



dementia
wellbeing
service

Bristol Dementia Wellbeing Service Quality Account

2017/18

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Service Performance

2,647

open referrals

(up from 2,323 in March 2017)

1,551

new referrals

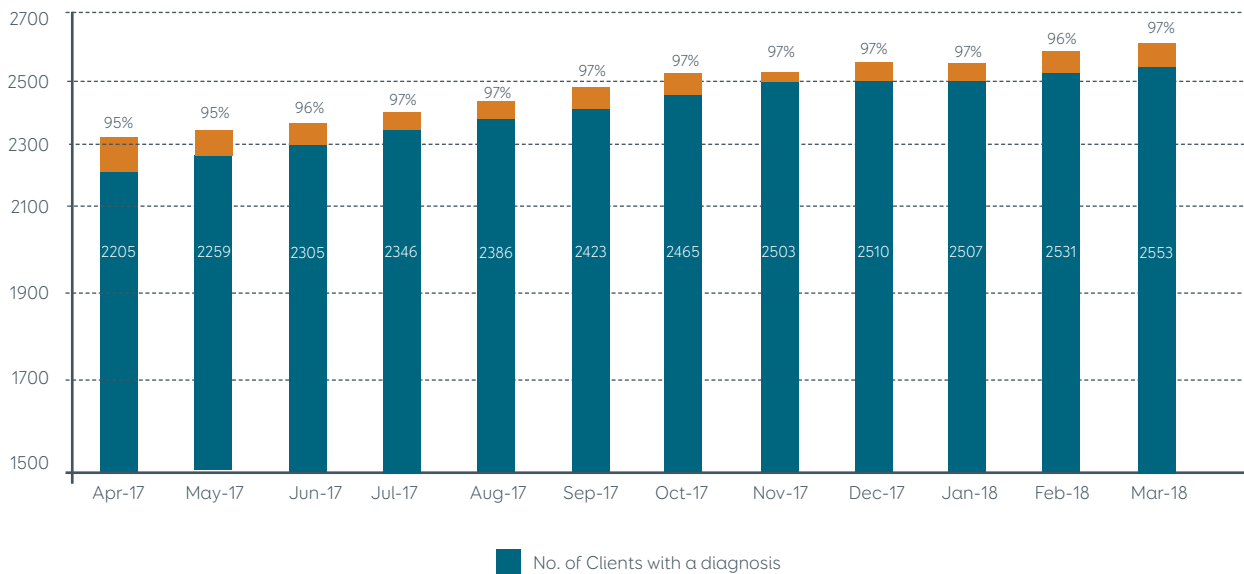


Key Performance Indicators for 2017/18

We are pleased to present our performance over the last year:

