Progress	Review Date
1. Continue to work to improve the provision of early education to raise awareness and understanding of dementia.	The trust dementia awareness training is now mandatory. Therefore, all staff starting in the trust will receive the training as part of their induction. The training is also available to any existing staff who have not done the training since it went mandatory via the one shop shops. The lead nurse for dementia is also able to provide training to any areas where required.	Continuously ongoing.	N/A
2. Increase information and communication around all types of dementia and provide clear information on all signs and symptoms	The lead nurse for dementia is currently organising a study day around the different types of dementia which will include looking at the signs and symptoms to staff in the trust, this will help staff to feel confident to share the information with other staff and carers.	Organising Study day to take place in May 2018.	Feedback forms to be reviewed post study day. June 2018.

	<p>Staff can also signpost relatives, patients and carers to the information hub where there is information available around dementia.</p> <p>Information on types of dementia and signs and symptoms to be provided via the dementia portal for all staff on the intranet.</p> <p>Enquires to be made to see if information around types of dementia and signs and symptoms can be put on the trust web page for the public to view.</p>	<p>New dementia key workers starting in trust will be tasked with putting information onto the dementia portal as well as setting up a page for the public to view on the trusts web page.</p>	<p>August 2018</p>
<p>3. Consider the images used for literature and campaigns to ensure the message is clear that dementia can affect anyone, regardless of age.</p>	<p>The study day organised by the trust will include looking at early onset dementia.</p> <p>We will also look at resources and information available to both staff and the public that is available in the information hub around early onset dementia.</p>	<p>Study day taking place in May 2018</p>	<p>Review feedback forms in June 2016.</p>
<p>4. Ensure initial concerns around suspected dementia are listened to: - Regardless of age - Consider the concerns expressed by carers and family members.</p>	<p>Dementia link nurse/champions meeting are being re-established, so we have lots of champions across the trust who can address any concerns raised by families and carers.</p>	<p>First meeting held in March 2018, meeting will be held 4 times a year.</p>	<p>August 2018.</p>

<p>5. Work to reduce language barriers to ensure this does not delay diagnosis and to ensure people are fully supported throughout their journey</p>	<p>Lead dementia nurse to ensure that staff are aware that interpreters can be booked for patients where there is a language barrier when discussing a diagnosis of dementia and when attending appointments.</p> <p>We can also look at making sure that written information is available in various languages to reduce any language barriers</p>	<p>Information to be sent out trust wide about the use of interpreters where there are language barriers for our patients with dementia.</p> <p>Lead nurse to contact someone about getting information sheets in various languages.</p>	<p>May 2018</p> <p>May 2018</p>
<p>6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time.</p>	<p>Considerations and discussions to be made around what information is provided to patients and families following diagnosis and whether this information is appropriate at the time of diagnosis.</p>	<p>Lead Nurse to speak to Consultant about information that is shared around diagnosis and appropriate time. Next meeting 12th April.</p>	<p>July 2018</p>
<p>7. Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis: - Later, rather than immediately after diagnosis - Ensure carers and family members can ask questions around their loved one's diagnosis in private.</p>	<p>Look at what follow up appointments or resources are available to patients and families following diagnosis for any follow up questions after initial diagnosis.</p> <p>We need to ensure that patients and family members have an opportunity to ask questions independently and privately following diagnosis.</p>	<p>Lead Nurse to discuss with Consultant at next meeting in April.</p>	<p>July 2018</p>

