Better care at home and in care homes – contract inserts
West Yorkshire Commissioning Packs are tools to help commissioners improve the quality of services and minimise unwarranted variation in service delivery. Each Pack provides a tailored set of guidance, templates, tools and information to assist commissioners in commissioning services from existing providers or for use in new procurements.

**Circulation List**

**Description**
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*For Recipient's Use*
Dementia Commissioning Pack

Handbook

Commissioning Framework & Assessment Tool

1. Early diagnosis
2. Care at home / care home
3. Care in hospital
4. Antipsychotic

1. Case for change
2. Action Plan / Inserts
3. Specification
4. Cost / benefit
5. Patient Information

Procurement templates and guidance
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Introduction

People with dementia and their carers need a range of services, some of which will be dementia-specific and others which will be more mainstream in nature, but which may deliver services to large numbers of people affected by dementia. In some instances, these mainstream services may not respond well to the specific needs of people living with dementia and the purpose of this document is to provide a statement of requirements to meet those needs.

The document sets out a number of ‘contract inserts’ which describe the specific requirements of people with dementia and their carers when using mainstream services and may be used by commissioners when drawing up their own statements of requirements for discussions for service redesign or in a procurement situation. They may be included in a subsequent contractual arrangement with a Provider.

The document also sets out a number of dementia-specific quality standards which commissioners may use to measure the quality of services provided to people with dementia and their carers.

At the end of the document, information is provided on documents and practical tools which may be of assistance to commissioners in developing a dementia-friendly community.
Carer support
Helping family and friends of the person with dementia

Dementia-specific service elements

The Provider shall:
- offer advice on available peer support and specialist advice and information on dementia-specific services and ensure that any 24-hour information and support service is also relevant to people with dementia and their carers
- identify and help ensure the development and range of social activities that are jointly available to the person with dementia and their carer
- offer or signpost access to specific carer education programmes relevant to different points in the progression of dementia
- promote the inclusion of carers in planning and decision-making and support individual carers to participate as required
- where relevant, offer advice and practical support to help the carer of the person with dementia maintain employment
- promote access to carer support services to people living with dementia who may be hard to reach or reluctant to seek or accept advice or support.

Dementia-specific quality standards

- The Provider involves carers in the dementia training of staff and volunteers.
- The Provider offers an expert carer programme for carers of people with dementia and uptake is in line with estimated need.
- The Provider proactively addresses the stigma of dementia and proactively identifies and addresses issues of social isolation.
Peer support
Helping people get support from each other

Dementia-specific service elements

The Provider shall:

✓ involve potential users in the development of the service and the running of the service
✓ have in place a clear set of aims, standards and governance arrangements, together with a business plan
✓ implement and evaluate the effectiveness of a strategy to actively encourage people living with dementia to use the service who may be hard to reach or reluctant to seek or accept advice or support
✓ ensure that the service is in a place that is non-stigmatising and accessible to users
✓ ensure that the venue is appropriate to service users – for example, a building which tends to echo sound may be disturbing to those with hearing difficulties
✓ ensure that there is a menu of activities and services in place, appropriate to people at different stages of the condition, which is age appropriate and accommodates individual preferences
✓ ensure that up-to-date information which may be of help to the person with dementia and their carer is made available
✓ ensure that the service offers access to specialist advice and that there are strong links in place with GP practices
✓ ensure that it works well with other community partners, including housing and social care and third-sector organisations
✓ consider how the service could be expanded to other care settings (such as care homes, extra care accommodation or sheltered housing)
✓ have in place arrangements to swap skills and services with other peer support services.

Dementia-specific quality standards

✓ There is a good quality programme of training for volunteers to promote a sense of empathy with service users.
✓ The service provides appropriate support for people with early onset dementia.
Home care

Dementia-specific service elements

The Provider shall:

✓ ensure that a person with dementia is treated as an individual and that they are always treated with dignity and respect
✓ deliver care on a flexible basis, both in terms of times and tasks and plan appropriately for possible fluctuations in the behaviour of the person with dementia
✓ ensure continuity of care by minimising the number of staff involved in a person’s care
✓ ensure that members of staff get to know the person they are caring for and adopt a personalised approach to providing care that is set out in an individual support plan
✓ aim to achieve the best match in care workers in terms of ability to respond to the particular needs of the person with dementia and also to provide appropriate carer support
✓ plan appropriately to respond to behaviour that challenges and plan for the different needs of the person with dementia, all the way through to end of life care
✓ ensure that staff have appropriate communication skills to respond to the needs of a person with dementia
✓ help enable carers to work alongside staff and ensure that they are included in planning and decision making
✓ ensure that they work proactively and collaboratively with other members of the primary care team and with social care and that they are alert to visual and hearing and other physical impairments of people with dementia
✓ ensure that staff are vigilant about physical health needs that the person with dementia may not be able to explain.
Home care

