

Today, our tennis match will have three sets



Tell a story of how one simple question has enhanced the socialisation of many, who live with dementia. An example of a local contribution to attaining Sustainability Development Goal 3 - Promoting Health & Wellbeing for all ages



Participate in the National NZ Framework for Dementia care stocktake

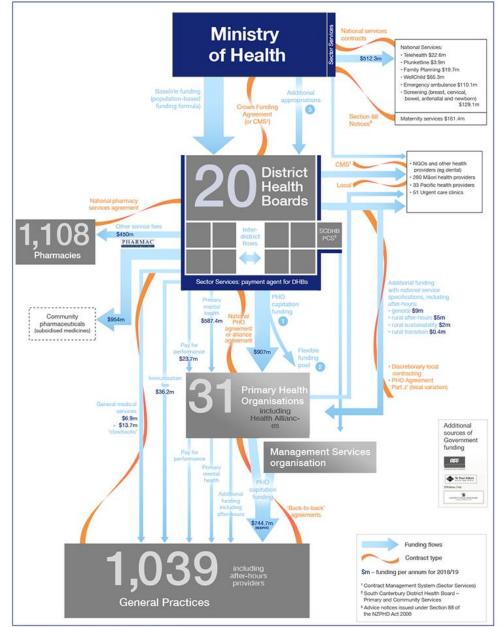


Start of a conversation about the role of nurses' roles in commissioning services

Service Planning & Integration Manager, Strategy Planning & Outcomes Team HVDHB



Primary Health Care Services Funding and Contracting

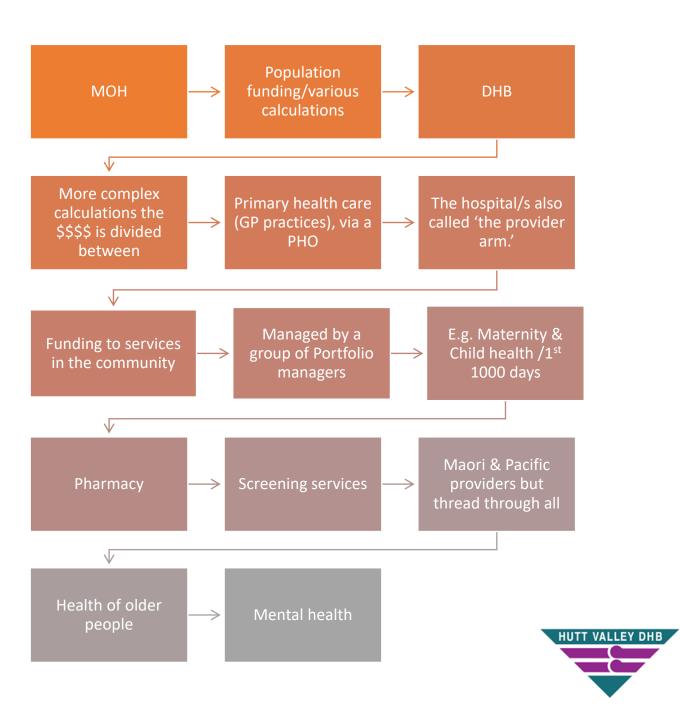


Portfolio Manager, Health of Older People, Planning & Funding team HVDHB



Primary Care Team, Service Commissioning, Ministry of Health

More simply described





Successfully attained a new role

Programme of work

- Contracts in aged residential care &
- Home & Community Support Services, NGO's.
- Projects such as Live Stronger for Longer (falls prevention)
- Dementia friendly Hutt Valley
- Reducing unnecessary admissions to ED from Aged Care

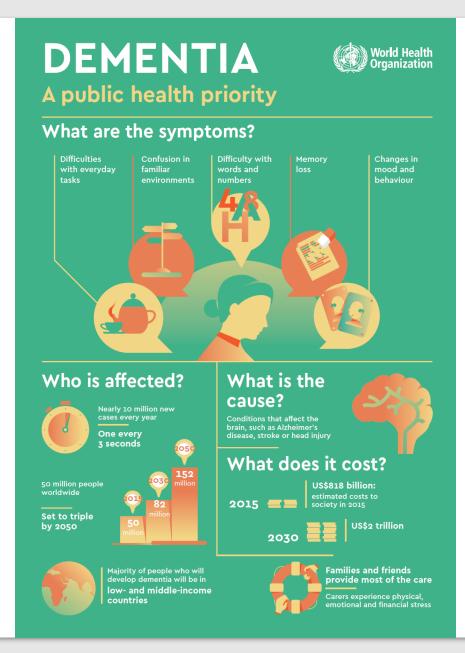
The Healthy Ageing Strategy (MoH 2016)