8. Work to ensure all PLWD, their carer's and family members are signposted to appropriate support following diagnosis and ensure the support is easily available to access later, if not required immediately after diagnosis	We can provide all patients and relatives with a resource folder which contains lots of information around dementia and also signposts them to the various community groups who they would be able to get support from.	In place.	Review resource folder yearly to ensure all information is relevant.
9. Promote the Living Well Programme and the question and answer sessions.	Ensure that information around the living well programme is given to patients and carers on diagnosis and that information is also in the resource folder and notice boards.	In place.	Review resource folder yearly to ensure all information is relevant.
10. Ensure the care and support needs of PLWD are met and regularly reviewed, as suggested in the Dementia Well Pathway.	Support to be provided to the dementia key workers and dementia champions in the trust to ensure they can support all staff to ensure that PLWD needs are met and reviewed as required.	Key workers are in place and new key workers will receive an induction and will have training around best practice in dementia care.	December 2018.
11. Ensure workers and professionals can identify patients/clients with dementia and their carers/family members and have received adequate training to be able to meet their care and support needs in all settings.	All staff working on the care of the elderly wards with patients with dementia to receive tier 2 training which will ensure they are able to meet the needs of patients with dementia.	On-going.	Yearly.
12. Maximise the need and importance of continuity, routine and training for homecare staff	N/A	N/A	N/A
13. Improve the experience of people involved with the DDSS	N/A	N/A	N/A

in terms of more appropriate activities, more training for staff and ensure the one-to-one support is readily available.			
14. Develop a role of a 'named person' to enable people to have one point of contact to be able to access the advice and support needed.	The trust has a dementia lead nurse who patients and relatives can be signposted to, to offer advice and support.	In place.	N/A
15. Work to address the need for more support and activities for PLWD under the age of 65.	<p>The trust has a link to the national dementia support manager for early onset dementia who is able to offer support and advise to patients, carers and staff with patients around early onset dementia. I will be meeting with the lead to discuss what activities are available for these patients to support them whilst an inpatient.</p> <p>We currently have numerous memory boxes that staff can utilise to provide distraction as well as use as activities for our patients. We also have resources we can use as activities which include using apps to listen to music, watch movies amongst various other activities.</p>	<p>In place.</p> <p>In place.</p>	<p>On-going.</p> <p>On-going.</p>
16. To ensure carers receive the correct level of support to effectively care for their loved	All carers have access to John's campaign room if they chose to stay with their loved	In place.	On-going.

one and also look after their own health and wellbeing.	ones, so they are able to take a break if needed. The facilities on offer are for carers to be able to access to sleeping facilities as well as kitchen facilities.		
17. Improve coordination of support services for carers, so they know where to go for advice, signposting and referrals.	We have a dementia resource folder for families who require information and advice, which sign posts them to various community groups where they are able to get advice and support	In place.	On-going.
18. Ensure families who are self-funded have the correct level of information and support.	We can signpost people to the relevant services (Making Spaces) who will be able to provide information and support to families	In place.	On-going.
19. Address the lengthy process for accessing respite care and to make it easier to access.	I have arranged a meeting with the discharge lead in the trust to discuss the process around people accessing respite care	Meeting Discharge Lead in April.	On-going.
20. Provide clear information around Continuing Healthcare and the use of jargon, so people are able to easily understand the process.	I have arranged a meeting with the discharge lead in the trust to discuss information around continuing health care to ensure that anyone needing to access it is understandable, and that jargon is at a minimum.	Meeting Discharge Lead in April.	On- going.

6) Derbyshire Healthcare NHS Foundation Trust (DHCFT):



**Derbyshire Healthcare**  
NHS Foundation Trust

**Directors' Suite**  
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DE22 3LZ

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29 March 2018

Healthwatch Derbyshire  
Suite 14, Riverside Business Centre  
Foundry Lane  
Milford,  
  
Belper  
Derbyshire  
  
DE56 0RN

Dear Colleagues in Healthwatch

Thank you for the time taken to visit our services and seek out the views of the individuals and families who use our services. Your commitment and support is appreciated.

Please do pass on our thanks to all individuals who gave their time and shared their experiences.

We value their experience and their feedback

Our Trust feedback to your specific questions

b) We will also be making the following changes as overleaf/...

