



Office of A.N.D. Older People and Palliative Care - Strategy
Services for Older People
HSE Community Services Building
Rathass, Tralee, Co. Kerry

Tel: 066 7199711 Fax: 066 7195609
Email: olderpeople.socialcare@hse.ie

5th February, 2021

Deputy Mary Lou McDonald
Dáil Éireann,
Leinster House,
Kildare Street,
Dublin 2.

Dear Deputy McDonald,

The Health Service Executive (HSE) has been requested to reply directly to you in the context of the following Parliamentary Question, which was submitted to this Department for response.

PQ Ref: 3836/21

To ask the Minister for Health the current care pathways for persons with dementia requiring acute hospital care.

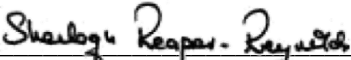
The National Dementia Office (NDO) is working with the Acute Hospital Division and other key HSE groups to progress a number of initiatives which aim to improve the care of a person with dementia in acute hospitals, where it is necessary for the person with dementia to attend and/or be admitted to hospital.

These current initiatives include:

- The Irish National Audit of Dementia Care in Acute Hospitals (INAD-2) results was launched on 1st September 2020. Paper copies of the full report and hospital group reports were sent to each participating hospital group, and to key people in each hospital. The National Dementia Office followed-up with a virtual meeting with the 5 hospital groups in Q4 2020, to encourage follow-up actions. Many have committed to forming a hospital group level team to drive progress. To complement this, Acute Operations agreed to fund an academic nurse to support selected hospitals in 3 groups in developing local, feasible action plans. This support project will be adapted from previous UK work based on their similar dementia audit, and will begin in March 2021, for 9 months.
- **On-going acute hospital staff training in dementia care** –A range of training in dementia and delirium care suitable for staff in acute hospitals, including 4 hour intensive, and 2-day detailed training programmes, are available for all staff in the acute hospital settings. These programmes are available through practice development and the centres for Nurse Education locally.

- **Enhanced highly dementia-skilled staff capacity**– this includes the development of new Nurse Specialist posts in dementia, including a national job description to standardise the expertise required for this post, and a business case template to aid local services to make a case for additional funding to secure the financing for a CNSp Dementia post.; in addition, some candidate Advanced Nurse Practitioners (ANP) in Older Persons posts has a specific focus on dementia. Further development of such posts is contingent on funding being provided by the Department of Health for a further round of applications for cANP in Older Person (Dementia) posts.
- Funding was secured in the 2021 budget for 6 new acute hospital dementia specialist posts (one per hospital group); to support person-centred care via dementia/delirium pathway implementation, staff training frameworks, and direct support for complex cases. All groups have chosen the most strategic site, based on INAD-2 data and their knowledge of the local context. A national job description was updated in Q4 2020 by the National Dementia Office, and the recruitment of these posts will begin shortly. We hope for funding for a second post per hospital group in 2022.
- The NDO have had several meetings with the Acute Hospital Division, and some hospital group and individual hospitals, to align dementia/delirium care to existing frailty, older persons or unscheduled care initiatives, thereby utilising the resource of existing multidisciplinary teams who can support good dementia/delirium care.
- A national framework for acute hospital dementia/delirium pathways has been developed this is based on the evaluation of three acute hospitals who implemented pilot dementia pathways from 2014-2018 (Connolly Memorial, St James and Mercy University Hospitals). The framework has an embedded delirium algorithm for use on acute hospital wards which is fully complete and successfully piloted, ready for implementation sign-off. This algorithm complements the existing delirium algorithm for use in the Emergency Department which was developed by the National Clinical Programme for Older People. Training on the use of this algorithm has been incorporated into the National Dementia Education programme and National Frailty Training Programme for acute hospitals. Linked to the hospital- and group-level feedback from INAD results, as well as on-going staff training and planned enhanced acute hospital skilled staff capacity described above, this will enable hospital groups to adapt the pathway framework for their own local context and introduce dementia pathways across their hospital group in a planned, staged and strategic way, cognisant of other competing quality improvements and change processes within acute hospitals that will need to be considered at local level.

Yours sincerely,



Sheilagh Reaper-Reynolds,
Interim A.N.D. Older People and Palliative Care - Strategy