

Thursday 28th September 2017
The Melting Pot, Rose Street, Edinburgh 10.30-3pm

Welcome & Introductions

Maggie Nicol (chair), Elaine Hunter, Mark Hamilton (minutes), Lynn Stevenson, Gillian McMillan, Gordon Thomas, Jenny Keir, Rory Campbell, Angela Pointon, Alison Wren, Wendy Chambers, Jaqui McComish, Anna Paul, Karen Mellon, Dorothy Hathaway, Vicky Burnham, Jacqui Chung, Ruth Gardner, Rebecca Kellet, Katie Lyon, Samantha Flower, Lesley Bodin

Remote

Moraig Rollo, Christine Lapsey, Elaine Brown, Katie Masterstone Carrie Hill

1. Actions from Last Meeting

1.1 Role & Remit:

Elaine to draft by end Oct, circulate to sub group, then to whole group by mid-Nov. Please use this to explain why you come to the forum, and what you are expected to do. If necessary can be used to justify time within your job plan for Connecting People, Connecting Support.

1.2 3rd Dementia Strategy

PDS: Capacity challenges as incidence higher than anticipated. Link Work or Practice Coordinator support should continue in some form after 12 months.

HIS: Test site of Alzheimer Scotland advance model like to be in Dundee

Our work is Commitment 10 – Connecting People, Connecting Support. Overall strategy includes development across broader sectors e.g. Housing, Transport which will also be of interest to our programme.

ACTION: Elaine to develop a role and remit of the group for comment and circulation

ACTION: All: read the new Dementia Strategy and Active & Independent Living

ACTION: All: direct people to Community of Practice, Dementia pages, emphasise our work is key to the new dementia strategy and the integration of the work is integral to the improvement programme of the Active and Independent Living programme.

1.3 Appreciate Enquiry Toolkit Review:

Mapping Your Influence proving very useful for planning in advance of conversations with other stakeholders. Helps to reflect before you get started. Helps you to sit in other's position to think in advance about what their priorities and perspective may be. e.g. in preparation for meeting with your AHP Director.

1.4 Universal interventions: AHP Dementia Postcards

We now have one from Occupational Therapy Music Therapy and Speech & Language Therapy.

The public really like them, so why don't we do one for each profession by early Spring. Aim to standardise from existing templates. Cost is feasible

ACTION: Professional body reps: lead production of postcard for your profession.

2. Connecting People, Connecting Support – Programme Document

Key messages

- Only AHP policy document for Dementia.
- Evidence based model: Pages 18-19 explain where the document has come from.
- Broader than developing impact on Integrated Coordinated Care
- Beyond that CPCS seeks to link right through to key commitments of Dementia Strategy
- Vision of how things could be or should be for people living with dementia in Scotland (rest of home nations have not developed this)
- Our role in Advanced illness is better understood, we now want to move knowledge base and make a better impact earlier in the patient journey.
- Key message from family carer, we would have loved to have seen AHPs MUCH earlier on.

What are we trying to do?

- Communicate a vision for the future
- Asset based approach when working the person and their families.
- Build a consensus in operational action, building upon the 3 year effort to build consensus between organisations, professional bodies.
- Sell the 5 Key Elements in a closely related flow:
 - Supporting families and carers as equal partner
 - Enhancing Daily Living
 - Adapting everyday environment
 - Maximising psychological wellbeing
 - Maximising physical wellbeing
- What can / could be done in people's own homes, "Home based memory rehab" work is showing that people make better progress with interventions if delivered at home.

Why is the policy implementation important?

- Based on appreciative inquiry: what's important to you and how do you want to live. Good conversations with public at many dementia cafes.
- Includes 40 case studies of what works well. Dementia Champions, Post Diagnostic Integrated Care.
- People said they wanted good access to: Community, Family, Transport.
- Work by Dr Duncan Pentland – literature review of 215 papers.
- National Scoping of contribution to Post Diagnostic Support – Alison McKean

Alzheimer Scotland AHP Dementia Forum

- Dementia Consultants cite benefits of AHP dementia group for development across Scotland

ACTION: Elaine: adapt above into script to go along with CPCS comms presentation

ACTION: All: go onto www.alzscot.org/ahp to browse the evidence informing the policy. Use case studies.

ACTION: All: be clear about 5 elements (for people) and 4 ambitions (for development to deliver the 5)

ACTION: All: use pages 18-19 to influence and engage colleagues in this 3 year programme

ACTION: All: find and connect with people!

ACTION: All: read and share: the Blog, the Tweets,

Comments from the group

1. Looking for a script to support the presentation to explain what this is all about
2. Measurements: having targets can help trigger action, and hard measures like numbers of GP contacts carry weight with leaders and commissioners. Yes, so we will co-create the measures we feel are of value and will carry weight and demonstrate success for both system and quality of life.
3. It's a challenge to get hold of all the names and teams in a health board area.
4. Elevator pitch please. We need a hook so we can say, "can I come and talk to you some more about this?" e.g. did you know that greater input by AHPs can lead to x, y, z. And, when you get the chance, "what you could do to support me is..." i.e. what's our offer to them, and what's our ask of them.
5. Broader discussions will however be central, more explorative, what do you think, what could you bring, how can we work together on this?
6. For general AHP staff and Care staff we want to engage and educate them along the lines of "we want to help to make your job easier, but we need your help to engage with people, carers etc, to encourage them to access the AHP offer and follow through on their self management.

4 & 5 together means that we need to tailor our approach to the audience we have.

ACTION: Elaine: to circulate video clip of Pat – how Pat spent her day, accompanied by an occupational therapy intern.

ACTION: Elaine: to lead opportunity to film some case studies of innovative practice to influence practice spread beyond Mental Health – so it's seen as everyone's business (see pgs 12/13).

Next steps:

Alzheimer Scotland engagement events, in local authority areas, as we need local government and leaders on board

Monthly Webex's will commence as a forum for Case Studies, Sharing Good Practice.

Face to Face AHP Dementia Forum meetings will be about Policy development, action planning and development and progress of measurement framework.

Actions Summary

Item 1

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Date for future meetings

2018

- 8th March, venue TBC
- 3rd May, venue TBC
- 26th July, NHS NES, 102 Westport, Edinburgh
- 20th September, NHS NES, 102 Westport, Edinburgh
- 8th November, NHS NES, 102 Westport, Edinburgh

Monthly WEBEX to share practice in dementia with a focus on the 4 ambitions

March

April

May

June

July

August

September

October

November

December