



Dementia in Scotland



Inside - What Alzheimer Scotland membership means for our Convener



Self-directed support to be rolled out across Scotland



Allied Health Professionals – supporting people living with dementia across Scotland



Café culture in West Lothian

Chief Executive's **comment**



In April this year, the Scottish Government's new national commitment of a minimum of one year's post diagnostic support for every person diagnosed with dementia will come into being. We have been campaigning for better post diagnostic support for many years and we have been working very closely with the Scottish Government and other partners to develop this important target.

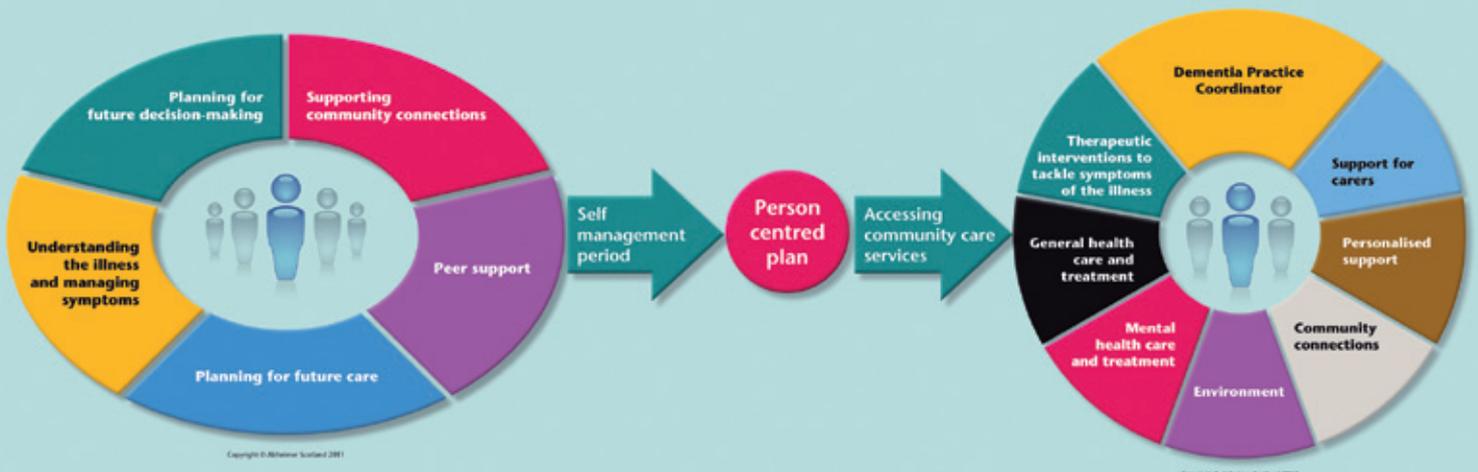
Central to the guarantee is that the support will be provided by a

named Link Worker, who will be using Alzheimer Scotland's Five Pillars model of post-diagnostic support as a method for ensuring that each person is enabled to live as well as possible with dementia and supported to prepare for their future. We spent a considerable time working with people with dementia and their families to develop this approach. Finding out what worked and what didn't work was essential to ensure good post-diagnostic support. The model does not attempt to fit people into a process but offers five key areas that, during the year, the Link Worker will support each person to consider, participate in or plan for. It is entirely person-centred and based around each individual and, crucially, is not driven by doing things quickly but taking time to work through each area when that person is ready.

A key element of this work will be the development of a person-centred plan. If people are supported in this way and end the year with a plan in place, we can expect that many people (although of course not everyone), will be

able to live for period of time after diagnosis in control of their own life, maintaining their existing networks and interests and self-managing their support.

However, as we all know only too well, each person's needs will change, and after a time they are likely to start to need care and support. Often, problems ensuring the right support sadly lead to too many crisis situations and problems. That is why, after considerable consideration and research, we identified an 8 Pillar Model to set out a co-ordinated approach to bringing together the support each person needs as they begin to require assistance from community care services. Central to this model is the concept of a Dementia Practice Co-ordinator, a role we believe will help bring together the strengths of the various health, social work, community and natural supports. We are pleased that this has been very well received and that, in partnership with COSLA and the Scottish Government, we will soon begin piloting and testing this approach with local partners.



This is how we see the two models linking together and how we hope to achieve a seamless and person-centred approach to support each person with dementia and their family. This should provide each person with the right help, at the right time and in the right way. I look forward to letting you know how this work evolves.

Henry Simmons, Chief Executive, Alzheimer Scotland

Stirling & Clackmannanshire services spread the word on Facebook and Twitter



Last July, Kerry MacPhee took up the post of Dementia Advisor for Stirling & Clackmannanshire. One of her new initiatives has been to publicise the work Alzheimer Scotland is doing locally via Facebook and Twitter. Kerry explains:

“We don’t currently have local websites for different parts of Scotland and I wanted to highlight the work we are doing in the area. Creating a platform for what’s going on locally means we can

publicise events more easily, so it seemed the obvious thing to do, particularly given the growing popularity of social networks.

“There is a lot going on in Stirling & Clackmannanshire, including reminiscence groups, walking groups, dementia cafes and peer support groups. I thought it was important to have a place online where local people can find out about these different activities.

“First of all I focused on making sure that other local organisations knew about what we were doing. We have linked up with various groups and also built links with some. For instance Generations Working Together have invited us to a regional meeting, which was

set up via a Facebook invitation. Twitter tends to be widely used by healthcare professionals and politicians, so it’s a good way of highlighting our work to them. The main aim is to flag up what’s going on in the area and also offer light-touch support. The message is ‘Feel free to come along’ or ‘Get in touch if you’d like to find out more’.

“Carers of people with dementia are contacting us through Facebook, and although we have only got about 20 ‘likes’ so far we are working on getting more exposure. We have received comments from carers like ‘That was a great group that day’. It’s small steps so far, but we are getting there!”

Boost for North Aberdeenshire Services



Graham and Mark at Uhuru Peak (5,895 metres).

Brothers Graham and Mark Robertson recently raised an incredible £12,184 for Alzheimer Scotland, smashing their original target of £4,000. They organised various fundraisers including playing golf at night and a bag pack, but the most impressive was climbing Kilimanjaro. Mark and Graham raised the money in memory of their mum Sheila, who had Alzheimer’s disease and attended North Aberdeenshire’s integrated group at Dawson Court.

They were keen for the funds to go towards local services and help fund future work such as a choir that we hope to start this year. We are really grateful for their donation and would like to thank them for the tremendous effort they went to.

Donations to services in Midlothian

Alzheimer Scotland’s services in Midlothian have benefited from several generous donations over the last few months:

- a number of retiral collections have been organised in memory of loved ones
- the Eastern District Grand Chapter of the Eastern Star donated £2,190 raised at various local events
- the ladies section of Newbattle Golf Club presented us with a cheque for £700
- £1,028.24 was raised by May Murdoch, one of our support workers, who arranged events such as a race night, Christmas fair and an auction at the D-café.



