PM Challenge on Dementia 2020
Implementation Plan

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EXECUTIVE DIRECTOR
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(NATIONAL ADASS LEAD FOR DEMENTIA)
The Vision
The Prime Minister’s Challenge (2015 – 2020 ) Implementation Plan remains focused on the following principles;

People with dementia have told us what is important to them. They want a society where they are able to say:

- I have personal choice and control over the decisions that affect me.
- I know that services are designed around me, my needs and my carer’s needs.
- I have support that helps me live my life.
- I have the knowledge to get what I need.
- I live in an enabling and supportive environment where I feel valued and understood.
- I have a sense of belonging and of being a valued part of family, community and civic life.
- I am confident my end of life wishes will be respected. I can expect a good death.
- I know that there is research going on which will deliver a better life for people with dementia, and I know how I can contribute to it.

Key to this is:

*A person centred approach should be at the heart of good dementia care as Dementia is everybody’s responsibility.*
CHALLENGING COMMISSIONERS AND PROVIDERS TO DELIVER HIGH QUALITY DEMENTIA SERVICES
How ADASS can help deliver the Implementation Plan

Risk Reduction (Preventing well) - Dementia isn’t an inevitable part of ageing

Health and Care - We want England to be recognised as the best country in the world for dementia care and support

Dementia Friendly Communities

Promoting Engagement in Research
Dementia Friendly Communities

Kathryn Smith
Director of Operations
Empowering people with dementia to have high aspirations, confidence and know they can contribute

- Shaping communities around the views of people with dementia and their carers
- Empowering people with dementia and recognising their contribution
- Ensuring early diagnosis, personalised and integrated care is the norm
- Businesses and services that respond to customers with dementia
- Maintaining independence by delivering community-based solutions
- Ensuring that activities include people with dementia
- Appropriate transport
- Easy to navigate physical environments
- Challenging stigma and building awareness
- Befrienders helping people with dementia engage in community life

Becoming dementia friendly means:
Prime Minister’s Challenge

- Dementia Friendly Communities
- Health and Care
- Risk Reduction
- Research
Scale and impact of the Dementia Challenge

• Impact on people living with dementia

• Impact on the economy

• Why we need Dementia Friendly Communities
Prime Minister’s Champion Group

• Current outputs:
  – Dementia-friendly Financial Services Charter
  – Dementia-friendly Employers’ Guide
  – Dementia-friendly Arts Venue Guide
  – Dementia-friendly Technology Charter
  – Accessing and Sharing Information publication
  – How to Help People with Dementia: A Guide for Customer-Facing Staff

• Upcoming projects/outputs:
  – Maintaining Personal Wellbeing pledge, March 2016
  – Dementia-friendly Retail Charter, April 2016
  – Dementia-friendly Transport Pledge, Summer 2016
  – Housing Charter, Summer 2016
  – Air Transport Pledge, Winter 2016
Delivering and recognising DFCs

DFC Recognition Process

Meet Foundation Criteria
↓
Submit application for Recognition
↓
Approval
↓
‘Working to become dementia-friendly’ symbol
↓
6 month report
↓
Annual self-assessment
Where we are now

2012

• 20 communities working to become dementia friendly
• 10% of England covered by a LDAA
• Low awareness and understanding
• Low Local Authority engagement

2016

• 147 communities working to become dementia friendly
• 75% of England is covered by a LDAA
• 1.4m dementia friends
• 55 Local Authorities currently registered under DAA and DFC
How can we support ADASS in the delivery of DFCs?

Calling for:

• All communities to become more dementia friendly and register through the DFC recognition process

• Everyone in Local Authorities and related organisations to have an improved awareness of dementia through attending Dementia Friends

• All businesses and organisations to take steps towards becoming dementia friendly

• Encourage employers to engage with AS on how to be a dementia friendly organisation
Doreen Jones

Life before and during her Personal Health budget
Meet Doreen in her youth
In her retirement with Harold

Fondly referred to by Harold as his “PUDDIN”
IT WAS LIKE WE HAD WON THE LOTTERY! WHEN DOREEN GOT HER BUDGET.

