



National Dementia Office

Creating Awareness, Developing Models of Care, Providing Leadership

NEWSLETTER



Welcome to the National Dementia Office First Newsletter

Background

The National Dementia Office has been established as part of the National Dementia Strategy Implementation Plan (NDSIP). The aim of the Strategy is to improve dementia care so that people with dementia can live well for as long as possible, can have services and supports delivered in the best way possible, and can ultimately die with dignity. The Strategy emphasises that most people with dementia live in their own communities and can continue to live well and to participate in those communities. The Strategy contains a set of priority actions capable of implementation within existing resources or by reconfiguring resources. It also contains a number of

additional actions which may require resources additional to what is currently available and which will be considered as these become available in the future.

The Health Service Executive (HSE) have allocated €15.5m in matched funding to a grant from Atlantic Philanthropies of €12m.

There are six priority areas within the strategy. Across these six areas are 14 priority actions and under each a number of additional actions. For further information please go to **www.hse.ie**

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Progress to date

1. Leadership (National Dementia Office, NDO)

A National Dementia Implementation Strategy Office has been established. In post to date is a full time Projects Manager and part time Nursing Lead. Recruitment is underway for a General Manager Project Lead, with interviews scheduled for December. An implementation plan has been created clearly outlining the actions required, and is updated regularly. A Monitoring Group and a Joint Oversight Group have been established to oversee and advise on the implementation. This Monitoring Group is chaired by the Department of Health, and has representation from key stakeholders across the sectors. A Programme Implementation Board is also in place (chaired by the HSE). ▼

delivery of education by supporting GP dementia experts to lead education, to map local dementia care pathways and to engage with and support GP's and PCTs.

To date, a project team and governance arrangements are in place. Guidance and oversight with national and international expertise is complete. Conferences and lectures promoting this project have been ongoing throughout 2015. Web pages to disseminate and communicate the information have been created. An educational learning needs assessment is ongoing, with GP's. An E learning module for ICGP is complete. Engagement with health link is complete. All other key activities are ongoing or planned.



2. Timely Diagnosis and Intervention.

This priority action involves training GP's and primary care teams. The GP is usually the first contact when concerns about memory arise. A project entitled PREPARED (Primary Care Education, Pathways and Research of Dementia) is underway. The objective is to design and implement primary care dementia education for GP's and members of primary care teams (PCTS) and the

key performance indicators (KPI's) to measure impact has been developed, and are ready to be used in the reporting and verification process.

4. Training and Education.

This priority involves the development of appropriate educational materials for health and social care professionals, and informal carers.

3. Integrated Services, Supports & Care for People with Dementia and their Carers.

This priority action involves the delivery of intensive home supports, tailored to meet the needs of the person with dementia. Work has begun on developing integrated working through consortia, in two initial sites (North Dublin & Cork).

The roll out of Intensive home care packages commenced in January 2015 and monitoring of the allocation and uptake of these packages to persons with dementia is ongoing. A suite of



To date the HSE National Dementia Education project have developed a suite of programmes suitable for delivery to health care staff and carers working in the Community, Residential Care and Acute Care services. The programmes are available free through HSE, Voluntary and ASI centres and on the Dementia Elevator and HSE Land website. The programmes have been developed sequentially based on best practice; needs analysis and continuous evaluation. All the programmes are available through the HSE and Dementia Elevator programme.

5. Research and Information Systems.

This priority will focus improving systems for better recording and coding of dementia in acute and primary care settings. This also involves the development of practice-based dementia registers.

6. Better Awareness and Understanding.

The HSE, in partnership with key stakeholders, will implement a public awareness and health promotion campaign. This will provide a better understanding of dementia in society, reduce stigma, and target populations particularly at risk.

HSE Health and Wellbeing and HSE Communications divisions are leading out on this action. A nationwide support campaign is being developed. The campaign strategy entitled 'Dementia Friendly Ireland' has a steering committee in place since July. Recruitment for Campaign Manager is underway, a public health registrar has been appointed to lead the review. Other key activities as identified in the implementation plan are ongoing.

As part of the healthy Ireland survey questions were included on attitudes to dementia. This has now been published and is available on www.gov.ie

