

## 19 Oct Dementia ECHO – note from discussion

### Following Jemima Collin's presentation

Resource from Chat:

<https://www.e-lfh.org.uk/programmes/recognising-and-managing-deterioration/>

Dr Melanie Handley is currently doing some work on dementia friendly wards with Prof Claire Surr and Rowan Harwood

<https://future.nhs.uk/system/login?nextURL=%2Fconnect%2Eti%2Fhome%2Fgrouphome>

Integration is difficult in community

Time pressured care makes dementia friendly IPU areas difficult

Needs based assessment tools sought in addition to frailty tools

Debate occurs around use of frailty as a term

Care settings other than hospices can provide dementia care ahead of eol if understanding is in place

### Maggie – Lantern model

Resources:

<https://future.nhs.uk/system/login?nextURL=%2Fconnect%2Eti%2Fhome%2Fgrouphome> Link to Lantern Model will be provided in resources - <https://www.stchristophers.org.uk/lanternmodel>

<https://www.england.nhs.uk/wp-content/uploads/2018/04/my-future-wishes-advance-care-planning-for-people-with-dementia.pdf>

HCAs as part of the model is a positive

Family feedback prior to model showed compassion at eol was most remembered part of care

**Case study Sophie Dodsworth** - '88 year old lady with a new diagnosis of Moderate Vascular Dementia'

Lack of best interest based decision making is an issue

In CHAT:

We saw the devastating effects on patients with Cognitive Impairment in hospital without their main carer/loved one over the pandemic. This is probably one of the main orientating factors in dementia care

What is the best way to do ACP? (More effective if person is ready to start discussing). DUK ACP is useful especially in regard to sharing with all practitioners and that sharing is important. If families also hold documentation that can be important plus GPs.

Palliative care outcome scales (POS) are sadly less known in dementia field. Highlights need for marrying of palliative and dementia worlds like we are today

ACP in community not always seeing same improvement in recent years as those in hospices

IPOS dem was originally devised for use in care homes but is now also used in the community:

<https://pos-pal.org/maix/ipos-dem.php>

GPs use SystemOne

As admiral nurses do you help people complete ACPs and sign off treatment escalation plans? Our clinical nurse specialists have been trained to do this in community hospice team which has been great - prevents unnecessary admissions etc. GPs don't always have time and accept that the CNS can do these - helpful to person. Yes is the answer in general

Dr Gill Horne is happy to share a framework for the above

Next session: rare and Early Onset Dementias – 11 January 2022 14.45 – case study presenters invited