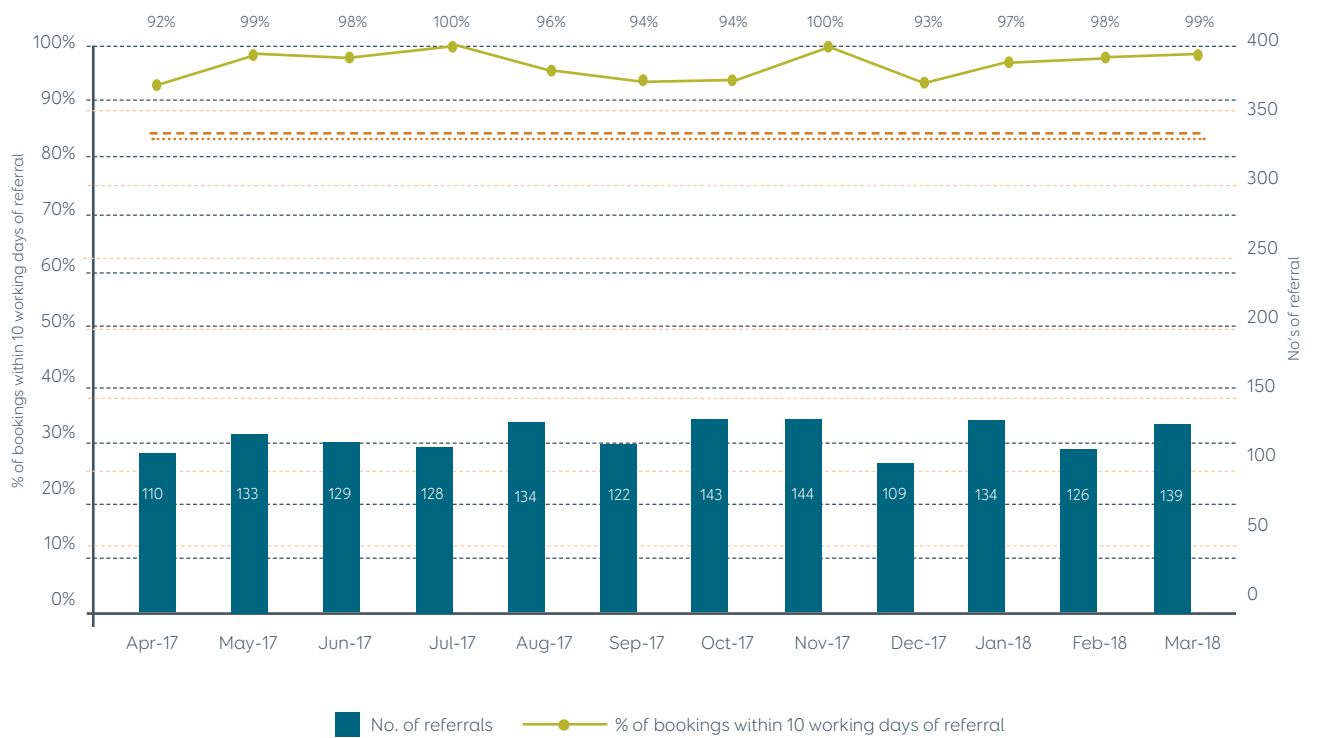
KPI 1: Diagnosis rates

We have maintained a high rate of diagnosis which is now consistently above 97%. The remaining 3% are those undergoing further investigation to determine an accurate diagnosis.



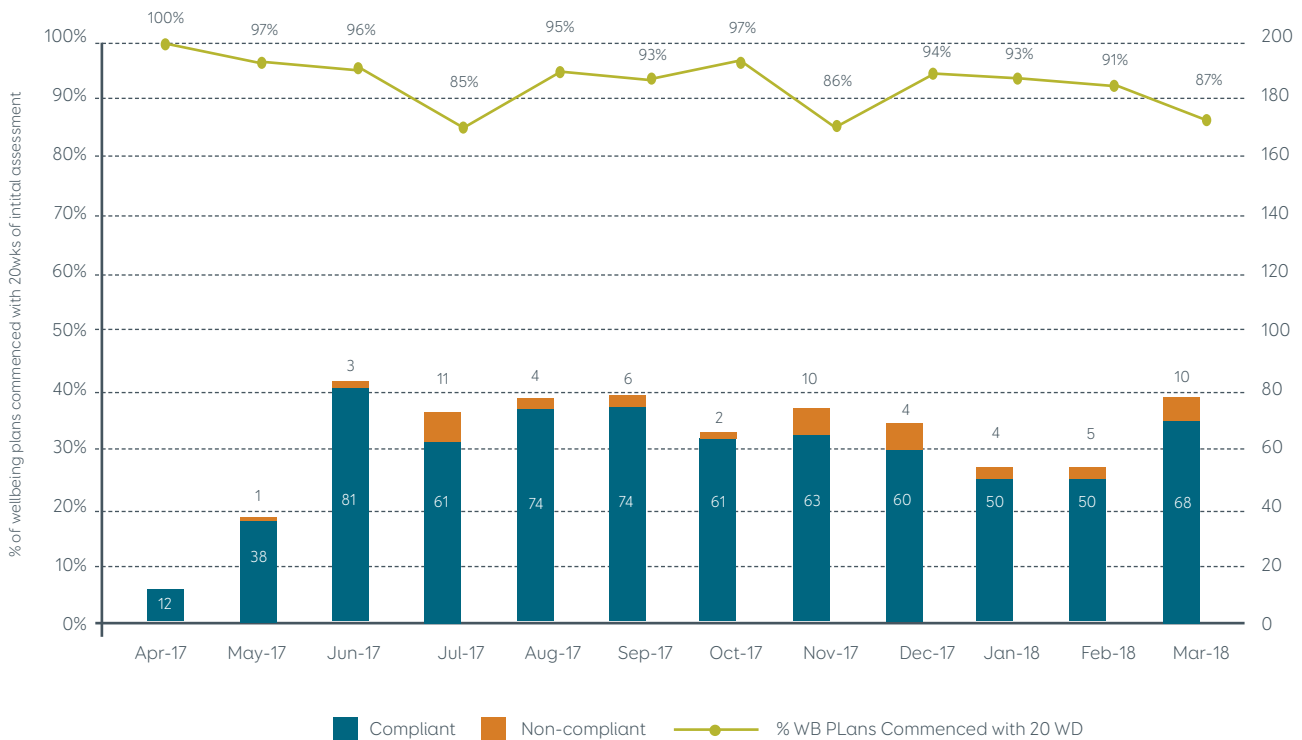
KPI 2: Waiting time for assessment

We have consistently exceeded our target to book an appointment within 10 working days following a referral, including some months at 100%. The referral rate continues to remain relatively consistent around 120-130 per month