Sheelagh Richardson, Captain of Newbattle Golf Club, presenting a cheque to attendees of the D-café.

These are just some of the donations received and we would like to thank everyone who supports our service.

New Dementia Resource Centre for Lanarkshire



Alzheimer Scotland staff in Lanarkshire received the keys to their new Dementia Resource Centre on 26 November last year. The centre is located at 64 Dalziel Street in Motherwell and will open in stages, with an official launch planned for the coming weeks. Arlene Crockett, Locality Manager,

said: "We are looking forward to meeting and greeting people with dementia and their carers in our new home. An open invitation is extended to pop in when you can. We would be delighted to give you a tour!

"We have had fantastic support from carers, service users and colleagues from health and social work, all of whom have helped raise funds for the centre. We hope to continue actively fundraising over the coming year.

"I would like to say a big thank you to all of the staff in Lanarkshire for their support over the last few months in getting this project off the ground, and in particular to John McLean and David Simms

for making our vision a reality and getting us in on time!"

The centre has its own training room, knowledge area and quiet room for visitors. It will be the central hub for information and support in Lanarkshire, with almost all local services managed from the centre.

Firewalk fundraiser

On 4 November staff from Alzheimer Scotland, NHS Lanarkshire and North Lanarkshire Council completed a sponsored firewalk to raise funds for the resource centre. The team of six walked 20 feet over red-hot embers and raised an incredible £1,500 for the new centre.

Alzheimer Scotland staff take on the Rob Roy Challenge 2013



James McStay, Andy Crabb, Lee Simmonds, Eirlys Williams

Now in its eighth year, The Martin Currie Rob Roy Challenge is one of Scotland's most successful charity fundraising events. Through a gruelling combination of cycling, walking or running, this year's participants will cover 55 miles of the spectacular Rob Roy Way to raise money and awareness for selected charity partners.

2013 marks Alzheimer Scotland's third and final year as one of the three charity beneficiaries for the event. To make the most of this final fundraising opportunity, a six strong Alzheimer Scotland 'Staff Super Team' will be taking part in



the 2013 challenge on Saturday 22 June.

The team have already started their training plans and are looking forward to getting fit and active for Alzheimer Scotland. Eirlys Williams, Membership Administrator, commented: "I've started by extending my daily walks with my Dobermans and purposely seeking out hills and dirt tracks in all weathers. I'm enjoying it and can't wait to get on my bike when the daylight hours increase!"



Mark Beaumont

Fellow team member James McStay, Dementia Advisor for South Lanarkshire, is taking on the challenge for both personal and professional reasons: "I wish to continue to raise the awareness of the work of Alzheimer Scotland, but also prove to myself that I can still complete a challenge of this nature!"

The 2013 Rob Roy Challenge will have the support of accomplished adventurer, broadcaster and world record-breaking cyclist, Mark Beaumont who is championing the event for the second year: "I absolutely loved my first Rob Roy Challenge and I am delighted to be supporting it again in 2013. It is a tough challenge but it is also very achievable for a wide range of people. Plus, it is all in the name of three outstanding charities!"

We would like to wish the Alzheimer Scotland staff team and all of our 2013 participants the best of luck as they start their training and fundraising – we will be supporting them every step of the way.

If you want to challenge yourself to make a difference this summer, you can sign up for the event at www.robroychallenge.com.



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Dear Members, Staff, Supporters, Volunteers and friends,

I write on behalf of Alzheimer Scotland's Council to share the expressions of appreciation and satisfaction voiced at the final Council meeting of last year. Great progress is being made by the organisation and the Council wish to record our appreciation.

There is no doubt that this last year or so has been exceptional. Significant progress has been made toward our objective of improving the welfare of people with dementia and their carers.

The Scottish Government committed to jointly fund our Alzheimer Scotland Nurse Initiative and last year we realised our aim to have an Alzheimer Scotland Nurse in every NHS Board.

We were instrumental in the development of the Scottish Government's world first commitment to a one-year minimum Post Diagnostic Guarantee.

We completed our Dementia Advisor programme, developed our Dementia Resource Centres, contributed to the Scottish Government's Dementia Demonstrator Sites, and had our 5 Pillars of Post-diagnostic Support model implemented in the Scottish Government's Dementia Strategy; and the list goes on. All of this was achieved whilst continuing to support thousands of people with dementia through our services and our Dementia Helpline.

In recognition of our achievements we were awarded the prestigious SCVO Charity of the Year.

This level of achievement continues. We have seen our new 8 pillar Integrated Community Support model incorporated into the Scottish Government's public participation process for the next stage of their Dementia Strategy.

None of this could have been achieved without the efforts of our staff, members, volunteers, supporters and friends who do so much individually and through our services, branches and Dementia Resource Centres. Their work, and their efforts to make the public aware of what we do and to raise funds for it, are invaluable. It is a privilege to be your Convener at this time and to have this opportunity to thank you all personally.

The Council hope that the exceptional progress made last year can continue to be built on and be consolidated into further tangible benefits for all people with dementia and their carers throughout Scotland in the coming year.

I trust you will continue to support Alzheimer Scotland in the future and enable us to strive for ever more exceptional achievements.

With kind regards,

John Laurie,
Convener



What being a member of Alzheimer Scotland means for me



John Laurie became a member of Alzheimer Scotland in 2000 after his wife Avril was diagnosed with early onset dementia. The following year he started volunteering before going on to join Alzheimer Scotland's governing Council in 2004. In 2011 he became Convener of Council. Here John describes what being a member of Alzheimer Scotland has meant for him, and the community of support that helped him, his wife and family cope with the impact of dementia.

"I was in my late 50s when my wife Avril was diagnosed with early-onset dementia. She was only 52. At the time I had never heard of Alzheimer Scotland and didn't even know what dementia was. The diagnosis came after a long period of knowing that Avril wasn't well but not being able to find out what was the matter. When we finally got the diagnosis I said to the consultant 'Now we know what it is we can start treating it', to which he replied 'There is no treatment'. This came as a huge shock to us both.

"The district psychiatrist in Midlothian suggested that I got in touch with Alzheimer Scotland and that opened the door to getting the help and support we needed. We were incredibly lucky because we were able to access the Lothian Early Onset Support Service (LEOSS). At the time there were very few early onset support services in Scotland.

"Before we made contact with Alzheimer Scotland we had a bad experience of support for Avril. A local social worker arranged for her to go to the day centre in Penicuik. The first time there was virtually no

one there, although Avril enjoyed talking to the women who worked there. The second time it was busy but the average age of the group was 89. There was no-one she had any connection with at all: they were very elderly ladies sitting in chairs with very few activities available for them to do, so that didn't work.

