Memory Matters

Carlow /Kilkenny Age Friendly Joint Service Providers Forum Community Dementia Project



Six over Arching Objectives

- Collaboration & Involvement of Persons with Dementia / Advocates /Carers
- Support individuals with complex care needs to remain at home
- Provide individual Packages of Care for persons with Complex needs taking into consideration Carers needs
- Provide assistive technology
- Build Capacity and Understanding

Vision

- Enable an environment where things can improve
- Help to build on the work that staff wanted to do were doing already to make things better
- Ownership of the good work staff do
- Focus on embedding the HSE Values Care, Compassion, Trust and Learning across a; elements of service in reallife terms (changing behaviour)
- Focus on greater autonomy moving decision making closer to the user
- Build Capacity and Integration of all services within a community it's a community that keeps people at home
- Improve Communication within Primary Care Teams & with external stakeholders

Sustainability

Action Learning - QIP

Structure

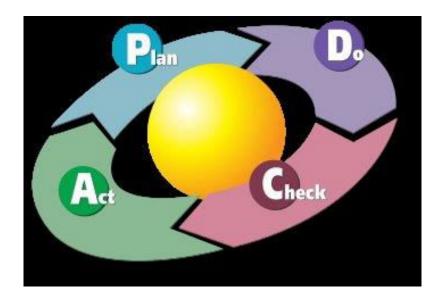


Process



Outcome







Structure

Governance

- Both Carlow & Kilkenny Age Friendly Alliance Support Integration
- HSE Lead understanding of the entire OP service responsibility for budgets /staff / ability to navigate the services
- Project Lead data gathering/ analysis and research component
- Local Placement Forum
- Primary Care Staff
- The Home Care Allocation Team
- DREAM Group Collaboration

Processes

- Auditing of existing services and pathways ensure project was incorporated – Learning at every opportunity
- Resulted in
- Robust Criteria for inclusion
- Referral Pathway clinician involvement
- Ensured people who were not accepted to project were redirected more appropriately

Criteria for Inclusion

> A Diagnosis of Dementia
> Co- Morbidities
> Over 65yrs
> Responsive Behaviours

Complex care need



Referral Pathway

Personal Involved

- Referrer
- Project consultant
- PHN
- LPF
- * OT
- Allocations Group
- Review of Care plan

Key Questions

At LPF and Allocations Meeting

- Were they suitable
- What is working
- What is not working
- What can you/ others do
- ✓ What can we do
- Can the concerns be resolved

OUTCOMES – Demographics

Participants

Carers

- 49% Participants were over 80,
- 67 % female
- 33% Male
- 34% live with their spouse who was main carers

- 81% carers were female
- 40% carers provider 24/7 care alone
- 27% shared care the 24/7 with other family members
 23% would be unable to
- 23% would be unable to take care of their relative for much longer
- 52% cited stress main barrier

Outcomes – Support

- 18% of participants had never accessed Home
- 62% had never accessed respite care despite carers stress levels and levels of care need
- > 21,024 Home Help Hours delivered (€369,661)to participants (82% which was provided directly by HSE staff and balance private carer)
- > 38 dementia specific Telecare Packages to 34 homes (€14,131)

Outcomes – Training

- 175 Home Helps received project specific training
- 154 Health Care Professional 2 day National Understanding Dementia
- 45 attended 3rd Module "Responsive Behaviours"



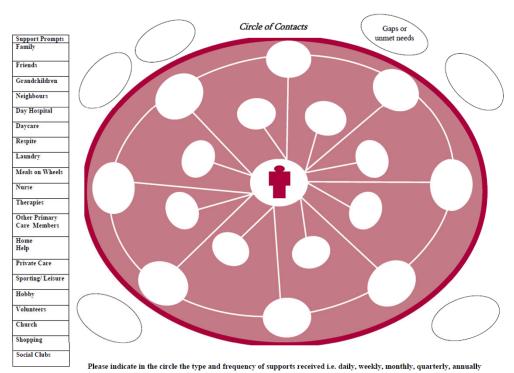
Did the Project Met its Objectives

- In total project participants remained living at home for an additional 14,353 collective nights
- The average weekly cost of Long term care in the area is €939.07 per week equates to €1,925,495
- Less contribution to care under NHSS(2009)
- Less cost of additional Home Help
- Potential saving €962,234.98

Referral Form Transitioned to HH Application Version 10

Key Questions

Life Interests Circle of Contact Concerns Risk Assessment Problem solving Involvement of MDT in Decision Making Behavioural Change Learning



Projected Created Synergy amongst all Stakeholders
Memory Libraries

Memory Gardens

Memory Choirs Toolkit and Songbook

Life Story Book