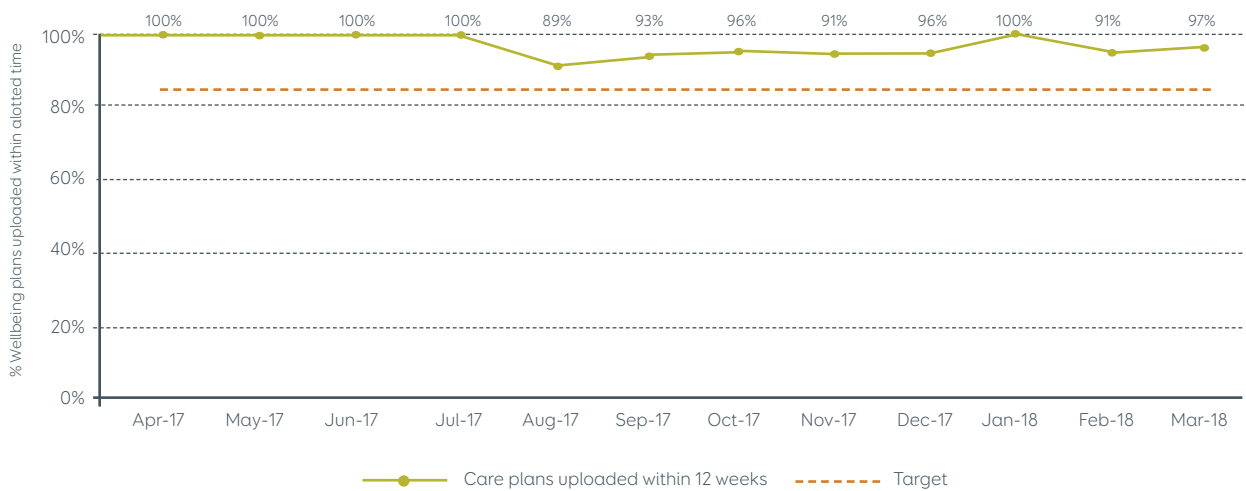
KPI 3a: Initial assessment letter

We introduced this new KPI to measure either a wellbeing plan or initial assessment letter being sent within 20 working days of the first assessment meeting. We set a high target of 95% which we have not achieved every month but this has been consistently above 85%.



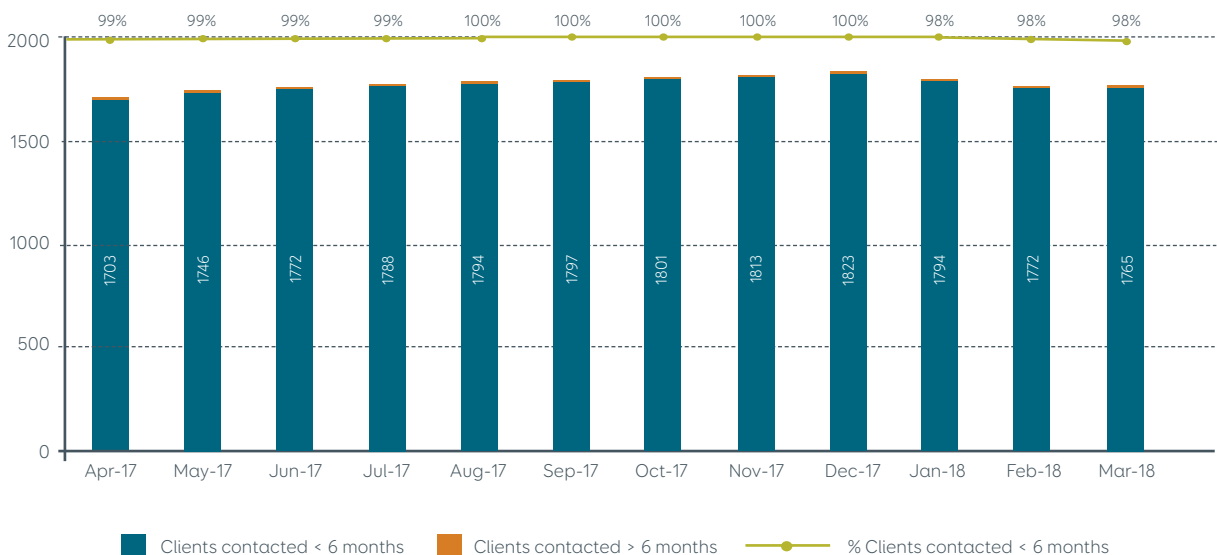
KPI 3b: Wellbeing Plans

Sometimes an individual's Wellbeing Plan can take a little more time to complete, so we also introduced this new KPI to ensure plans are completed within 12 weeks, setting a target of 95%. We achieved this target in over 95% of cases for most of the last year. There are occasional exceptions (for example, if a plan is delayed whilst an individual is in hospital) which require longer to complete.