"LEOSS sent two of their team to see us and making contact with them was a godsend. They were younger and understood the illness and how it affects younger women. LEOSS run a day service, and Avril was collected by car and taken to the service where she also had lunch. The group always went out somewhere so it was a very stimulating experience.

"During these early months we were still learning about dementia, and the publications that Alzheimer Scotland gave us when I first got in touch were just phenomenal. The library of publications they had and the range of information was just remarkable, and even today I'm still surprised by it. They are an incredibly valuable resource for people who receive a diagnosis and often know very little about what dementia is.

"We were very fortunate because the local authority also paid for Avril to spend two three-hour sessions each week with someone from LEOSS. Three different women looked after her during this time and they were all excellent. They were relatively young, had their own transport and were able to take her out shopping, which is what she wanted to do. This went on for about five years and latterly when she got to stage of having to use a wheelchair she had possibly the biggest collection of earrings you had ever seen in your life! You can buy lots of sparkly things in

charity shops for not very much money, and for Avril being able to get out of the house and go and do some shopping twice a week was exactly what she needed.

“At the time Alzheimer Scotland was running a campaign called ‘Seize the day’ and I distinctly remember the person in charge of LEOSS saying ‘Never mind the day, seize the moment’, and I have always felt this was so true. There are many moments when a person with dementia is really happy and enjoying life. These don’t have to last for the whole day and this idea of seizing the moment is really valuable.

“As I got to know more about Alzheimer Scotland I read in their magazine that they were looking for people to be on their committees, and that’s how I first became involved as a volunteer. The staff at LEOSS suggested that I came and helped with their day service, but because of my professional background I felt more comfortable contributing through my management experience. After volunteering with Alzheimer Scotland for several years I became a council member.

“Everyone on the council has been elected by Alzheimer Scotland’s membership, and it’s our job to ensure the organisation fulfils its objectives and obligations as a registered charity. As a group we are individually and collectively responsible for overseeing everything the charity does. One of the convener’s jobs is to try and ensure that the skills mix of the council is appropriate for the running of the charity. For example, we need some members with knowledge and experience of dementia and others with expertise in areas such as finance. Another very important aspect is trying to look forward on behalf of the organisation and be clear where it is heading over the coming years. This is part of making sure that we provide the services that people with dementia and their carers need.

“I joined Alzheimer Scotland because of my personal experience of dementia, and have really benefited from the support and advice that I have received. However, it’s important to stress that we help anyone affected by dementia who contacts us, and membership is entirely optional. For me being a member and volunteer has been a very positive experience and has enabled me to make a personal contribution to Alzheimer Scotland’s invaluable work.

“Our membership is absolutely critical to what we do and there is no doubt that the support we receive – both in terms of volunteering and donations – comes very largely from people who have been touched by the illness. We have successfully got our message to national and local politicians, as well as people with dementia and their carers. However, we know that many members of the public still find it difficult to understand what we do. The challenge now is to spread awareness and raise support beyond the families and relatives of people directly affected by dementia and thereby benefit all those affected.

“We are working hard to achieve more far-reaching change, for instance by promoting dementia-friendly communities. This is because people with dementia don’t live in a vacuum but are part of all communities. We need to persuade the general public that communities should be more dementia-friendly: that’s people who have never been touched by dementia and don’t really know what it’s about.

“Before Avril was diagnosed I knew nothing about dementia and what it involved. Fortunately there is now much more information in the media, and as a society we are becoming more aware. But there are lots of people who would benefit from understanding a bit about the illness and knowing where they can go for help. It

would probably have taken less time for Avril to be diagnosed if we had been aware of dementia – including early-onset dementia – before we started making contact with doctors and psychiatrists.



“The experience of being diagnosed with dementia or caring for a person with dementia is unique for each individual. There is no ‘normal’ response, and everyone I have met has needed help and support to come to terms with the illness and carry on living in the situation they find themselves in.

“I would warmly encourage anyone who has an interest in dementia to join Alzheimer Scotland.

“Membership can involve as little or as much as you want – from simply being kept up to date about news and developments, to a hands-on role as a volunteer. And of course if you would like to volunteer but don’t want to be a member your support is very welcome too! My personal experience of Alzheimer Scotland has been very rewarding. I’m sure that there are many other people who, like me 12 years ago, could benefit enormously from the advice, information and support we can offer.”

Dementia Dialogue events: shaping the new Dementia Strategy

Research study: the pre-diagnosis experience of carers

Are you the spouse or partner of a person with dementia? Would you like the opportunity to share your experience of the journey towards diagnosis?

The purpose of this research study is to seek to understand the wide range of factors involved in recognising, acknowledging and addressing the symptoms of dementia. Through listening to individual experiences, it is hoped the outcome of the study will provide an insight into the decision-making process involved in the lead-up to seeking the advice of a health professional.

If you are interested in sharing your experience or would like more information on the study, please contact Lindsay Kinnaird.

Email: lkinnaird@alzscot.org
Telephone: 0131 243 1453



Scotland's second National Dementia Strategy is due to be published later this year, and over the winter a series of events were held to gather opinions on what this should include. The seven Dementia Dialogue events took place at locations across Scotland and were open to anyone with an interest in contributing their views. They were organised by Alzheimer Scotland and the Scottish Government, with input from the Scottish Dementia Working Group and the National Dementia Carers Action Network.

The penultimate event took place in Paisley on 10 January and began with a brief introduction by each of the four organisations leading the dialogues. Jim Pearson, Alzheimer Scotland's Deputy Director - Policy, explained that the workshop would look at how the current strategy was progressing while identifying gaps that needed to be filled. The opinions gathered would be fed back to the Scottish Government and incorporated into the new strategy.

Penny Curtis, Head of the Mental Health Unit at the Scottish Government, gave an overview of the progress that had already been made in delivering the main goals of the current strategy: improving post-diagnostic support and ensuring that people with dementia have a better experience of care in acute hospitals. She then summarised the broad themes that had emerged from the dialogue events to date (shown on page 9).

Lorna Walker of the National Dementia Carers Action Network spoke about her optimism that care for people with dementia will continue to improve, but added that 'we need to educate the educated'. She described the conditions for effective change as requiring the 'right people doing the right things at the right time'. Lorna spoke about her personal experiences of being a carer and used a range of props to give a very engaging presentation.

Irene Oldfather, Programme Director of the Life Changes Trust,

talked about the launch of the Trust which will be accepting grant applications from April. For full information about the remit of the Trust and who can apply for grants, see below. Henry Rankin, Chair of the Scottish Dementia Working Group, then spoke about the role of the SDWG and the value of events like the Dementia Dialogues in enabling people with dementia and their carers to have their voices heard and contribute to the development of the new National Dementia Strategy.

Following the presentations, groups of participants discussed a series of questions, with a facilitator chairing each group and a scribe writing down their responses. Those present included people with dementia and their carers, community psychiatric nurses, social workers and many others. The debates were wide-ranging and the responses are currently being analysed and distilled down into a series of goals for the new strategy. A snapshot of comments made by health and social care professionals at the Paisley event are included opposite:

'The main barrier is finding appropriate placements for people'

'We're not as person-centred as we think we are – we're more service-led.'