	Issue	Response	Action	Responsibility	Completion date
2.	Increase information and communication around all types of dementia and provide clear information on all signs and symptoms	<p>At the point of diagnosis all patients are informed of their specific diagnosis and the rationale for why this is an appropriate diagnosis.</p> <p>At the point of diagnosis all patients are offered either face to face or referral to Making Space the dementia support service. They are commissioned to provide literature including information specific to their diagnosis</p> <p>At the point of diagnosis all patients are offered the Living well with dementia education course that provides further education on types of dementia</p>	<p>To continue to work alongside DSS staff in the diagnosis clinic.</p> <p>To continue to provide information and access to the Living well with dementia education sessions.</p> <p>To continue to promote Dementia Q and A sessions in different format.</p> <p>Q and A sessions advertised in the South of the county including Local radio and newspapers</p> <p>Q and A sessions due to re-commence in North</p>	<p>DHCFT MAS Staff</p> <p>DHCFT staff</p>	<p>22/03/18</p> <p>22/3/2018</p> <p>North Q and A sessions to start by 10/2018</p>
4.	Ensure initial concerns around suspected dementia are listened to	DHCFT provide training to GP's and the wider health community as requested	To continue to respond to requests to provide Dementia training at Quest events and wider health community	DHCFT Dementia Specialists	On-going
5.	Work to reduce language barriers to ensure this does not delay diagnosis and to	 BME wait times.docx	To continue to promote the services in appropriate formats	DHCFT Dementia Specialists	On-going

	ensure people are fully supported throughout their journey	There is no evidence to support the belief that BME patients are delayed in the process of diagnosis once referred to MAS. See attachment. DHCFT provide Urdu and Panjabi dementia Q and A sessions and Living Well with Dementia Education Group			
6.	Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time	Information leaflets are provided by DSS and the information is agreed with Commissioners	DSS to review with Commissioners and user groups as to appropriateness of information	DSS	On-going
7.	Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis: At a later date rather than immediately after diagnosis Ensure carers and family members are able to ask questions around their loved ones diagnosis in private	Dementia Q and A sessions available.  Living Well with Dementia Education Group offered to anyone diagnosed with dementia and carer/ next of kin DSS available either face to face or via referral at all diagnosis appointments.  DHCFT takes the clear view that the diagnosis belongs to the person diagnosed and it would be inappropriate to discuss a specific diagnosis without the person diagnosed being present. Wider general information about dementia and diagnosis can be	Continue to deliver Q and A sessions in the South. Re-activate Q and A sessions in the North  Continue to provide Living Well with Dementia sessions	DHCFT Neighbourhood Dementia Leads South  DHCFT Neighbourhood Dementia Leads North  DHCFT Day Hospital Dementia Lead	On-going  North Q and A sessions to start by 10/2018  On-going

		obtained through the above routes			
9.	Promote the Living Well Programme and the question and answer sessions	DCHFT run the Dementia Q and A sessions in the South. They are due to recommence in the North (10/18) The Living Well with Dementia Group is provided by DHCFT in the South and is offered to all people newly diagnosed	To continue to provide current level of service and develop Dementia Q and A sessions in the North of the county.	DHCFT Neighbourhood Leads	On-going North Q and A sessions by 10/18

Your name: **Sarah Wood, Memory Assessment Service Manager**

Organisation: **.....Derbyshire Healthcare NHS Foundation Trust**

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Tel No: 03001234018

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Yours sincerely



**Carolyn Green**

**Executive Director of Nursing and Patient Experience**

## **7) Derbyshire Community Health Services NHS Foundation Trust (DCHS):**

Derbyshire Community Health Services NHS Foundation Trust (DCHS) welcomes this report from Healthwatch Derbyshire. The report provides valuable insight into the experiences of people living with and affected by dementia. DCHS supports people along their journey from diagnosis of dementia, living with dementia through to end of life care. Whilst we recognise the role of specialist facilities people affected by dementia access a wide range of our services all of which strive to be as dementia friendly as possible. We are pleased to see that services that we offer are described positively by those who use them. We have a strong focus on person and family centred approaches to care and are working hard to identify and meet the needs of carers.