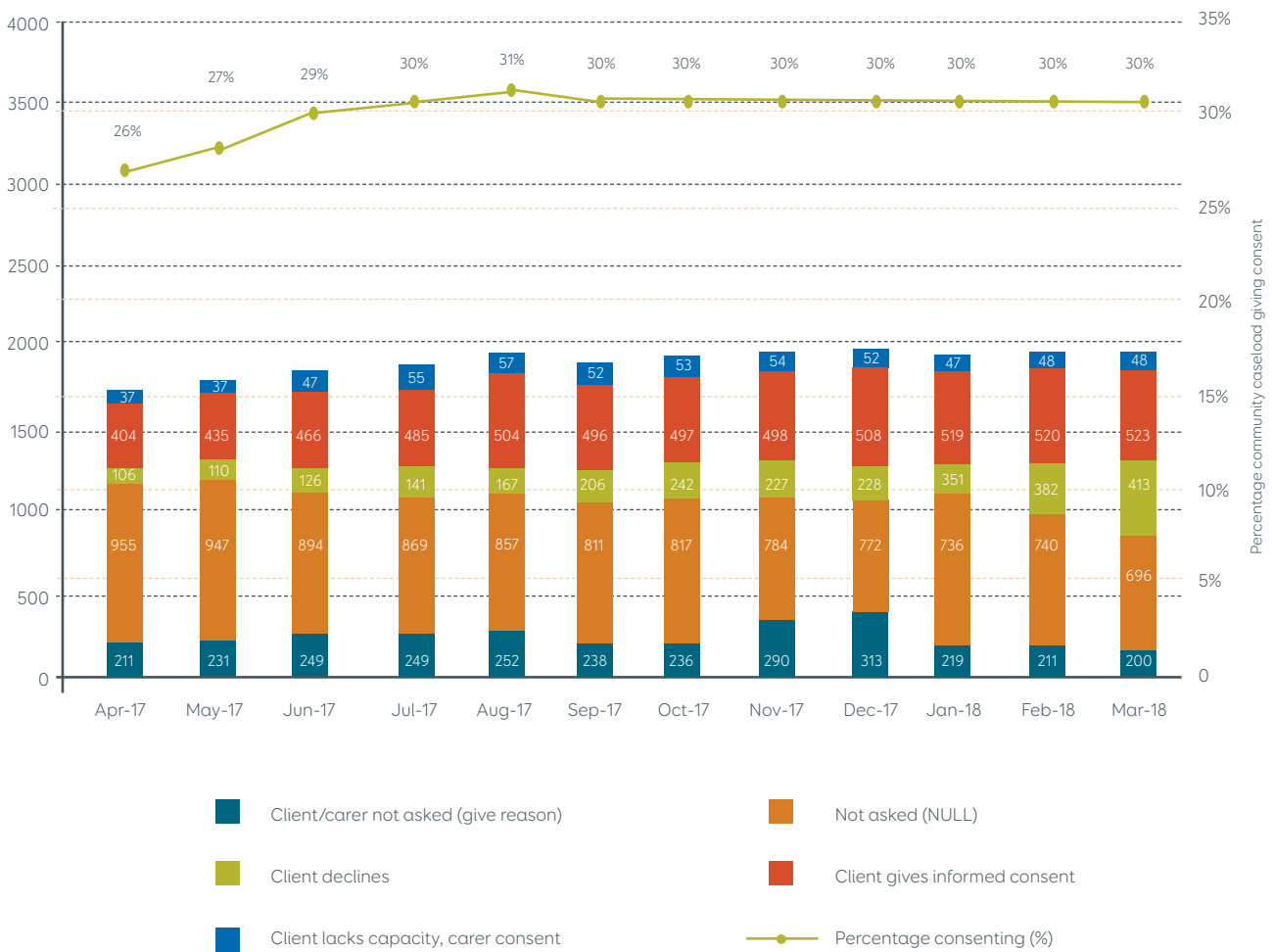
KPI 3c: Six monthly reviews

We are pleased to show that almost all clients receive a contact (which can be a telephone review, or formal face-to-face appointment) at least once every six months. Even as our caseload grows, we are keeping in touch with the people we support.



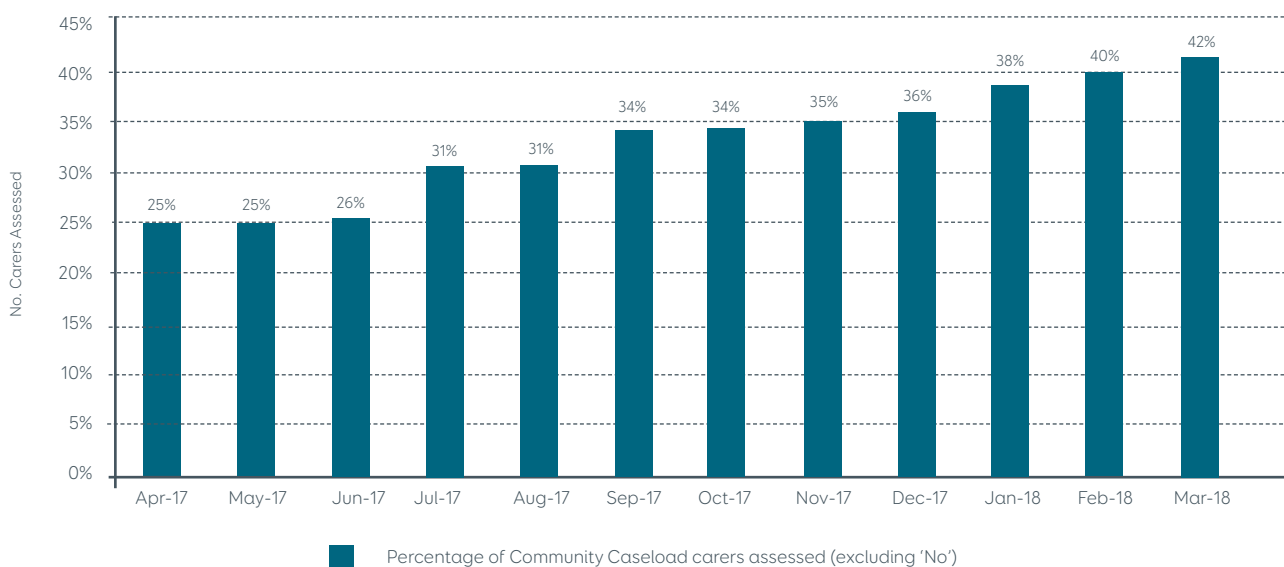
KPI 4: Research engagement

We are committed to supporting people to access research opportunities and have been actively contacting clients and asking if they would consent to be contacted if and when research studies come along that they may be eligible for. Over 30% of our caseload now actively consent to be engaged with research.



