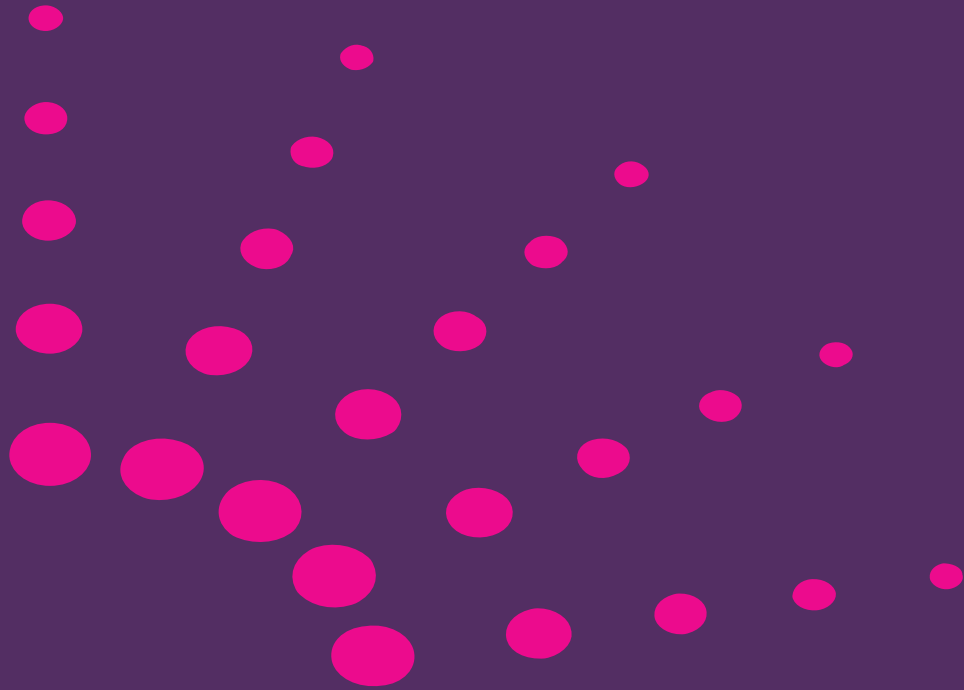# Next steps

Community Supports Model
For People With Dementia

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Concluding Observations

- A really important feature of the projects has been the opportunity they have had to **'reshape' the usual or expected interaction of people with health services**

- This created a context where **option demand could function** i.e. people have the knowledge that appropriate care will be available should they need it in the future and therefore tend not to 'ask for everything just in case'.

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Concluding Observations

- A key learning is that **mindset/ attitude and context** is as important as the requisite skillset being in place.

- Much of what has been achieved is linked to facilitating existing staff to work differently in an **enabling and supportive environment** where qualified risk-taking/ innovation was possible.

KEY SERVICE DESIGN PROPOSALS

PERSONALISED SUPPORTS - INFORMATION & SUPPORT STRUCTURES

- **Post-diagnosis information sessions**
  are an important first step – 1 to 1 sessions (i.e. by prior appointment), rather than group sessions.

- **Support groups**
  are valuable (for the person with dementia, their family/ carer and the volunteers who support them).

Factors associated with successful support groups

Clear aim as to why the group meets

Needs driven by attendees

Appropriate & knowledgeable facilitation

Use of small groups

Welcoming environment

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PERSONALISED COMMUNITY SUPPORTS – MAINTAINING ABILITY

- Personalised supports must be **purposeful and informed by the person with dementia** and their family/carer.

- Personalised supports are best provided over **a block of hours** so that the person with dementia can engage optimally and the carer can avail of free time.

- All supports should be provided by individuals that are **trained in dementia and personalised supports**. There is a role for a range of personnel in providing these supports, including dementia support workers, specially trained home helps, private agency staff and volunteers.

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PERSONALISED SUPPORTS – RESPITE & CRISIS

- Carer focused **interventions must be of sufficiently high quality** to truly enable disconnection from the focus on the condition/demands of care.

- Flexibility of provision is key, with a **block of support hours agreed on an individual basis** rather than pre-determined (typically 2-4 hours per week in a block, to overnights and weekend cover as required).

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CO-ORDINATION OF SUPPORTS AND SERVICES

- Best undertaken by a **dementia specialist from a clinical background.**

- Can draw on **existing skills and expertise** within the health and social care system (as was the case in the demonstration projects).

- Day to day **case management remains with the key worker** locally i.e. the health professional who has the most contact with the person with dementia.

- Opportunity to align with planned **multi-disciplinary primary care team meetings** which will be an optimum forum for prioritisation, coordination and review of cases.

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COMMUNITY LEVEL INFORMATION AND AWARENESS RAISING

- There should be a deliberate strategy that includes **changing attitudes** about dementia to address stigma.

- This should be linked to **changing behaviours** through the active involvement of the community in a way that 'adds value' to the persons life and recognises their personhood.

- Experience is that **targeted engagement** with groups/ networks in the community, with a specific ask geared to the achievement of specific outcomes.

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ASSISTIVE TECHNOLOGY

- Should be framed in terms of **improved quality of life** for the person with dementia, rather than in the context of control, regulation or safety.

- Should be underpinned by a **good assessment** of how the telecare and AT need to be carefully tailored, taking into account characteristics of the person, the carer and the home environment.

- Overall site examples demonstrate that **simple low tech devices** in the early stages of dementia can facilitate ambient living, communication and engagement.

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Next Steps

- Final round of input into the service design process

- We will be issuing a consultation document and E-Survey to conference participants to get a last round of feedback into the design of the service model

- In January 2016 the final Community Supports Model will be published

Thank
You
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Feidhmeannacht na Seirbhíse Sláinte
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An Roinn Sláinte
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