World Health Organisation Dementia

Risk factors -Modifiable so may reduce the prevalence by 10-20% (PHE 2016)

- Lack of physical activity
- Smoking
- Excessive alcohol consumption
- A diet high in saturated fat



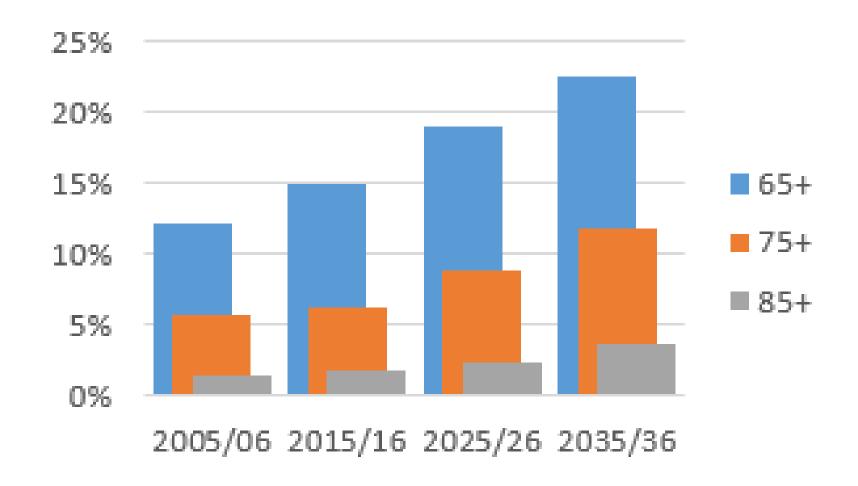
Forms of dementia

- Alzheimer's disease
- Vascular dementia
- Lewy Body Disease
- Fronto-temporal dementia

Risk factors

- Age
- Head injuries
- Pre-existing conditions including Parkinson's disease, Stroke, type-2 diabetes, high blood pressure

Percentage of NZ population in the older age group; MoH





The number of people in New Zealand with dementia is growing rapidly

More than 170,000 people are forecast to have dementia by 2050

102,015

2050

170,212



2016

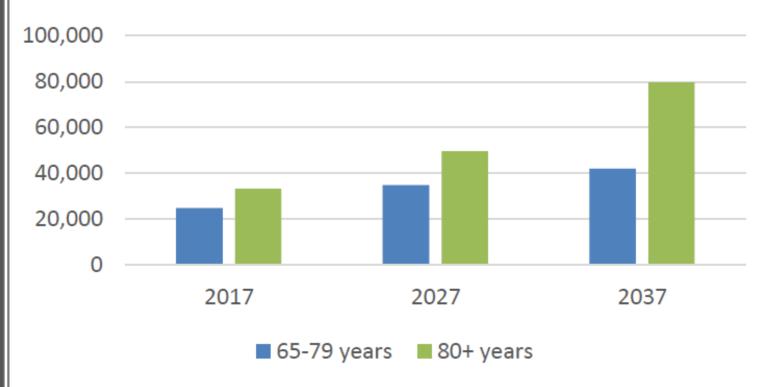
62,287

These latest forecast estimates are significantly higher than previous estimates

Source; Dementia Economic Impact Report 2016 Alzheimer's New Zealand (2017)

The impact of Dementia in New Zealand

Number of people with dementia in the NZ population aged 65+



Prevalence and severity graphs sourced from TAS 2017



Living with dementia in New Zealand

Early/Mild stage

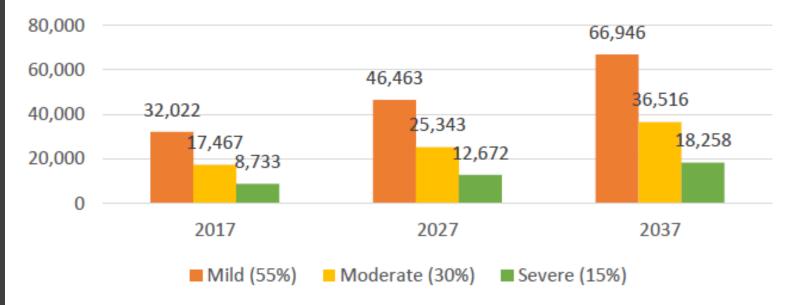
Difficulties in several areas, still able to function with minimal assistance.