KPI 5: Carer assessments

We offer a full Carers 'Trusted Assessment' which is now used by Bristol City Council's Integrated Carers Team who provide support plans/carer breaks. This has streamlined the process for carers now that this one assessment can then be used by the Council to allocate resources, which could be a break or piece of equipment.



We were set a target this year for 40% of carers receiving an assessment, and we are happy to report that we exceeded this, thanks to the efforts of our dedicated dementia navigators for carers.

By the end of March 2018, we completed 128 Trusted Assessments and as a result 104 support plans were created to the total value of £27,750.

“ We are now a
research active service....

Over **30%** of our caseload
now actively consent to be
approached with research
opportunities ”

Looking back

Last year, we identified some priorities for the service which we will review here.

1 Research focus

What we said we would do:

- Ensure people with dementia in the service are given information on accessing research opportunities and recording their consent to be approached to be involved in research
- Increase the number and range of studies involving DWS, working in partnership with local hospital trusts, universities and the Clinical Research Network (CRN)
- Develop the capacity to open and recruit to research projects
- Increase the profile of our service through research, promoting the benefits to staff, people who use our services and other partners

What we did:

We are committed to the benefits of research, including the potential to improve one's own condition, wellbeing or quality of life, the possibility of helping other people with dementia in the future or the ability to access treatments which may not be widely available.

We are now a research active service and have engaged with a number of research opportunities including studies looking at genetic markers relating to Alzheimer's disease (AD Genetics), evaluation of crisis teams (AQUEDUCT) and an evaluation of referral outcomes for Black and Minority Ethnic (BME) clients. Over 30% of our caseload now actively consent to be approached with research opportunities.

We have assisted North Bristol Trust (NBT) with recruitment for clinical drug trials; RADAR & ENGAGE, and supported people to be involved in these studies.

Researchers are now aware that we are willing to engage and we have now established relationships with academics at University of Bristol, University of the West of England and University of Exeter, along with the North Bristol NHS Trust (NBT) research group and the West of England CRN.

We continue to promote the benefits of research across the service, and held a service-wide staff development day with a research focus.



“ We have seconded **3** practitioners to support local hospital trusts... ”

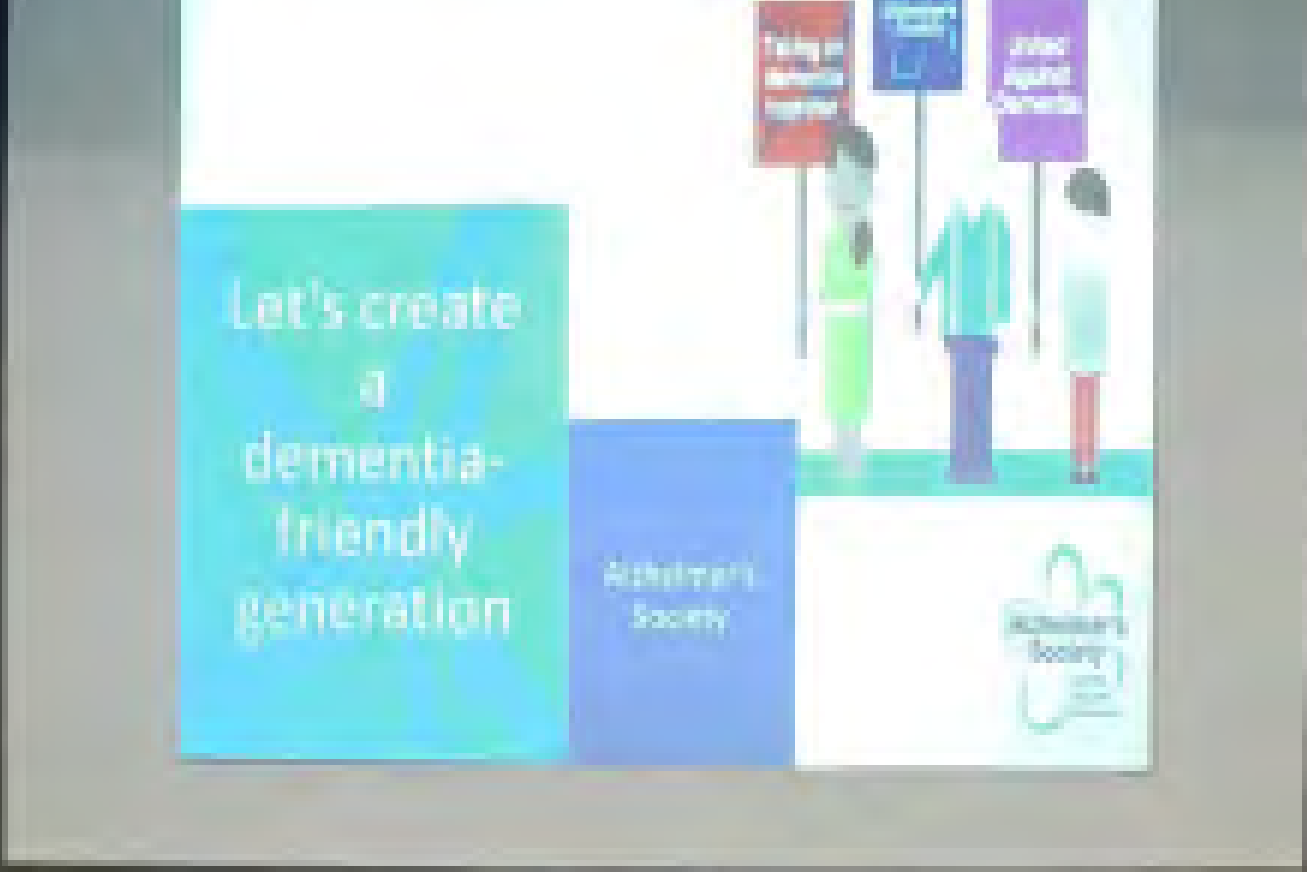
2 Acute Interface (CQUIN)