'GPs need a better understanding of the role of social services. They don't appreciate that we have to involve them if there is a suspicion that someone's medical condition has changed.'

'There's a need to move beyond a system that is just based around health and social care. We have made contact with the fire service and the police to help them understand some of the issues around dementia.'

'We won't be able to deliver the one-year post-diagnostic support commitment without help from the third sector, and they will need training to be able to provide this.'

Emerging themes

- Centrality of Promoting Excellence to the success of the dementia strategy going forward
- More strategic local engagement with the Promoting Excellence agenda, to maximise benefits of resources and training available
- More involvement of people with dementia and their families and carers in training and awareness-raising and other areas
- Continued focus on care in hospitals – including staff training, culture, and better, safer environments
- Specific focus on supporting the workforce to deliver the post-diagnostic HEAT target from 2013 – linking to notions such as co-production and enabling asset-based support
- Broad consensus on the value of intensive support in the community – 8 Pillars model
- Importance of creating and nurturing dementia-friendly communities
- Increased accessibility of training and resources to care home staff and other sectors.

£50 million trust to support people with dementia and their carers



A £50 million trust has recently been launched to fund projects that will improve the lives of two groups of people in Scotland. The Life Changes Trust (LCT) aims to transform the lives of young people leaving care, and improve the lives of people with dementia and their carers. It has been set up by the

Big Lottery Fund and will have a 10-year lifespan. Applications for grants open this spring.

Irene Oldfather, Programme Director (Dementia and Carers) for the LCT, introduced the Trust at several recent Dementia Dialogue Events organised by Alzheimer Scotland and the Scottish Government. Speaking in Paisley in January, she described the LCT's aim of improving the physical, emotional, practical and social aspects of people's lives. This is part of a wider goal of enabling people to remain in the community for as long as possible.

Irene described how small projects can often make a big difference to people's lives. She spoke about the Musical Minds dementia choir in Kilmarnock, which has brought people with dementia, their carers

and the wider community together through singing. Projects like this, which don't need a lot of funding to get started, can often have a big impact.

The LCT will consider funding applications for a wide range of projects. There will be a focus on supporting the Scottish Government's one-year post diagnostic support guarantee by investing in peer support and community connection projects to enable people to live well in their local communities. Supporting carers through the care journey will also be a priority.

Big Lottery and its partners, including the Health and Social Care Alliance, expect to hold the official launch of the Trust in the spring. For the latest news visit <http://lifechangestrust.org.uk>.

Allied Health Professionals – supporting people living with dementia across Scotland

Regular readers of Dementia in Scotland will know that we have been striving to have an Alzheimer Scotland Nurse Consultant/Specialist in every Scottish NHS Board, but there is another important group of professionals that we are now actively engaging with - Allied Health Professionals or AHPs. You might not recognise the term but, if we said this includes physiotherapists, dieticians and occupational therapists, that begins to sound a bit more familiar.

Read on to find out more about AHPs, their role in supporting people with dementia and their families, and how AHPs are in turn being supported to provide excellent standards of care by professional clinical leadership at a strategic level.

Allied Health Professionals

This is a collective name for a group of nine professions that includes:

- arts therapists (art, music, drama and dance movement psychotherapy)
- dieticians
- occupational therapists
- orthoptists
- physiotherapists
- podiatrists
- prosthetists and orthotists
- radiographers (diagnostic and therapeutic)
- speech and language therapists.

There are about 10,000 AHPs in Scotland who work mainly in the NHS, with some in private practice (physiotherapy and podiatry), social work (about 500 occupational therapists) and voluntary organisations.

The AHP “family” represents a diverse group of professions who, as members of multidisciplinary, multiagency teams, provide a wide range of interventions and contributions to promote good health and recovery from illness. While each profession has its own

core specialist knowledge and skills, AHPs collectively share many common attributes, including having a person-centred focus and having skills in rehabilitation.

Strategic direction & leadership

In June 2012, the Scottish Government published *The National Delivery Plan for the Allied Health Professions in Scotland, 2012–2015*. In his foreword, Minister for Public Health, Michael Matheson MSP, recognises that AHPs work across all age groups and specialties but says that “our immediate priorities and challenges undoubtedly have to focus on meeting the growing needs of the older population, those with long-term conditions and people with dementia. AHPs can make an immediate impact on the lives of these individuals and ensure resources are used to best effect by preventing unnecessary admissions to hospital or care, enabling people to live at home for longer, and providing alternative pathways to secondary care referral.”

NHS Boards and local authorities are required under the plan to work together to develop local implementation plans. At Scottish Government level, Jacqui Lunday is Chief Health Professions Officer within the Directorate of Nursing, Midwifery and Allied Health Professions. As part of her role, Jacqui will lead annual reviews of the local implementation plans to monitor local progress and to support delivery nationally.

A key commitment in the plan is that AHP directors and AHP leads in local authorities, working in partnership with Alzheimer Scotland, will work to ensure the delivery of early intervention and post-diagnostic support for people with dementia and their families and carers, in line with the national

commitment to a minimum of one year’s post-diagnostic support from a named and trained person.

AHP Consultants in Dementia



Elaine Hunter started in September 2012 as National AHP Consultant based within Alzheimer Scotland. She is on secondment from NHS Lothian and her role is a joint partnership between the Scottish Government (who fund the post) and Alzheimer Scotland, to provide strategic and professional leadership and advice for AHPs across Scotland.

Elaine, whose professional background is in occupational therapy, will also be working closely with the Alzheimer Scotland Dementia Nurse Consultants and the three existing AHP consultants in NHS Lothian (Jenny Reid), Lanarkshire (Sandra Shafii) and Greater Glasgow & Clyde (Christine Steel). Each AHP Consultant aims to make sure that the contribution of AHPs to the delivery of Scotland’s National Dementia Strategy is identified and realised but is also responsible for leading on particular issues:

- Sandra Shafii is developing national pathways for activity, participation and environment.
- Jenny Reid is taking forward national approaches to supported self-management and early intervention.
- *Christine Steel is looking at how AHPs support people with

dementia in acute hospitals.
*currently on maternity leave; a temporary replacement will be in post in March 2013.

An important part of the AHP Consultants' work is sharing information, ideas and good practice with colleagues across Scotland. Jenny Reid edits a very informative newsletter called *Dementia AHPproaches* from which some of the examples in this article have been drawn.

Elaine Hunter's specific role at Alzheimer Scotland is to bring the skills of AHPs to the forefront of dementia practice and to share with them the principles and practice of working in a major charity which is dedicated to making sure no-one goes through dementia on their own. She will also be working with the Alzheimer Scotland Dementia Link Workers and AHP Directors to deliver the post-diagnostic guarantee.