DCHS is developing a Dementia Strategy. People with dementia and their carers have been involved in co-producing this. The strategy covers the Well-Pathway for Dementia (NHS England 2016). The Healthwatch Derbyshire report is very useful to underwrite the direction of travel for DCHS and our approach to meeting the needs of people with dementia. It is encouraging that we have also picked up some of the same themes: staff training, signposting people at an early stage and giving time after the diagnosis are reflected in our strategy as well as in this report. Our strategy will define the way forward including our commitment to improving services used by people living with dementia.

The following key strategic objectives in our strategy address the concerns articulate within the report:

- Comprehensive education and training for all clinical staff
- Early specialist support for people who have been diagnosed with dementia
- Targeted support (including cognitive stimulation and meaningful activity) to enable people with moderate dementia to continue to live well
- Listening, involving and engaging with people with dementia and their carers including the timely completion of dementia care plans
- Ensuring prompt referrals to specialist services
- Development of a Carer strategy which will support the carers and friends of people with dementia. This will include carer assessments, advice and advocacy support.
- Promotion of activities that improve the wellbeing of people with dementia and their carers i.e. activities that promote physical and mental wellbeing, applicable to the services that we provide to people with dementia
- The continued development of our Trust as a dementia friendly organisation, with environments that promote better outcomes, and are safe.

- Development of partnerships to improve collaborative working and improve integration of care. This will address the concerns raised in the report regarding the disjointed nature of services.

We will ensure that the important messages contained within this report are shared widely across the trust. This will enable us to identify the actions we need to take based on information from local people. We will utilise our Dementia and Frailty sub-group to ensure that these actions are progressed.

Rick Meredith

Medical Director

Derbyshire Community Health Services NHS Foundation Trust

**8) Making Space - Derbyshire Dementia Support Service (DDSS):**

**Healthwatch Responses- DDSS**

Recommendation (What should happen now?)	Action taken/planned (or not applicable N/A if it does not concern your service)	Progress	Review Date
<p>6. Consider and evaluate the amount of information provided following diagnosis, and to consider whether the information is delivered at the right time</p> <p>7. Ensure there is opportunity for PLWD, carers and family members to ask questions following the diagnosis: - At a later date, rather than immediately after diagnosis - Ensure carers and family members are able to ask questions around their loved one's diagnosis in private.</p>	<p>DDSS provide an option for support immediately following diagnosis at Memory Assessment Clinics across Derbyshire.</p> <p>Where information, guidance and support is requested at that time by a person with dementia and/or carer, this is provided. In addition, the option is given for a one-to-one home visit from the same Dementia Advisor.</p> <p>For anyone that wishes to receive support at a later date, the service information leaflet and contact details of the Dementia Advisor in attendance is provided.</p>	<p>DDSS will review this process and establish whether a follow-up mechanism would be beneficial when the service is declined at this initial stage.</p>	<p>May 2018</p>
<p>13. Improve the experience of people involved with the DDSS in terms of more appropriate activities, more training for staff</p>			