What we said we would do:

As part of our ongoing CQUIN (Commissioning for Quality and Innovation), we will focus will focus on empowering hospital staff across North Bristol Trust (NBT) and United Hospitals Bristol (UHB) by sharing our skills and knowledge of dementia in a way that enhances what they already do and know. We want to support 'proactive and safe discharge' with the goal of enabling patients to get back to their usual place of residence in a timely and safe way.

What we did:

We have seconded three practitioners to support local hospital trusts in supporting people with dementia in hospital and improving proactive and safe discharge, enabling patients to return to their usual place of residence in a safe and timely way. Working alongside hospital trust colleagues, we have developed an action plan which we will deliver over the coming year.



3 Community Engagement

What we said we would do:

We will recruit to two vacant community development coordinators and in addition recruit a new post which will focus on providing education and dementia awareness in schools, colleges and other youth groups.

We will form a subgroup to review the recommendations of both the BME Research Report and internal Somali research and ensuring that the service, alongside the wider health network in Bristol, is responsive to these needs.

What we did:

It is important to us that our service is accessible to all. In addition to the 3 community development coordinators already in post we now have a coordinator with an education focus. This is an exciting new opportunity and they have been delivering dementia awareness and education in our local primary and secondary schools, with many children now making pledges as new 'dementia friends'.

We also launched short films about dementia in six local languages, addressing stigma and misconceptions about dementia, key prevention messages, how diagnosis is made and what support is available, including information about our service. These films are available on our website and have been well-received locally and nationally, and have opened conversations with local communities for further engagement.

A gaps analysis investigating the accessibility and inclusivity of the service for LGBT+ people was undertaken, and has informed a programme of service-wide staff development activities. We have also continued raising dementia awareness in local BME communities, running a post-diagnostic education event for Somali service users and carers to address their needs in accessing important support and advice.

4 Sharing best practice

What we said we would do:

One of our ambitions is to be recognised as a centre of excellence for dementia care, and we are proud of the experience, professionalism and enthusiasm for ongoing development of our knowledge and skills. With this in mind, we are keen to build on our existing professional relationships with partners, and open up training and development opportunities to others.

What we did:

- We held a conference in May 2017 to promote our innovative approach to residential homes across Bristol, inviting a range of providers, staff and stakeholders.
- We have invited partners to our service-wide development days, where appropriate
- We support the development and delivery of annual GP Education Days, engaging Bristol GPs in the delivery of best dementia practice in primary care.

5 Care Homes

What we said we would do:

We will establish a revised Care Home Liaison pathway, encompassing our ongoing support to residential homes following this year's CQUIN. We will establish a set of resources for staff to support homes and providers, offering a range of interventions that are responsive to the unique needs of each home.

What we did:

We continue to work proactively within Care Homes to support the home with their residents, building on their advance knowledge to prevent further deterioration. Following our CQUIN last year, a 'whole home' approach has been expanded to all residential homes in Bristol and is currently being rolled out. A conference was held to promote networking between homes and aid learning and development.

6 Post diagnostic support

What we said we would do:

We will be reviewing the service's approach to post diagnostic support, including the delivery of groups and information for service users and carers after a diagnosis. This will include trialling a post diagnostic event on a Saturday alongside the Carers Support Centre and considering the needs of people from BME communities in accessing this important support and advice.

What we did:

We have reviewed our offer of post diagnostic education and have run a number of education days for people affected by dementia across the city in accessible venues including Bristol Rovers FC and Bristol South Indoor Bowls. We also ran a Saturday event alongside Carers Support Centre as planned, enabling carers who work during the week to access this level of support. These sessions provide much needed advice and guidance for people, especially those processing a recent diagnosis.

7 Diagnosis rates

What we said we would do:

We will continue to work alongside our commissioner to further improve the local diagnosis rate, including a review of diagnoses in formal care settings.

What we did:

We maintained and exceeded the national target of 67% and at the end of March 2018, the diagnosis rate across Bristol was 75%.

“ We have continued to
support our partners
in delivering local interventions, including the successful
Woodland Wellbeing sessions ”

Service Development

We have continued to support our partners in delivering local interventions, including the successful Woodland Wellbeing sessions via Forest of Avon Trust who have now added intergenerational days to their programme, inviting family members and grandchildren along to spend time with their loved ones in an engaging woodland setting.