"I'm looking forward to seeing what can be achieved in partnership with Alzheimer Scotland to support the AHP workforce to deliver better standards of care for people with dementia in Scotland."

Elaine Hunter – National AHP Consultant, Alzheimer Scotland

The four AHP Consultants will be working with their colleagues to set up an expert group to develop a shared model of practice, in partnership with key stakeholders, and based on Alzheimer Scotland's 5 pillars model of post-diagnostic support and our 8 pillars model of integrated community support. This will review the contribution of AHPs, enhancing current models of practice, considering new ways of working and the contribution of AHPs to the key objectives in the Dementia Strategy, Alzheimer Scotland's Strategic Plan and the AHP Delivery Plan.

You can follow Elaine's work via her online blog at www.elaineahpmh.wordpress.com and follow her on Twitter [@elaineahpmh](https://twitter.com/elaineahpmh)

How AHPs can help people living with dementia

Space constraints will only allow us to give examples of how some of the nine AHP professions work with people living with dementia; we will highlight the contribution of the other AHPs in later editions.

Dieticians

Dieticians help with diet and nutrition problems and provide advice on appropriate food choices, the importance of hydration and eating environments. They can help reduce the stress and distress that can be associated with eating when someone has dementia and can provide advice to family and professional carers.

A person with dementia may forget to eat or think they have already eaten or had a drink; the tasks involved in preparing a meal might become too much; the person may develop new likes and dislikes, perhaps only being interested in sweet or spicy foods; as the illness progresses the person may have difficulty recognising food or managing cutlery; swallowing can be a problem for some. A dietician can suggest practical ways of overcoming or coping with some of these challenges.

Gillian Banks, a specialist dietician with NHS Lanarkshire has produced a leaflet called *Dementia care – support with eating and drinking* which the Scottish Government is keen to roll out nationally – watch this space! It is hoped that by making this guidance more widely available and at an earlier stage in the illness that people's health will be maintained or improved for longer at home, while also helping reduce stress and anxiety among carers. Gillian is working closely on this project with NDR-UK, a charity who provide resources for dieticians and other health professionals to use with the public to empower them to make changes to their diets to improve their quality of life.

Occupational Therapists

Occupational therapists provide wide ranging support for people living with dementia, focussing on people's strengths and abilities. They aim to help people overcome any environmental, physical, emotional and psychological barriers to living a full life.

Some occupational therapists have devised programmes to help people with dementia develop skills and coping strategies. An example of this is the therapists working in the Older People's Mental Health Service in Edinburgh, who have developed Memory Skills training programmes delivered to groups over 6 weekly sessions, with relatives invited to attend the first and last sessions to support the participants and to learn how to reinforce some of the strategies at home. Topics are planned with group members but have included: remembering names; using the telephone; using public transport; memory aids and prompts; communication difficulties; and habits and routines.

Memory skills groups have been run in other areas which have taken a broader approach, looking at physical health, nutrition and personal safety as well as strategies for coping with memory loss.

Other occupational therapists work in partnership with local community alarm or telecare services to help people stay independent and safe.

Physiotherapists

Physiotherapists have a focus on physical health and wellbeing which encompasses

- encouraging health exercise and physical activity
- helping with balance and mobility problems
- falls prevention (podiatrists also have a role to play here)
- managing pain
- providing massage and touch based therapies.

In Grampian, some physiotherapists have had a successful trial of Technogym Easyline exercise equipment. This equipment has been specifically designed for older people and uses a hydraulic design which ensures that the resistance applied is relative to the ability of the person using it. The team has also run a 6 week Otago exercise programme in the local dementia day hospital. Otago is a programme developed to prevent falls in older adults.

The physiotherapists in NHS Grampian have found that the most important thing regarding exercise in individuals with dementia is finding something that is enjoyable and has meaning for them – in other words, it's no different from the rest of the population. Some approaches seem to work better than others, depending on the severity of the person's dementia. For those with mild to dementia, the Otago programme worked well. The Technogym seemed better for people with moderate to severe dementia, probably due to the fixed nature of the machines and the repetition involved. For people with little or no attention span, walking and climbing stairs are useful for those people with little attention because it is an automatic reaction. They also observed that group exercise seems to encourage social interaction and can improve mood.

Following on from this work, the physiotherapists are currently discussing with the local council the possibility of general Technogym groups in the community which can also involve people with dementia and their carers.

Speech and Language Therapists

Much of the work of speech and language therapists involves people in the later stages of dementia – providing support with eating, drinking and swallowing difficulties, for example. In many cases this may involve training, advising and supporting other staff rather than direct individual patient contact. However, this group of AHPs can also be involved even before diagnosis. Where language difficulties are the main presenting problem, speech and language therapists can carry out communication assessments to contribute to diagnosis. This may be followed up by working with the person on specific vocabulary or more general word finding tasks and developing communication and memory strategies to help people maintain skills and keep connected to their community and their social network. Speech and language therapists can also help people to find ways to express themselves without speech if necessary. Talking Mats is a communication framework which

was developed by speech and language therapists to help people with communication difficulties express their views more easily. It has been used very successfully with people with dementia.

How to access AHP services

In the community:

Some Allied Health Professionals (eg podiatrists and physiotherapists) are in private practice and will advertise in local directories; some AHPs accept self-referrals while others require a referral from a GP, consultant or other professional. Talk to your GP, consultant, Community Psychiatric Nurse or social worker if you think an AHP could help you.

In hospital:

If you or a family member are in hospital, the doctor in charge of your treatment or nursing staff may ask an AHP to advise them or work directly with you to resolve problems; in other cases, AHP intervention will be part of a planned programme of treatment eg physiotherapy after surgery or an AHP will be involved in planning your discharge from hospital.

Elaine Hunter hopes that the AHP National Delivery Plan, the new Dementia Strategy and her new role will all lead to a review of how people currently access AHP service and how this access can be improved.

National AHP Consultant for Dementia meets The Princess Royal



Elaine Hunter, our National AHP Consultant for Dementia, met Her Royal Highness The Princess Royal

at an event in Queen Margaret University marking 75 years of occupational therapy education in Scotland. The event celebrated the contribution made by occupational therapists to service users and clients, communities, organisations, and society. The Princess Royal has been Patron of the College of Occupational Therapists, the UK's professional body for occupational therapists, since 1987. The event was hosted by both the College of Occupational Therapists and Queen Margaret University.

There is a strong interest from Allied Health Professional students in dementia and particularly in the work of Alzheimer Scotland. Many AHP students contact us to find out more about the illness as part of their studies, but some have also approached us to work in a volunteer capacity at our services. Elaine hopes to build on this interest over the next few months and is beginning to develop networks with universities that deliver AHP training in Scotland, in order to raise awareness about dementia.

Self-directed support to be rolled out across Scotland



Mike Ladell and Peter Nicol: participants in the self-directed support pilot project.

