Assurance in Dementia Care
Achieving excellence in dementia care quality

"It is estimated that £80 million a year could be saved by improving hospital care for people with dementia and that every general hospital has excess costs of £6 million because of the condition, due to worse outcomes for length of stay, mortality and institutionalisation."

Source: The NHS Handbook, 2012

CHKS has an innovative approach to meet the challenge of dementia care in hospital settings. Working in partnership with Alzheimer's Society we can provide an innovative assurance package designed to improve the outcomes for patients with dementia, provide reassurance to patients' families and enable healthcare providers to deliver efficient and effective care.

Key facts

- **One in three people over 65** will develop dementia
- There are **800,000 people** with dementia in the UK and this is set to double in the next 30 years
- Unrecognised dementia on admission leads to poorer outcomes including prolonged length of stay - up to 30% longer than patients without dementia and have an increased risk of mortality
- Dementia **cost the NHS over £23 billion** in 2012 and this figure will rise to £27 billion per year by 2018
- The **CQUIN scheme is offering financial incentives** for dementia risk assessments and other aspects of dementia care.

In partnership with

Alzheimer's Society | Leading the fight against dementia

The CHKS Solution

Every hospital needs to understand how they are performing against the highest standards in dementia care. Assurance in Dementia Care will benchmark your organisation and provide guidance as to where improvements can be made. The programme consists of two phases: a diagnostic phase and a consultancy phase.

Diagnostic phase

This will consist of:

a. **Data submission** from your organisation

b. **Data analysis** – we will focus on a number of key indicators for two groups – those with a diagnosis of dementia recorded and those without, who are admitted for a group of acute conditions.

Sample indicators are:

- Average length of stay
- Incidence of falls
- Mortality rate.

The output will benchmark your organisation's performance against the national performance distribution and show the range of variation and percentile performances.

c. **Provision of report** – we will present a performance feedback report to you and also provide a web-based dashboard to enable ongoing monitoring of performance against care quality indicators.

d. **Baseline assessment of service provision in dementia** – we will provide a set of dementia care standards which include the latest evidence and guidance in best practice. Within a three month period, you will undertake a self-assessment which is followed up by a visit to formally evaluate compliance against the standards.

e. **Assessment visit** – a team of highly-experienced CHKS surveyors will carry out the assessment. The length of the assessment will depend on the size of the organisation or department(s) to be reviewed.

The standards used cover: governance, assessment, care and treatment planning, mental health and liaison psychiatry, nutrition and hydration, information and communication, staffing and staff support, staff training, physical ward environment & facilities, discharge planning and person centred care.

f. **Assessment report** – following the assessment visit, a report and action plan will be prepared. This report will highlight the successful areas and areas for improvement.

g. **Presentation of findings** – a presentation of findings will be made to key stakeholders/the executive team. During this meeting, we will make recommendations for the consultancy phase.

Consultancy phase

- Defined after the diagnostic phase and based on the findings of the data analysis and site visit.
- A typical programme of advisory work might incorporate up to 10 days of consultancy support and 10 days of training, depending on need and size of project.

Training

Working in partnership with CHKS, Alzheimer's Society offers a range of training workshops to provide your staff with the skills and knowledge to detect dementia and provide the specialist care required by patients with dementia.