Middle/Moderate

Difficulties are more obvious, need help with most tasks.

• Late/Severe – fully dependent on others

Severity of dementia in the NZ population aged 65+





Anyone for tennis? The First Serve September 2017

Hutt City Council

Advocate for family with a person living with dementia

Supporter of person living with dementia

Dementia Wellington

DHB HOP Manager

Wesley Community
Action

Woburn Home by Enliven Presbyterian Support Central Age Residential care

Wellington City Mission

Walter Nash Centre &
Wainuiomata
community hub
managers (community
facility)

Specialist Physician Younger onset Dementia CCDHB

Dept Internal affairs funding advisor

Sarah, who was living with dementia just wanted to play tennis.

First game rally....



Jim told his story of the difficulty of finding an appropriate socialisation programme for his wife, Sarah



Jim suggested a 'club house style of socialisation programme' the supporter had read about a range of models worldwide that were enabling social interactions for people with dementia



Jim had approached a range of local organisations – Hutt City council recognised the opportunity supporting their Seniors programme



It was acknowledged that a collaborative effort amongst key community organisations / stakeholders would be needed

First game of the first set is won!

- Good news City Council community hubs acknowledged they had the capacity to promote dementia friendly & provide socialisation space
- Dementia Wellington has a training and awareness raising contract remit and can support dementia friendly activities
- Wesley Community Action were planning a social space for older adults with cognitive impairment in their facility in Lower Hutt







Ideas for a Hutt Valleywide socialisation programme were developed by asking...





WHAT COULD A
SOCIALISATION
PROGRAMME LOOK
LIKE?

WHAT WOULD SUCCESS LOOK LIKE?





WHAT RESOURCES
CAN YOUR
ORGANISATION
BRING

WHAT ROLE WOULD
YOU ANTICIPATE
YOUR ORGANISATION
HAVING?

Ways to be a Voice to Lead as an.....

Individual

Profession

Multi-disciplinary team



Terms of reference for group;

- Provide a forum for people living with dementia & their care partners to co-design the development of socialising opportunities
- Facilitate communication between service providers to share knowledge, expertise and resources
- Provide each other with support and guidance with socialisation projects



Hutt Valley's Socialisation Group Focus



People in the early stages of dementia who do not meet criteria of are the 'right fit' for current day care programmes



Co-designing activities will include

Physical activity
Social engagement
Purposeful contribution



The spirit of collaboration and partnership are key

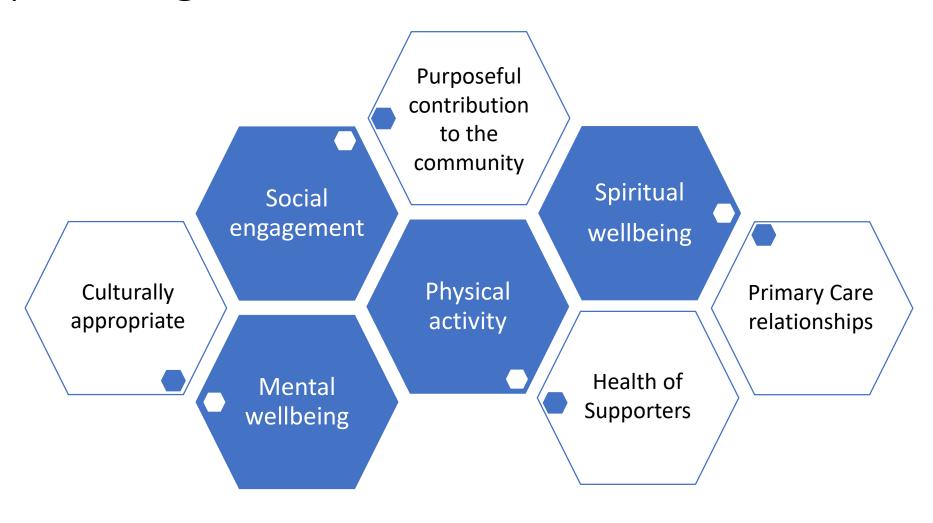


Remember not to loose why we met in the first place –



Sarah, who is living with dementia just wanted to play tennis.