Self-directed support involves working collaboratively to create care and support plans that are tailored to each individual's needs and preferences. It is based on equipping people with the knowledge they need to make informed choices about what is best for them, then giving them the resources to choose or buy social care services themselves.

Alzheimer Scotland received funding from the Scottish Government in 2012 to fund three part-time self-directed support advisors and a national development manager. Case studies describing some of the experiences of people who have received self-directed support with assistance from Alzheimer Scotland have been included below. New legislation means that self-directed support will soon be rolled out across Scotland, enabling anyone who qualifies for social care to access self-directed support. These changes will have significant benefits for many people with dementia and their carers.

The Social Care (Self-directed Support) (Scotland) Act 2013 received royal assent in January and is likely to come into force in spring 2014. It will ensure that people in Scotland have much greater choice over the social care they receive.

Everyone who qualifies for social care will be able to choose from a range of four care options, according to their needs and preferences. These options will be available whether they are being assessed for the first time, or are undergoing a care review:

- Option 1 – the budget is taken as a direct payment (you receive a cash payment that you can use to buy services from a provider of your choice, or to employ individual care assistants)
- Option 2 – the budget is allocated to a provider of your choice (sometimes called an individual service fund, where the council holds the budget but you are in charge of how it is spent)

- Option 3 – the council can arrange services on your behalf
- Option 4 – you can choose a mix of these different options

It will be up to you to decide how much control you would like, and up to your council to give you your preferred choice. Some people will choose to take a lot of control over their support through opting for a direct payment. Others may ask the council to buy a service on their behalf using option 2. If the council already provides a service in a way that the person wants, they might choose option 3 and ask the local authority to continue to arrange their care.

Currently the main way to access self-directed support is a direct payment. This is money given to an individual (or someone with the legal powers to act on their behalf) by the local authority to pay for community care services. Under the new Act the other three options will be available too.

The new legislation will mean that self-directed support becomes a mainstream choice for people receiving care. It will also send out a clear signal that individuals can choose the level of control they want over their social care.

The Act also includes other duties and powers, for example a power to councils to support unpaid carers and duties on them to provide information to help people make informed decisions about their care. Collectively, these changes should improve choice and flexibility for people with dementia, their carers and other groups of people receiving social care.

Self-directed support: experiences of people with dementia

In 2009, fewer than 100 people with dementia in Scotland were accessing self-directed support, but by 2012 this number had risen to well over 200. In 2012, Alzheimer Scotland secured funding from the Scottish Government to fund three part-time self-directed support advisors and a national development manager. The following case studies provide examples of how self-directed support has been used by people with dementia, and the benefits for them. Over the next three years we hope to increase awareness of self-directed support and enable more people with dementia to have greater choice and control over how they arrange their formal support.

Kenny and Marlene

Kenny is in his mid-60s and lives at home with his wife Marlene. Before being diagnosed with frontal lobe dementia, Kenny was a well-known publican in Ayrshire for many years.

Following his diagnosis, Kenny and his wife moved to a sheltered housing complex specially built for people with dementia, but neither felt this offered them enough privacy. Marlene was in her mid-40s and also didn't feel she had the opportunity to interact with people her own age. Kenny started going to a local day care service but didn't really enjoy it, continuing going occasionally to give his wife a break.

Marlene was finding caring for Kenny increasingly difficult. Their marriage was at breaking

point and Kenny had stopped communicating with Marlene. She felt that the only option was for Kenny to move into a care home. At that stage, Marlene was signposted to Alzheimer Scotland's self-direct support pilot project in Ayrshire and together with the family they developed a plan which would enable Kenny to continue living at home. A crucial part of this was finding someone who Kenny could engage with, and who would support him to do the things he enjoyed.

Kenny now employs a personal assistant (PA) using a self-directed support budget provided by the local authority. As Kenny's power of attorney, Marlene deals with all the paperwork and finances. Kenny and his PA spend time going on trips, playing dominoes at the local pub, attending social functions and have even been on short breaks to Edinburgh and Knockhill Racing Circuit. This has enabled Kenny to re-engage with old friends and he now returns home telling Marlene stories of what he has been up to and who he has met during his travels and adventures.

Kenny and Marlene have moved into a new home and are delighted with the support Kenny now receives. It enables him to do the things he enjoys and which were impossible without tailored support. Marlene benefits from having time to do the things she enjoys too!

Mr and Mrs H

Mr H lives at home with his wife. They have two daughters, one of whom lives locally and the other in France. Mr H had a very successful career as an electrical engineer and worked all over Britain. In his spare time he was a passionate sailor and golfer, and he and his wife remain members of the local golf club.

Seven years ago Mr H was diagnosed with vascular dementia. While he is aware of his memory problems, he does not think he



Kenny and Marlene Murray (foreground), with Lorna Sommerville, SDS advisor.

has dementia. He is a very private and independent individual and has been reluctant to accept that he requires assistance from anyone other than his wife. This has put a great deal of stress on her, as she has to take him with her when she goes to the doctors, hairdresser or to meet her friends.

Mrs H approached Alzheimer Scotland as she felt a direct payment would be more suitable for her husband than traditional services. The direct payment was agreed by the local authority, but could initially only be used to purchase types of support which did not provide the flexibility Mr H needed to live as well as he could.

Alzheimer Scotland worked in partnership with Mr and Mrs H to explore what was important for them and what would improve their quality of life. Examples included going out walking, getting to the pub to meet Mr H's friends and visiting their daughter in France. They created a person-centred plan based around this.

Mrs H felt that being able to continue playing bridge and spend time golfing would provide her with some respite from her caring role. However, she didn't want her husband to have to spend time in a care home while she was spending time with her friends.

Instead the couple purchase hours of support from personal assistants employed by Alzheimer Scotland who accompany Mr H to and from the local bar, enabling him to stay connected with his friends. They also visit the marina, art galleries and museums, and have even reintroduced Mr H to golfing and cooking. This has given Mrs H some respite and time to follow her own interests. Her levels of stress and anxiety have been reduced as she knows her husband is being well supported and doing things he enjoys.

Keeping on top of their beautiful garden had become difficult for Mr & Mrs H, as this was something Mr H had always done but had lost interest in. Alzheimer Scotland

staff acted on behalf of Mr and Mrs H to see if they could use the budget they had been allocated more flexibly. They felt it was possible to achieve the things that were important to Mr and Mrs H. After some time and negotiation, more flexible use of the budget was agreed.

Mr and Mrs H are now looking to employ a gardener, who will try to encourage Mr H to take part in keeping the garden maintained. The gardener will also deal with the more labour-intensive tasks that Mr H is no longer able to undertake.

Self-directed support has proved to be a great benefit to Mr and Mrs H, who even went to France to visit their daughter for Christmas, something they didn't think would be possible. Another family member was employed to assist during the travel to and from France. Mrs H described the changes as 'fantastic' and they both now have a better quality of life

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Save the date!