<p><b>In response to staff training:</b></p>	<p>feedback following each session. This feedback is used to determine how future groups are planned, delivered and developed. Each session is tailored to address the specific needs that have been highlighted by those participants. DDSS recognises that there should not be a 'one size fits all' approach to its schedule of groups.</p> <p>Given the diversity of each group it can prove challenging to deliver sessions that are agreeable to everyone. DDSS make every effort to ensure that activity schedules are varied and appealing to participants.</p> <p>Many of the DDSS Dementia Advisors possess a wealth of knowledge amassed throughout long careers within a Health and Social Care setting. For those less experienced there is regular, structured training aimed at improving and enhancing their knowledge base.</p>	<p>that they deliver an enjoyable and meaningful experience for all.</p> <p>Dementia Advisors will continue to receive regular training in order to maintain and develop knowledge and expertise.</p> <p>A package of training is being developed for the DDSS Dementia</p>	<p>On-going</p>
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<p>In response to one-to-one support:</p>	<p>All Dementia Advisors have received dementia training from the Dementia Development Coordinator and Admiral Nurse Consultant for Making Space. They provide a constant source of support and expertise to the team and are able to advise on more complex matters.</p> <p>There is a continual training structure in place covering a range of topics including:</p> <ul style="list-style-type: none"> <li>• Person Centred Care</li> <li>• Distress Behaviour</li> <li>• Activity and Engagement</li> </ul> <p>Although trained and knowledgeable, given the broad complexities surrounding dementia, there will be occasions where a Dementia Advisor will be required to research in response to certain questions or requests for information.</p> <p>DDSS have conducted almost 600 one to one support meetings with people living with dementia</p>	<p>Advisors by Stirling University-home of the Dementia Services Development Centre. This will be made available within the coming months.</p> <p>A Dementia Advisor will source information on behalf of anyone requiring specific guidance around a given area and feed back to the individual or family in a timely manner.</p>	<p>On-going</p> <p>On-going</p>
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	<p>and their carers since October 2017. These have taken place within the home, at Memory Assessment Clinics and at other community venues.</p> <p>DDSS provides a service for anyone that wishes to receive one to one support from a Dementia Advisor. This applies to anyone that is new to the service and all existing service users including those attending groups.</p>	<p>DDSS will ensure that all group participants are aware of the option to receive one to one support outside of group settings.</p> <p>As part of a package of support developed during one to one meetings, referrals are made to other partner organisations including Derbyshire Carers Association to ensure that identified needs are met</p>	<p>April 2018</p> <p>On-going</p>
<p>14. Develop a role of a ‘named person’ to enable people to have one point of contact to be able to access the advice and support needed</p>	<p>Upon referral to the DDSS a Dementia Advisor is allocated- this is determined by geographical location. This Dementia Advisor remains the single point of contact for a person with dementia and their carer throughout their journey of support and remains as such until all identified needs have been addressed.</p>	<p>DDSS ensure that this is clearly communicated to anyone that is referred to the service and the relevant contact details are provided</p>	<p>April 2018</p>

9) Derbyshire Carers Association (DCA):

Derbyshire Carers Responses to Healthwatch Dementia Report February 2018

Comments relating to Carers from Health Watch report	Actions and Intervention underway	Progress	Timescales/comments
Too many Organizations/ Disjointed support	We have become aware of these comments from carers and have in response looked at developing better joint working agreements/arrangements with our vol sector partners, especially Making Space. Feel this has the potential to be developed further, care needs to be taken not to duplicate or loose specialist knowledge.	Draft Agreement developed between DCA and Making Space but only covering the DEEP currently, will be looking at other carer groups	Next 6 months  Could benefit with a clearer lead in some service areas- lead provider model??
Carers not knowing where to go	DCA Have now increased links with the Living Well Programme .Promotion of the Carers in Derbyshire web site, and DCA improving their web site over the next 6 months.	Ongoing work over the next 6 months	

	Also increased links to care co-ordinators, and the development of carer connect hubs over the next year.		
Carers Assessment	Would be helpful to have more specifics in relation to this comment. Staff have and more training both in assessment and person centred approaches - this has taken place over the last 4 months.		Ongoing with Derbyshire Adult Care in relation to the format of the assessment and review process
Carers health	Some of this is the core approach is with groups to get carers to focus on their needs they often are so focused on the cared for. Keep healthy related topics are being introduced more into some of the support sessions, also looking at other areas in the country to see whether different models could be developed which offer carers a specific keep healthy sessions, this will require joint working with health providers which may need commissioner support. Also just commencing conversations with public health to see how the proposed PH hub model could also promote Carers health.	6- 12 months	
Emergency Card	This is an area which definitely needs more work and clarification about what it can and cannot do and what the expectations are from a carer's view as well as the system. There is a lot of learning from the work so far especially in relation to how you can keep the info up to date, there is also the potential to link to the Summary Care record if commissioners can facilitate this so that		Would benefit from a more joined approach involving all agencies. It is led via DCC currently.

	Emergency Services and acute have a consistent approach		
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