Dementia-specific quality standards

- All staff receive basic level awareness training for dementia.
- Specialist support from staff with advanced level dementia training can be provided.
- Staff are familiar with and alert to the benefits of assistive technology for people with dementia.
- There is an appropriate risk management framework in place which is consistent with Nothing ventured, nothing gained, Department of Health, 2010.
- There are effective communication systems between front-line staff and managers and between members of the staff team providing care to an individual.
- Users have a strong sense of being in control of their services.
- The service is well integrated with other relevant services for people with dementia.
- Responses from user surveys reflect positively on the outcomes specified in the National Dementia Strategy.
- The service is consistent with Social Care Institute for Excellence good practice on caring for people with dementia, in particular good practice around eating well and difficult situations.
- Life story work is used as a means of getting to know the person with dementia and affirming their individual identity.
- Management and supervision are appropriate to the delivery of good quality care.
- The service knows about and acts upon the needs and concerns of people with dementia and their families.
Respite care

Dementia-specific service elements

The Provider shall:

- ensure that a person with dementia is treated as an individual and that they are always treated with dignity and respect
- deliver care on a flexible basis, both in terms of times and tasks and plan appropriately for possible fluctuations in the behaviour of the person with dementia
- ensure continuity of care by minimising the number of staff involved in a person’s care
- ensure that members of staff get to know the person they are caring for and adopt a personalised approach to providing care that is set out in an individual support plan
- aim to achieve the best match in care workers in terms of ability to respond to the particular needs of the person with dementia and also to provide appropriate carer support
- plan appropriately to respond to behaviour that challenges
- plan for the different needs of the person with dementia and their carer, all the way through the pathway to end of life care with specific emphasis on the major transition points in the journey
- ensure that staff have appropriate communication skills to respond to the needs of a person with dementia
- help enable carers to work alongside staff and ensure that they are included in planning and decision making
- ensure that they work proactively and collaboratively with other members of the primary care team and with social care and that they are alert to visual and hearing and other physical impairments of people with dementia
- ensure that staff are vigilant about physical health needs that the person with dementia may not be able to explain.
Respite care

Dementia-specific quality standards

✓ All staff receive basic level awareness training for dementia.
✓ Specialist support from staff with advanced level dementia training can be provided.
✓ Staff are familiar with and alert to the benefits of assistive technology for people with dementia.
✓ There is an appropriate risk management framework in place which consistent with Nothing ventured, nothing gained, Department of Health, 2010.
✓ There are effective communication systems between front-line staff and managers and between members of the staff team providing care to an individual.
✓ Activities are planned around individual interests.
✓ Users have a strong sense of being in control of their services.
✓ The service is well integrated with other relevant services for people with dementia.
✓ Responses from user surveys reflect positively on the outcomes specified in the National Dementia Strategy.
✓ The service is consistent with SCIE good practice on caring for people with dementia, in particular good practice around eating well and difficult situations.
✓ Life story work is used as a means of getting to know the person with dementia and affirming their individual identity.
✓ Management and supervision are appropriate to the delivery of good quality care
✓ The service knows about and acts upon the needs and concerns of people with dementia and their families.
Buildings and environment

Healthcare premises
The Provider shall:
  ✓ ensure that the design of the building is consistent with: The Dementia Design Checklist, NHS Scotland, 2007
    www.dementia.stir.ac.uk/files/DementiaDesignChecklist.pdf
  ✓ ensure that care environments are consistent with the principles set out in Enhancing the Healing Environment, King’s Fund, 2007
    www.kingsfund.org.uk/current_projects/enhancing_the_healing_environment/

Extra care housing
The Provider shall:
  ✓ ensure that extra care housing is consistent with the requirements of: Extra Care Housing and Dementia Commissioning Checklist, Department of Health, 2010.
    www.dhcarenetworks.org.uk/_library/Resources/Housing/Support_materials/Other_reports_and_guidance/ECH_and_dementia_commissioning_checklist_19_07_10.doc

Housing adaptations
The Provider shall:
  ✓ ensure that housing adaptations for people with dementia are consistent with SCIE best practice on creating a dementia-friendly home environment, www.scie.org.uk/publications/dementia/environment/index.asp
Assistive technology

Dementia-specific service elements

The Provider shall:

✔ ensure that the person with dementia and their carer are included in decision making and that their consent sought and given. Where appropriate, this includes an advocate within the provision of the Mental Capacity Act

✔ ensure that no one shall be coerced into using technology if it is not right for them

✔ in the first instance consider whether small changes in daily activities may be enough to overcome a particular problem faced by a person with dementia

✔ ensure that simple solutions are not overlooked. This may include a noticeboard for a reminder of appointments, a permanent place to keep important items such as keys and labelling of cupboards to help remember where things are

✔ ensure that use of assistive technology for a person with dementia is consistent with SCIE best practice:
  www.scie.org.uk/publications/dementia/environment/assistive.asp

✔ ensure that use of telecare accords with SCIE’s ethical framework: Ethical issues in the use of telecare, SCIE, 2007

Dementia-specific quality standards

✔ Individual solutions are appropriate to the needs and preferences of the person with dementia and are consistent with SCIE best practice guidelines.