**Self-directed support
and dementia in Scotland
2nd National Conference
23 September 2013
Glasgow**

We are pleased to announce we will be hosting another conference this year on self-directed support and how this agenda is progressing for people with dementia. More news will follow on our website and in future editions of Dementia in Scotland. Free places will be available for people with dementia and their family members.

**Dementia Awareness Week
3 - 9 June 2013**

Keep an eye on our website
for events in your area.

www.alzscot.org

Bikers raise cash for early onset service

On 6 October, members of the Goldwing Misfits Motorbike Club held a successful fundraising day for our Edinburgh and West Lothian Services (formerly known as Lothian Early Onset Support Service). This popular annual event has been running for several years with the Misfits setting up a high-profile display at The Centre in Livingston.

Members of the Goldwing Misfits are all fans of Honda Goldwing motorbikes and although they

come from across the UK, the majority are based in Scotland. For the past six years they have supported Alzheimer Scotland as their nominated charity.

Tom Gardiner, the club's Charity and Events Coordinator, explains: "We chose Alzheimer Scotland because several friends or relatives of our members have had direct experience of early onset dementia. Over the years we have raised in excess of £13,000 as well as raising awareness and giving out information at gala days, static displays and parades.

"We chose this service to support as we believe it's important that younger people who have been diagnosed with dementia have access to support and advice. Alzheimer Scotland helps keep people active and supports them to stay in their own home environment for as long as possible, so it's very valuable work."

This year's event in Livingston featured three solo Goldwings plus three trikes. There was a publicity stand for Alzheimer Scotland and a tombola. Visitors could also have their photo taken on or next to one of the bikes, with on-site photo printing meaning they could take their souvenir photo home with them on the day. The event ran from 8am until 6pm, with 14 club members helping throughout the day.

Alan Midwinter, Service Manager, was presented with a cheque for £1,400 at the Goldwing Misfits' annual Burns Supper, which took place at Deer Park Golf and Country Club in Livingston on Friday 25 January.



Memory Walk 2012



Person First... dementia second

In September 2012 almost 200 walkers braved torrential rain to take part in Alzheimer Scotland's flagship Memory Walk at Mugdock Country Park near Glasgow. Organised in partnership with Bupa Care Homes, our 5k challenge event also featured the Bupa Memory Mile which saw

131 participants choosing to walk an extra mile in return for a £5 donation from Bupa.

The staff, residents and families from Bupa Care Homes who took part in Memory Walk 2012 managed to raise an astonishing fundraising total of nearly £20,000, helping Alzheimer Scotland to more than double its original fundraising goal for the event, which brought in a total of over £32,000.

The walkers were encouraged along the route by nearly 30 volunteer marshals. Participants also got involved in a wide range of fun entertainment activities including dancing, music, face painting and crafts throughout the day. Our Alzheimer Scotland Memory Bus was on hand to offer information and support to the walkers and their families.

Alzheimer Scotland's Trusts and Corporate Fundraising Manager, Catherine Thomas, said: "We are enormously grateful to have benefitted from Bupa Care Homes' investment in our Memory Walk, which will help us achieve our goal of ensuring that no one goes through dementia on their own."

Kenny Valentine, Director of Bupa Care Homes in Scotland, said: "Bupa Care Homes and Alzheimer Scotland have enjoyed a truly fantastic partnership this year. We are delighted to have been able to support and champion the excellent work and services delivered by Alzheimer Scotland."

Alzheimer Scotland's next Memory Walk will take place on World Alzheimer's Day, Saturday 21 September 2013. Visit www.alzscot.org/pages/fundraising to learn more.

Help us achieve the **Hampden Park quilt challenge!**



Isa photographed with Margaret Grinstead and Janet Raeburn, who have also been helping to make quilts for the project.



Isa Durie, aged 95, sewing quilts for the Hampden Park project at North Berwick Day Centre.

In 2011 Alzheimer Scotland launched a challenge to cover the football pitch at Hampden Park in Glasgow with an incredible 5,000 square metres of quilts. The project is the brainchild of Ann Hill, Alzheimer Scotland's Quilter in Residence. It aims to raise awareness of dementia among those who make and donate the quilts, as well as generating valuable income for Alzheimer Scotland by selling the quilts after the event.

Ann's goal is to gather 5,000 square metres of quilts by 20 May 2013 in readiness for an event in

June when they will be laid out on the pitch at Hampden Park. Afterwards they will be sold, with all proceeds donated to Alzheimer Scotland.

"We would love as many people as possible to contribute to the project, and it's easier than you think, as you can either make a quilt or donate a ready-made one that you already have. At the moment we are about a third of the way towards our target, but I'm optimistic we will see a flurry of activity over the coming two months as we approach the

deadline. It's an ambitious target and every quilt counts, so please support us if you possibly can.

"The easiest way to participate is to donate a quilt, although making one is a fun and creative option and we can provide patterns and guidance. In our original appeal we asked for one metre square quilts but we are very happy to receive all shapes and sizes. Even an inexperienced quilter can make a lap quilt on a machine in a week, and cot quilts or wall hangings of any shape and size are equally welcome.

"Our goal is to gather 5,000 square metres of quilts, which should be nearly enough to cover the pitch at Hampden. It's a huge area and standing on the edge of the pitch you get a real sense of the scale of the challenge.

"Some people are making quilts on their own at home while others are working as part of local groups. They are being donated by people of all ages, and both men and women are contributing. In North Berwick a 95-year-old lady comes to the day centre every Wednesday where she sews quilts on a 92-year-old Singer sewing machine. It's quite inspirational!

"Before starting this project I was working directly with people with dementia and their families. Many people created quilts that told personal stories about their experiences of dementia. These have been used in reminiscence work in nursing homes and hospitals.

"If you're thinking of making a quilt, you'll find lots of practical information on our website. And if you would like to buy your quilt back after the event we can send it to you in exchange for a donation of as little as £20 plus p&p. Please help us meet this exciting challenge to raise funds for Alzheimer Scotland and become a part of quilting history!"

www.annhillquilter.co.uk

Dementia Dog pilot launches



John Veitch from West Kilbride and his beloved companion dog Nevis.

The Dementia Dog Project, a collaboration between Alzheimer Scotland, The Glasgow School of Art, Dogs for the Disabled and Guide Dogs UK, builds services for people with dementia that

brings dogs back into their lives or supports them to continue their relationship with dogs. Project Manager Jeni Lennox says, "Dogs can help people with dementia maintain their waking, sleeping and eating routine, remind them to take medication, improve confidence, keep them active and engaged with their local community, as well as providing a constant companion who will reassure when facing new and unfamiliar situations."

Following the successful completion of the research stage last year and securing additional funding, Dementia Dog has embarked upon its first small-scale pilot based at the Guide Dogs For the Blind training facility in Forfar,

Angus. The intensive dog training started in October and the next stage, matching clients in the early stages of dementia with these specially trained dogs, will happen this spring.