We are also supporting Age UK Bristol to deliver its Education and Advice service which is vital in supporting people affected by dementia in negotiating the complexities of legal and financial forms, including claiming benefits and arranging Lasting Power of Attorney directives.

“ We are proud to report that our
Friends & Family Test
return rate has more than **97%**
doubled in the last year.
of these responses have been positive about
the service they received ”



How have people experienced our service?

It is important to us that we continue to listen to the people who use our service, gather information about their experiences and identify ways we can develop the service to meet their needs.

We are supported by carers who attend the Bristol Mental Health Service User and Carer Council, and who provide feedback on the service and in turn share service user and carer concerns with the service at monthly commissioner meetings. Our carer reps have been busy advocates including lobbying for blue badges for people affected by dementia, engaging with a national blue badge consultation, as well as lobbying local commissioners over access to Continuing Health Care (CHC) funding.

Patient Advice & Liaison Service (PALS)

As part of our Dementia Pack, we provide a PALS leaflet for feedback, compliments and complaints.



We had **69 compliments** via PALS between April 2017 and March 2018.



In 2017/18 we received **2 negative comments**. We investigated and responded to both and neither resulted in a formal complaint.

Friends & Family

The Friends & Family Test gives quick feedback about the services we provide and helps us to make changes quickly where needed. The test measures both the rate of return and the satisfaction score achieved. We are proud to report that our return rate has more than doubled in the last year to 290 responses and we have maintained a positive response rate at 97% saying they would be 'extremely likely' or 'likely' to recommend our service to friends or family members.

Friends & Family Quotes

“ I like when you tell your name, they immediately recall [who you are]. This quality of staff is really admirable. This gives a sense of belongingness, that we are not just another number on a register but a living person.

.....
person with dementia

”

“ The team were so understanding and made me feel I was not alone with the problem. They have taken a stressed situation and made it into a situation I could cope better with, by being more positive and I thank them for that.

.....
person with dementia

”

“ The Dementia Navigators are brilliant. Office staff always helpful - a mine of information and so understanding. I cannot fault the service, thank you.

.....
carer

”

“ Being the carer for a loved one, in this case my husband, can be very lonely and isolating. Having the Bristol Dementia Wellbeing Service in my corner, and knowing I can call for any support I might need is incredibly important. I will always be immensely grateful.

.....
carer

”

“ Being officially diagnosed with Alzheimer’s Disease is a traumatic event. However [navigator] visit was a most pleasant and encouraging event. Her Wellbeing Plan is a most professional document which sets out my present situation as a base for action and future assessments. Thank you.

.....
person with dementia

”

“ Service personnel are caring, friendly and helpful. Good advice and suggestions. Visits not too frequent but available if more required. Best of all, staff are understanding and not overbearing or intrusive.

.....
carer

”

“ People often say that in difficult times it’s about finding the angels in the services available. [Navigator] has been one of those angels from Dementia Wellbeing Service.

.....
 person with dementia

”

“ The support has shown to be thorough with the highest quality of care and patience and compassion to the needs of my partner. As a full time carer, I enjoy my new role in caring for her diet...you have done wonders with her, she is happier than she’s ever been and so am I.

.....
 carer

”

“ As a nurse at [Care Home], I find the team valuable, knowledgeable, appropriate in their actions. Responsive to any requests and are always willing to explore concerns. A lovely team and a pleasure to work alongside.

.....
 Care Home Nurse

”

“ I am an Admiral Nurse working from a Nursing Home in Bristol. The relationship we have with the Dementia Wellbeing team over the last 3 years has been essential, supportive and proactive, willing to learn from mistakes. Thank you.

.....
 Admiral Nurse

”

“ I am a specialist dementia nurse working in a nursing home with people with dementia and complex needs. The Dementia Wellbeing team are very supportive and react in a positive way to requests for support for our residents and relatives. They also do quick medication reviews and supervision, training and assessments of environments. The nursing home environment and our residents and relatives and the staff would not be as safe if we did not have their support.

.....
 Care Home Specialist Dementia Nurse

”

“ I find this service very helpful, it’s lovely to be treated as a person not a number. There is always a sympathetic ear and solution to one’s problems and we always feel relaxed talking to the team. Where there has been anxiety, your team of carers have instilled calm in our lives. Thank you for being there.

.....
 person with dementia

”



“ In the last year we
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300 hours
of Befriending ”

Befriending

In the last year we have delivered over 300 hours of Befriending. Due to changes in staffing we have not had a consistent Befriending Manager in post but in the next year, the Befriending Service will transition to Alzheimer's Society's new one-to-one service, Side by Side. This is a more flexible service that enables people with dementia to be supported within their community to access activities that they enjoy or try new ones, and our new Side by Side Coordinator has been appointed.

Irene and I baked 18 chocolate cupcakes. The original plan was to bake an orange cake but there weren't any oranges in the house and her daughter hadn't left the family recipe so we just went for the simple cupcakes. The cakes weren't the best but we had loads of fun chatting about the places Irene had been and about her family. We are planning on making mince pies next week as Irene is known as the "Queen of Mince Pies"

Befriender Report [names changed]

Other Services provided by Alzheimer's Society as part of the Dementia Wellbeing Service:

We continue to fund memory cafes across the city, where people can get information about dementia in an informal café style environment. In two of the memory cafés, Dementia Navigators are also on hand to provide any further information that people require.