✔ The effectiveness of interventions is evaluated and demonstrated
Community nursing

Dementia-specific service elements

The Provider shall:

- recognise the dignity of individual service users and carers and acknowledge their role in the process of planning and agreeing access to services.
- provide training to caregivers on interventions that are effective for people with dementia
- ensure continuity of care by minimising the number of staff involved in a person's care
- ensure that staff have appropriate communication skills to respond to the needs of a patient with dementia
- ensure that they work proactively and collaboratively with other members of the primary care team and with social care and that they are alert to visual, hearing and any other physical impairments of people with dementia
- help enable carers to work alongside staff and ensure that they are included in planning and decision making
- ensure that they are proactive in alerting the GP as to the effectiveness of any medication prescribed for the person with dementia
- be proactive in facilitating the discharge from hospital of the person with dementia, in particular ensuring that the administration of medication is not a barrier to discharge to the person’s normal place of residence.

Dementia-specific quality standards

- The service responds to need not age and ensures that older people with dementia are not discriminated against and that their specific needs are met.
- All staff receive basic level awareness training for dementia.
- The service is well integrated with other relevant services.
Crisis response

**Dementia-specific service elements**

The Provider shall:

- as a matter of routine, review an available care plan which should set out ‘steps to take’ for the care of the person with dementia in an urgent situation, together with any ongoing care arrangements the Provider should be aware of
- offer treatment that is sensitive to individual needs and wishes, fully involving the person with dementia and their carer. This includes addressing the challenge that may arise from communication difficulties experienced by the person with dementia by talking to someone who knows the person in order to identify triggers and underlying causes for behavioural disturbances and identify short-term actions that can be taken to alleviate discomfort or distress
- consider whether moving the person with dementia is in their best interests or whether they could be best cared for in their current setting and, wherever possible, aim to maintain the person in a familiar environment
- ensure that staff have appropriate communication skills to respond to the needs of the person with dementia
- enable carers to work alongside staff and ensure that they are included in planning and decision making
- have in place a local protocol with the ambulance service to reflect the needs of people with dementia

**Dementia-specific quality standards**

- Individuals with dementia are maintained and cared for in their existing environment whenever possible with support to carers to achieve this.
- All staff receive basic level awareness training for dementia.
- There is an appropriate risk management framework in place which is consistent with Nothing ventured, nothing gained Department of Health, 2010
- There is the appropriate use of antipsychotic medication in line with NICE/SCIE guidelines
Intermediate care, reablement and post-discharge support

Dementia-specific service elements

The Provider shall:

✓ enable people with dementia to complete tasks themselves building on existing skills and abilities
✓ have an assumption of capability rather than a presumption of incapacity for people with dementia
✓ work alongside family carers of people with dementia as partners in care planning and delivery
✓ provide rapid assessment of people with dementia who are living in the community and who are at risk of losing their independence and provide support to avoid unnecessary admission to hospital or care
✓ work with people with dementia to learn new ways of managing diminishing capacities and introduce people to appropriate services
✓ have access to specialists to address issues of medication review for people with dementia
✓ work with domiciliary and residential care workers to develop their skills and understanding of individual needs of people with dementia. Written materials shall be shared to provide a more holistic picture of the individual's needs and information about the person behind the illness. The use of life stories to travel with the person with dementia alongside their patient records should be encouraged.
✓ work with the person with dementia on treatment/rehabilitation goals and help to encourage the individual and their carer to accept services where previously there has been resistance
✓ minimise the number of changes in care setting for the person with dementia
✓ aim to return the person with dementia to a familiar environment as soon as possible.
Intermediate care, reablement and post-discharge support

Dementia-specific quality standards

✓ The service proactively includes patients with dementia.
✓ The service is integrated with community-based and hospital based mental health services.
✓ Discharge planning arrangements are effective and enable patients with dementia to leave hospital at the optimal time for them.
✓ The service works collaboratively with the residential care sector to improve skills in relation to the needs of people with dementia.
✓ All staff receive basic level awareness training for dementia.
✓ There is access to specialists with advanced level training in dementia.
✓ The service is consistent with guidance Intermediate Care - Halfway Home, Department of Health, 2009.
Residential care

Dementia-specific service elements

The Provider shall:

- ensure that there is a comprehensive and up-to-date care plan in place, ensure that all staff are aware of and can meet the needs set out in the plan and ensure that staff spend time getting to know the person with dementia and their family
- ensure that signage and environment are appropriate to the needs of people with dementia
- ensure that staff are trained to communicate appropriately with people with dementia and that they are treated with dignity and respect at all times
- ensure that there is a regular, scheduled programme of meaningful activities in order to stimulate and engage people with dementia according to individual needs, wishes and lifestyle
- work with primary and secondary care services to develop non-pharmacological responses to behavioural disorders and to ensure the appropriate use of antipsychotic medication in line with NICE/SCIE guidelines.