"The response to this project has been remarkable. Dementia Dog is significant in that it represents a new direction we are taking to living well with dementia. By actively engaging with Glasgow School of Art students we are tapping into their design expertise and bringing in a fresh perspective to some of the challenges our communities face," says Joyce Gray, Deputy Director Development for Alzheimer Scotland.

www.dementiadog.org

Make lasting memories



It can often take a significant life event, such as starting a family or moving from work into retirement, to spur us into making provisions for those we hold dear when we are gone. After they have been catered for, making a donation to Alzheimer Scotland – or leaving us

a gift in your will – is a lasting and effective way of supporting those living with a diagnosis, both now and in years to come.

Your legacy can make a real difference, as Julie Sinclair, our regional manager for Ayrshire and

Dumfries & Galloway, explains. "In October 2011 we purchased a property in Dumfries with a view to creating a Dementia Resource Centre. Not long afterwards we were very fortunate to receive two large legacies which we put towards the refurbishment costs. These legacies were a great help towards the final cost of making the building fit for purpose. We are extremely grateful to the two ladies who left money to us and wanted to mark their kindness in some way. The lounge area is now known as Janet's room and the quiet room is known as Elizabeth's room. A fitting tribute!"

Remembering us in your will is an amazing and long-lasting pledge in support of us. There are many ways to leave a legacy, and any gift, large or small, will go a huge way to furthering our work.

*If you are considering leaving us a gift in your will and would like to discuss this further please call Sarah Anderson on **0131 243 1453**, or send an email marked **'Query' to legacies@alzscot.org**.*

Network of new dementia cafés opens in West Lothian



Left to right: Aileen Eland, volunteer Mary Chambers and Councillor McMillan photographed at Uphall Dementia Cafe in September 2012.

Last summer Alzheimer Scotland secured funding for a new member of staff to help set up additional community-based services in West Lothian. Aileen Eland was appointed in July 2012 and her official job title is Community Capacity Building Worker, although she prefers to describe herself simply as a project worker. Aileen told Dementia in Scotland about the work she is doing to establish a network of dementia cafés in West Lothian.

“My post has been funded by a grant from West Lothian Council’s Challenge Fund and the focus is on helping to set up seven new dementia cafés, as well as supporting the two existing local cafés (Whitburn and Uphall). The goal is to establish a café in each ward area in West Lothian.

“Before joining Alzheimer Scotland I worked in palliative care, most recently as a hospice manager and previously as manager of a national community palliative care service. My new role is based on working as a facilitator in partnership with local communities. This involves identifying organisations that are willing to coordinate the

running of a dementia café, including recruiting the volunteers to run it. I provide them with initial training and ongoing support to run the café.

“At the moment five cafés are up and running with four more still to be launched. Local communities have been very supportive of what we are trying to achieve. For instance, in Fauldhouse we are working jointly with the local development trust, the primary school, a community psychiatric nurse (CPN), the Food Train, the credit union and Carers of West Lothian. A forum consisting of all these organisations has been set up to ensure that as many people as possible either with dementia or caring for someone with dementia can be signposted to the café or other services. By working together, they can promote each other’s work.

“A big benefit of working jointly like this has been the opportunity to increase understanding about dementia in the community. Local schoolchildren took part in a competition to design a poster for the café in Fauldhouse and in the

process learned about dementia. The organisations that run the café now also know more about dementia, and their volunteers can also pass on information about their own services while helping out. This is often a benefit for people with dementia and their carers, who find out about services they may not have known about before. The local CPN pops into the café where she is able to provide support and advice in an informal setting, so there is quite a range of support built into the community.

“Another area of my work has involved putting together a toolkit with guidance on how to set up a new dementia café. This covers a wide range of topics, including making the environment as easy as possible for a person with dementia to navigate through good design. It includes guidance on working with people who are vulnerable, and also touches on other subjects like health and safety. I have also put together a volunteer training pack to train the café volunteers. Three new cafés are now up and running – two in Livingston and one in Fauldhouse – bringing the total to five. Linlithgow is expected to open in April, with Bathgate and East Calder following soon after. Armadale is also in the process of being set up.

“Each of the cafés has information about dementia available for people to take away, including leaflets and details of the 24 hour Dementia Helpline. We also ensure that the contact details for the local dementia advisor are available.

“My first six months in the role have been very rewarding and I’m looking forward to seeing more cafés launch over the next few months. Working jointly with such a wide range of community organisations has enabled us to raise awareness more effectively than setting up the cafés in isolation. It has helped both Alzheimer Scotland and our partners share knowledge and reach more people.”

Dates for your **diary**

Calling all thrill seekers!

Spring is on its way and if you're up for a challenge we have some fantastic fundraising events coming up. These are great opportunities to have some high-octane fun while supporting Scotland's leading dementia charity!



Choose between zipping your way across the Clyde or abseiling from the Forth Rail Bridge – both fantastic and exhilarating challenges and not a bit of training at the gym needed!

The Zip Slide takes place on Saturday 23 March 2013 and is the perfect event for thrill seekers who are looking for a new challenge – be lifted to 140ft then slide 700ft from one side of the Clyde to the other!

Alternatively take on the unique challenge to abseil 165ft SAS style (i.e. freefall) from the Forth Rail Bridge onto the beach below on 16 June 2013. Alzheimer Scotland has teamed up with the Rotary Club of South Queensferry who are organising the event for people who are brave and daring enough to take the plunge!

To find out more, or to register for either event, visit www.alzscot.org or call us on **0845 260 0789**. We have a strictly limited number of spaces, so don't delay, call us today.



Memories Day launched

While people with dementia can have difficulty remembering the recent past, they can often remember things from longer ago, recalling happy memories with ease. The importance of memories inspired the fundraising team to create an event themed around the past – Alzheimer Scotland's 'Memories Day.'

This month sees the launch of Memories Day, which is all about having fun while celebrating days gone by and raising money for Alzheimer Scotland. A Memories Day event is perfect for getting together and reminiscing, which makes it ideal for a workplace fundraiser – you may find out things you never knew about your colleagues!

The fundraising team held a successful pilot Memories Day in National Office where they invited colleagues and friends to dress up in vintage style clothes, munch on some retro sweets and giggle at each other's baby photos. The event also included a pop-up charity shop selling popular books from the past and vintage games such as "Kerplunk!"

If you are interested in holding your own Memories Day, you can download a pack full of ideas and everything you need to make your event a success at www.alzscot.org/memoriesday.

To tie in with our Memories Day launch, Alzheimer Scotland has also been chosen as the March charity of the month by Bibi's Bakery in Edinburgh who will design a unique cupcake for the charity. A 25p donation from the sale of each of these charity cupcakes will go to Alzheimer Scotland, so why not treat yourself? Visit www.bibisbakery.co.uk for contact details.

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