



Model of Care for Dementia in Ireland

An Easy-to-Read Guide

Report Authorship

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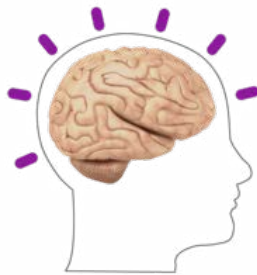
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What is this document about?



This document is easy to read information about the Model of Care for people who have dementia.



Dementia is the name for a number of conditions that cause changes in the brain affecting a person's ability to remember, think or problem solve.

Dementia is a chronic condition, which means it will not go away once you have it.

Dementia changes things in

- physical,
- psychological,
- social, and
- economic ways for the person, their carers, supporters, families, and society.



Over 64,000 people in Ireland are living with dementia.

When somebody has dementia, it will change their life and people need support at all stages.



This document is about a Model of Care, a way of supporting people so they get the support they need when they need it.



The Model of Care has 37 targets across the time when a person is dealing with dementia.

The targets also have recommendations to make the assessment, diagnosis, treatment, care and support of a person with dementia better.



This document will not tell you about every single target but it will give you a summary of what the targets are about and the main points you need to know if you ever need this Model of Care yourself or if someone, you love needs this Model of Care.



This dementia Model of Care was made by the HSE in collaboration with a number of advisory groups, which consisted of many different healthcare professionals across acute, and community services, the voluntary and education sector and people with dementia.



This Model of Care is for everyone.

It includes people who might have dementia and people living with dementia.

It includes people of every age, disability, gender, ethnicity, dementia sub-type or where they live.



It sets out pathways of care for people who may have dementia and who may also have other needs and conditions other than dementia.

The four key parts of the dementia Model of Care

There are four key parts to the Dementia Model of Care. These include:

1. Diagnosis



diagnostic model, which includes pathways to diagnosis or helping you to find out if you have a dementia and guidance on assessment for clinicians.

Diagnosis is about doctors using tests to find out if somebody has dementia.



2. Guidance on Communicating a Diagnosis

Communicating a diagnosis is about doctors and other healthcare workers telling somebody they have dementia, or somebody understanding that they have dementia.



3. Care planning

Care planning and guidance on personalised care planning processes that includes the person with dementia and their supporter/carer.



4. Care after diagnosis and supports to live with dementia

There are 5 parts to caring for someone once they have dementia.



1. Diagnosis



Everybody who has symptoms of dementia should be able to get an assessment.

You should get an assessment at different levels.



Level 1 is with your GP or your own doctor in your local area.

For level one, people should get an appointment within 2 weeks of asking for one



Level 2 is to go to a Memory Assessment Support Service when the case is not complicated and you are over 65. This is where there are special assessments for dementia and the right staff and supports to guide those who have dementia.

People getting an assessment at level 2 should be seen within 6 weeks.

Most people who are over 65 and experience difficulties that might be because of dementia will go to a Memory Assessment Support Service.



Level 3 is when you go to a Regional Specialist Memory Clinic when the case is complicated or if you are under 65.

People at level 3 should also be seen within 6 weeks.

Most people who are under 65 and experience difficulties that might be because of dementia will go to a Regional Specialist Memory Clinic. They may also choose to be seen in a Memory Assessment Support Services if it is closer to where they live and the doctors can manage their case.



Other people might have dementia and other conditions that they may need help and support for, like somebody with an intellectual disability.

These people will get their care from their doctor, GP, older person's service or community mental health service and may get some support from another Memory Service called the National Intellectual Disability Memory Service.



The targets in the Model of Care say:

- Everyone who needs an assessment should get one.
- The right staff and professionals should be in place to do the assessments.
- The services should collect data and information to keep improving the services they offer.



- There should be one National Intellectual Disability Memory Service (NIDMS) which will support people with an intellectual disability to get the assessments for dementia they need.



- Everyone who has an intellectual disability and might have dementia should get a specialist assessment.
- Everyone living in residential services who might have dementia should get a specialist assessment.
- Everyone under 65 who might have dementia should get a specialist assessment.
- Most people, (80%) should get the results of their assessment within 3 months of their assessment appointment.



2. Communicating a Diagnosis

Communicating a diagnosis is about somebody learning that they have dementia.

The Model of Care sets out how this should happen.

The targets say:



- Everyone who needs to hear they have dementia should hear it from the doctor who did the assessment.
- The person should be able to talk about what happens next with their dementia and their care.
- There should be a quiet meeting place where the person can have a private conversation.



- There should be enough time for the person to understand the situation as much as they can.
- The appointment to talk about the diagnosis of dementia should take at least 30 minutes.



- The person should get all the information they need about their dementia and the supports they can get.
- The person should get the information by talking but it should be written down too.



- Everybody should get a follow up appointment 4-8 weeks after they learn they have dementia.
- Some people who need to take certain medication may need it sooner.
- Everybody should have a person they can contact about their dementia after the appointment.



3. Care planning

Care planning is about planning the supports that someone with dementia is going to need.

It should focus on their abilities and what they can do.



It should focus on all of the person, their history, their wellbeing, and on their strengths.

Supports should be flexible and change when someone might need them to.



Care planning is about building a support network around someone, of family and friends and the health supports they need, too.



The targets in the Model of Care say:

Everybody diagnosed with dementia should have a personalised care plan.



The plan should be written down.

The plan should include the treatments and supports that the person needs and that they will get to help them with their dementia.



Everyone diagnosed with dementia should be given the contact details of a dementia advisor who can help them understand all of the information and supports.



Everyone diagnosed with dementia should get support from a social worker at the beginning and a team of people who can give support when needed.

The personalised care plan should be reviewed every 12 months.



4. Care after diagnosis and supports to live with dementia

There are 5 parts to caring for someone once they have dementia.

The 5 parts of caring for someone with dementia are:



Understanding and planning

Supports are focused on giving information to the person and their carer or supporter, with specific supports around planning for the future and understanding the information about dementia.



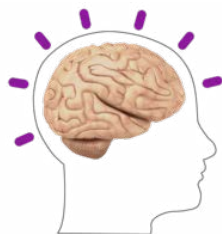
Staying connected

Supports are focused on keeping connected with services and supports.



Staying healthy

Supports are focused on supporting someone to be healthy. This also includes ways to promote wellbeing.



Supporting cognition

Supports focused on helping the person's brain to work well.



Supporting emotional wellbeing

Supports to improve wellbeing during all of the time they have dementia



As part of care after diagnosis the targets say:

- Everyone with dementia and their families and supporters should have information about the research happening about dementia so they may be able to take part.



- Everyone with dementia should be able to choose activities and supports that suit them best.
- The Dementia: Understand Together programme should get more resources so that local communities can better support people with dementia.



- Everyone with dementia who needs care at home should get it in a flexible way that suits them best.
- If someone needs a carer at home they should get an assessment for this.



- Staff supporting people with dementia should have all the training they need to support them in the right way.



- There should be more funding and research into Assistive Technology to support people with dementia.



- Family members and supporters should have the information they need to support the person with dementia.

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