Dementia-specific quality standards

- Life story work is used to get to know the person with dementia.
- All staff receive basic level awareness training for dementia.
- There is access to specialists with advanced level training in dementia.
- Care plans are in place that reflect an individualised approach to maintaining well-being: green (proactive), yellow (reactive) red (contingency).
- There are positive relationships and open communication with NHS services to prevent unnecessary crisis admissions to an acute hospital or A&E department.
- Medication reviews are held regularly for all residents for whom antipsychotic medication has been prescribed.
- Family carers are included in care planning and care giving, if requested.
End of life care

These statements of requirement are applicable to a range of Providers, for example home care, community nursing, residential care and crisis response

Dementia-specific service elements

The Provider shall:

- ensure that people with dementia who are dying have equal access to palliative care services
- ensure that people with dementia have access to pain relief and access to hospice care
- ensure that where possible, the person with dementia who is dying is not moved from their usual place of residence in their last days
- ensure that any decision to move people dying with dementia into hospital or resuscitate them takes into account any expressed wish of or belief of the person with dementia and the views of carers
- support family carers to abide by the known wishes of the dying person
- help enable carers to work alongside staff and ensure that they are involved in planning and decision making.

Dementia-specific quality standards

- People with dementia who are dying are not moved from their usual place of residence in their last days where this is the person’s express wish or that of their carer(s).
- People with dementia have equal access to services such as palliative care, pain relief and access to hospice care.
Training resources

Social Care Institute for Excellence

SCIE has produced a range of training resources for care home staff, domiciliary care workers, registered general, mental and district nurses, general and community hospital staff, allied health professionals, social workers, ambulance service staff, community support workers and family carers

www.scie.org.uk/publications/dementia/elearning.asp
Let’s Respect toolkit

The Let’s Respect toolkit provides a range of materials to support care homes and home care providers in delivering good quality care for people with dementia.


Let's Respect Toolkit for Care Homes Published

The guide is primarily aimed at staff working in care homes who want to know about the mental health needs of older people in order to improve practice and standards of care. However, a lot of the information will also be useful to other care provider - for example, domiciliary care.

The information builds on the “3 Ds”:

- Delirium
- Dementia
- Depression

The layout of the guide is based on the journey of any person entering the care home “world” and therefore you can walk with them as they arrive at the home (“What do I see?”), and continue on their way through Life Story work and finally to end of life care.

Download a low resolution pdf copy
Resource tools

Windows of opportunity: prevention and early intervention in dementia

The “Windows of opportunity” tool describes a journey through dementia and identifies a range of interventions, which prevent an increase in need that may tip an individual into a more intensive level of service.

Care towards the end of life for people with dementia

This is an online resource guide produced by the NHS National End of Life Care Programme. It includes a six-step pathway, advice for commissioners, case studies, information for different care settings and suggestions about workforce education and training.

www.endoflifecareforadults.nhs.uk/assets/downloads/Dementia_resource___final___20101025.pdf
References

In developing this statement of requirements, consideration has been given to the following documents, among others, which commissioners may wish to review when developing their own statement of requirements for particular services for people living with dementia:

**NICE/SCIE National Clinical Practice Guideline No 42**
This guidance sets out the identification, treatment and care of people with dementia and the support that should be provided for carers within primary and secondary healthcare and social care.

**Optimising treatment and care for people with behavioural and psychological symptoms of dementia**
This guide has been designed to support health and social care professionals to determine the best treatment and care for people experiencing behavioural and psychological symptoms of dementia. It uses a simple stepped care model based on a colour-coded traffic light system to determine the best care for the person with dementia.
**Nothing ventured, nothing gained**

Nothing ventured, nothing gained provides guidance on best practice in assessing, managing and enabling risk for people living with dementia. It is based on evidence and person-centred practice and within the context of Living well with dementia: a national dementia strategy and Putting People First. The guidance is aimed at commissioners and providers in health and care across all sectors.


**National Dementia Declaration**

The National Dementia Declaration sets out seven outcomes that people with dementia and their family would like to see delivered. It provides a mechanism to engage organisations and individuals to deliver better care for people living with dementia. The declaration has been developed by the Dementia Action Alliance made up of 49 national organisations committed to improving the quality of life for people with dementia and their carers.

[www.dementiaaction.org.uk/info/3/national_dementia_declaration](http://www.dementiaaction.org.uk/info/3/national_dementia_declaration)