Data analysis using indicator dashboards
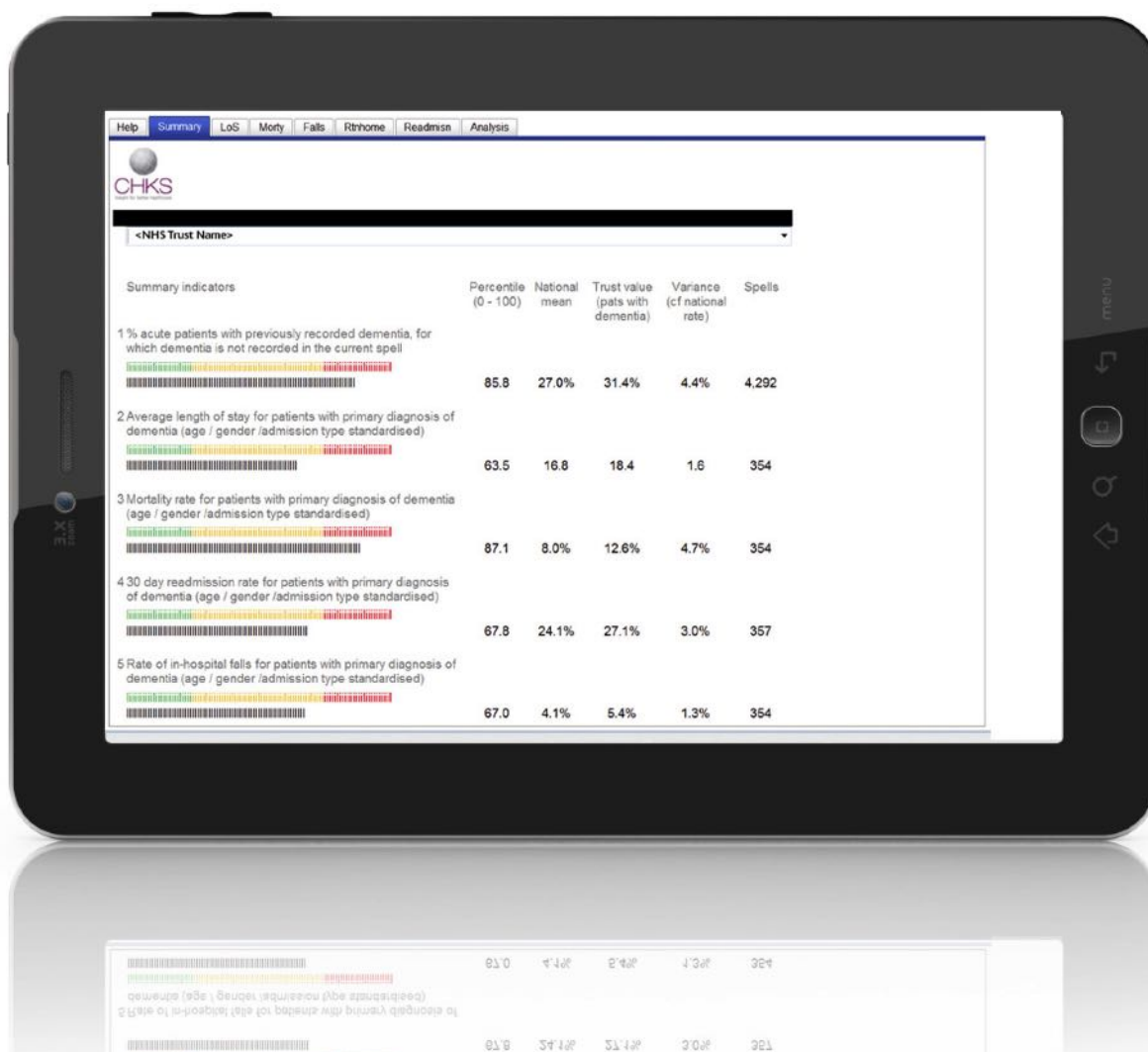
Example dashboard showing the key dementia care indicators.

Programme benefits

- Improve **clinical outcomes** of patients with dementia
- Provide **assurance to stakeholders** that you are addressing the dementia challenge
- Deliver **cost efficiencies** by avoiding unnecessarily long hospital stays
- Develop your **reputation** as a high-quality provider of dementia care
- Reduce **anxiety and fear** for patients with dementia
- Improve **staff engagement** with patients
- Increase **staff confidence** in caring for patients with dementia
- Reduce **complaints**.

Who is this programme for?

Leaders in healthcare organisations who understand the growing problem of dementia and are committed to improving patient care, safety and well being while addressing the challenge of health service efficiency.

> **"Dementia is often overlooked or untreated on admission to hospital and this could worsen the effects of dementia"**
>
> The Royal College of Psychiatrists

Training courses

In partnership with Alzheimer's Society, we offer a range of training workshops. The workshops include:

1 Dementia awareness for staff in acute settings
2 Caring for people with dementia in acute hospital settings
3 Meeting the complex needs of people living with dementia
   - Communicating with people with dementia
   - Behaviours that challenge
   - End of life care for people with dementia.

Learning outcomes your staff can expect to achieve include:

- Explain what dementia is and describe common signs and symptoms of dementia
- Recognise the difference between Alzheimer's disease and mild cognitive impairment
- Recognise the difference between delirium and dementia, and delirium with dementia
- Examine the issues facing staff working with people with dementia in acute settings
- Explain the concept 'take time to save time'
- Identify the impact of the care environment for a person with dementia
- Explain what a person may be communicating through behaviour
- Recognise the disease trajectory, and how this may impact on the provision of care at the end of life.

To find out more, please contact us:
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