Activity groups are also available where people can participate in activities such as playing skittles or attending a monthly tea dance. The monthly reminiscence group is being reformed to best suit the needs of people with dementia, which opened in Fishponds in April 2018.

How have we supported the development of the service?

Professional and Personal Development

We encourage all staff to identify and access development opportunities including formal training and keeping up-to-date on best practice through conferences.

Service-wide Development Days

We run three service-wide development days for staff each year as an opportunity for the service to come together and share best practice. Each day has a clear focus and are developed and led by staff. Over the last year, these days have covered:

- Dementia research
- Assessing well (for practitioners) / Meaningful activity (for navigators)
- Post Diagnostic Support and Bristol Wellbeing Therapies
- “Making A Difference” - a carer’s perspective
- Clear communications and Accessible Information Standards / Autism Awareness
- Dying Well with dementia, including “Loss and Adjustment” from The Harbour, St Peter’s Hospice and a short play “Don’t Leave Me Now”.

Training

Over 97% of core training requirements for DPT-employed staff within the service have been completed.

(as at March 2018)

Lunchtime Seminars

Supporting ongoing awareness and partnership with other providers and organisations, we host monthly lunchtime seminars for staff within the service. These can be on almost any topic affecting our service, and is often responsive to requests from staff. Some of the sessions in the last year have included:

- Driving assessments
- Mindfulness for staff
- Nutrition and dementia
- My Life Films presentation
- Mindful photography
- Huntington's Disease

Our staff (as at end of March 2018)

| Our Staff | Male | Female | TOTAL |
|-------------------------------------|-----------|-----------|-----------|
| Dementia practitioner | 5 | 27 | 32 |
| Dementia navigator | 2 | 25 | 27 |
| Senior managers & clinical managers | 2 | 9 | 11 |
| Practice leads | 1 | 1 | 2 |
| Consultant psychiatrist | 0 | 1 | 1 |
| Clinicians/doctors (inc. locum) | 0 | 4 | 4 |
| Group activity support manager | 0 | 1 | 1 |
| Community development coordinators | 0 | 4 | 4 |
| Clinical psychologist | 1 | 0 | 1 |
| Assistant psychologist | 0 | 1 | 1 |
| Administration | 3 | 6 | 9 |
| Assistant research practitioner | 1 | 0 | 3 |
| TOTAL | 15 | 79 | 94 |

Looking forward

Last year, we set out a number of priorities for the service which we will review here.

Priorities for 2018/19

1. CQUIN - Acute Interface

Over the coming year we will implement the Acute Interface Action Plan, based on the following 3 workstreams:

- 1. Engagement within the service** – the CQUIN Team to support colleagues within the service to develop tools and processes to promote more effective liaison with acute colleagues. This will include a practitioner toolkit and coaching sessions.
- 2. Engagement and collaboration with NBT** – the CQUIN Team will engage with colleagues at Southmead Hospital, promoting use of the service's Access Point. They will work closely with their hospital colleagues to simplify the referral process for staff.
- 3. Engagement and collaboration with UHBT** - the CQUIN Team will engage with colleagues at BRI and South Bristol Hospital. The team will regularly attend multi-disciplinary meetings within the hospital and promote use of the service's Access Point. The team will work with two wards to properly understand how best to use our resource on the ward in the most effective way.

2. Interim Service Evaluation

In December 2018 we hope to publish our interim service evaluation, reflecting on how the service is having an impact on people's lives, looking at the roles of staff in the service and how the service interfaces with GP practices and other agencies.

3. Memory Clinic

Since the service started, we have operated our Memory Clinic from Southmead Hospital's Brain Centre every Friday. We know that people prefer greater flexibility in appointments and we have an opportunity to deliver the Memory Clinic in-house at our Brookland Hall site.

4. Research

Over the coming year, we will continue our engagement with projects already running, and are hopeful to meet and exceed our targets for AD Genetics. We hope to be involved in the IDEAL2 study which is a longitudinal study looking at wellbeing for people with dementia – an ideal fit for our service.

We are also looking to validate and review culturally-appropriate cognitive assessment tools and we will continue working with UWE in their exploration of diagnosis and care pathways for people from minority communities.

We aim to maintain and build on our relationships with organisations conducting dementia research and expect to generate further interest in our service. We hope this will create more opportunities for people with dementia in Bristol to engage with research.

5. STP

We will continue to be an active participant in the development of the local sustainability and transformation partnership (STP) whose local priorities include prevention and early intervention, integrated care and effective planned care.

Where can I find out more?

- 1 : The Dementia Wellbeing Service has a website where you can find out more about what we do at:
: www.bristoldementiawellbeing.org
- 2 : **Bristol Mental Health**
: **Visit: www.bristolmentalhealth.org**
- 3 : **Devon Partnership NHS Trust**
: **Visit: www.dpt.nhs.uk**
- 4 : **Alzheimer's Society**
: **Visit: www.alzheimers.org.uk**

However, if you need any advice on referral or have any general enquiries about the Dementia Wellbeing Service you can use our Access Point number.

You can contact the **Access Point** line on: **0117 904 5151**



You can find out more about the Dementia Wellbeing Service on our website:

www.bristoldementiawellbeing.org