WE COULD START TO PLAN FOR A BETTER FUTURE.

THE BIGGEST BENEFIT WAS BEING ABLE TO HAVE PERSONAL ASSISTANTS (PA’S)

THE FREEDOM OF CHOICE.

IT ENABLED DOREEN TO GO OUT SAFELY “BOY” WAS SHE HAPPY AT THIS.

TO ENABLE HER TO ENGAGE WITH THE COMMUNITY AGAIN.

FEELING & BEING SAFE IN THEIR HOME BECAUSE THEY HAD THEIR PA’S SUPPORT.
THE FLEXIBILITY OF A PERSONAL HEALTH BUDGET

THE BIGGEST PLUS IN DOREENS PHB WAS HER PERSONAL ASSISTANTS.

BEFORE WORKING FOR DOREEN 5 OF 7 PA’S HAD NO EXPERIENCE IN CARE.

Having a PHB it allows you to get your own staff.

To train your personal assistants the way you want them to work; for you.

Enabling & encouraging your PA’s to higher education while at work, is a positive for everyone.

Doreen’s PA’s have had online training in basic modules of health & safety, food prep & handling, moving & handling, first aid, & medication; all certificated.

Resuscitation & Chocking training provided by Wythenshawe hospital. Certificated.
Where possible I ask any professionals coming to see Doreen if they can help support the PA’s with regard to any training & advice.

Hands on training from the Community Physio team in massage which supported Doreen.

Hoist training from the Hoist provider.

NVQ 1,2 & 3 for staff who wanted it. Providing them with better understanding of their role which promotes good quality of care and better job prospects. (Salford City college)

At regular times I would sit down with each employee (OBO of my Aunt) talk about how they are doing and if they have any concerns or needs at work. These conversations guide me to look for things that will support them in their work with Doreen when needed.

We worked this way for just five & a half years, there are often problems in holding a large team together sometimes it can be hard managing them but they are outweighed by the good.
A Happy Doreen

Sometimes A troubled Doreen
Before the PHB

- Constant calls to the police, disappearing acts.
- Daily/weekly need for District Nurses, constant calling of the GP & very frequent trips to Hospital.
- They lived in Fear and uncertainty about their future. Feeling that nobody cared & quality of life was poor.
- Constant! Issues with agency staff & their management, this was very worrying for everyone.
- Managing day by day, sometimes this was hour by hour.
- Depression and great sadness.

With a PHB

- 999 Calls - Stopped
- Ambulance & porter needs - Stopped.
- GP callouts & hospital stays – Minimal.
- Much less dependency on district nursing team. Reduced from daily to monthly and now only when needed.
- Having PA’s they are reassured, supported & had freedom to choose what they want.
- Providing jobs and shaping bespoke Personal Assistants.
- Enabling & encouraging staff to higher level of education while working.
- I feel we are ensuring our team have the best chance of work after we have gone. Doreen wins because her PA’s have a better understanding in care needs.
DOREEN LIVED HAPPILY AT HOME FOR 80 YEARS

THANKS TO HER PERSONAL ASSISTANTS PROVIDED BY HER PERSONAL HEALTH BUDGET
PERSONAL BUDGETS FOR DEMENTIA CARE

ELAINE FAWCETT
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TODAY'S AIMS

• Present a real life case study of living with a personal budget
• Strengths and Limitations
STRENGTHS

• Day care services
• Home care services
• Holidays and respite
• Familiarity in the home enviro
### LIMITATIONS

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<thead>
<tr>
<th>LOCAL LEVEL</th>
<th>POLICY LEVEL</th>
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<tbody>
<tr>
<td>• Delays in assessments</td>
<td>• Public Liability Insurance</td>
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<td>• MBA lack of transparency</td>
<td>• DBS Checks</td>
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<td>• Recruitment</td>
<td>• Pension auto–enrolment</td>
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CONCLUSION

• Having a personal budget has had a hugely positive effect on Ron's health and wellbeing
• Through the use of pa’s we have been able to shelter him from limitations I have described
• Aged 83, 6 years post diagnosis, 2 years with a budget, Ron is living well with dementia