Key to maintaining the health & wellbeing of people living with dementia are activities that:



Programme ideas



Walks



Lawn bowls



Tennis



Golf



Place to meet



Kitchen to cook in



Community gardens & planting projects



Sewing







Current Health Navigator roles



What makes good dementia day care? Feedback from dementia workforce, PLWD, their Carers and Supporters.

Living Well Clubs

(alternative name for day care/Respite)

Living Well Clubs can be in Aged Residential Care Facilities or at community locations

Dementia workforce

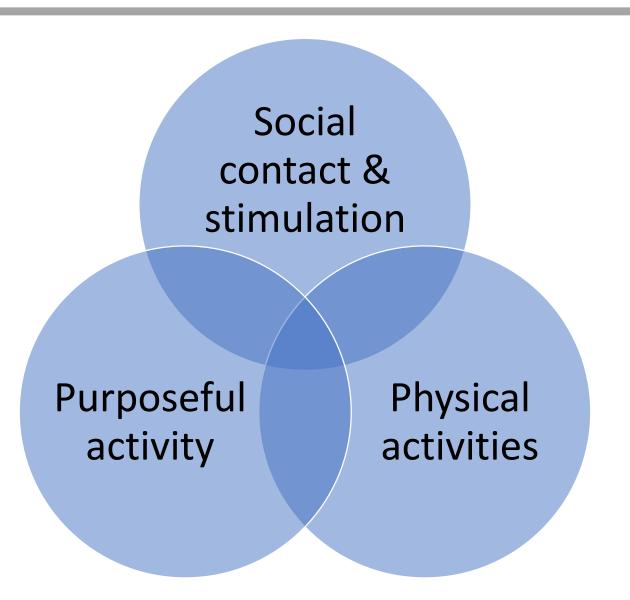
People Living with Dementia

Cares & Supporters

- 9 to 5 provision to support working families caring for PLWD
- Culturally appropriate
- Small groups
- Enjoy social activities
- Meet people
- Support that is organized
- Meaningful activities
- Physical activity
- Provide care to support the working day.
- Flexible respite options that include 'in home respite.'
- Easier planned respite options
- Transport
- Reassurance over quality of care



Good day care has



From Effectiveness of day services Age UK October 2011



Hutt Valley's Socialisation Group



Funding applications submitted for a volunteer buddy pilot, dementia friendly Hutt valley, Ageing Well group



Ageing well group pilot commenced



Use of day care funding and carer support



Action – use knowledge of community activities in HV to find three to be dementia friendly, provide a booklet of advice to support families to maintain social activates for PLWD



Cog' cafes with supporters at Mitre 10



Tennis Clubs and golf club awareness raising to support friends with living with dementia

Hutt Valley's Socialisation Group What next?

Assessment, diagnosis early intervention and ongoing support

Living Well

Meeting challenges to maximize wellbeing

End of life

The NZ framework for dementia care (2013)



Age Friendly Hutt Valley, focus on Dementia

NEW ZEALAND FRAMEWORK KEY AREAS	Whole Community	Primary Care	Healthy Ageing Sector, ARC, NASC, NGOs	Specialist Healthy Ageing Services. OPRS, OPMH
Awareness & Risk Reduction	Dementia Friendly Hutt Valley	Dementia Friendly workforce	Publicly available awareness raising information provided through social media, leaflets, presentations.	Workforce knowledge development
Diagnosis & Management Planning	Health Navigator Access to Carer support services. Advance Care Planning	Use of Cognitive Impairment & Dementia Healthcare pathway. Access to Carer Support services.	Flexible funding packages support individualised Living Well Plans include Young Onset Dementia	Oversight of Living Well plan
Living Well with Dementia	Current leisure & community activities are Dementia friendly	Individualised client owned Living Well Care Plans. Access to Carer support services.	Provision of specific therapeutic programmes Including Young Onset Dementia	Timely access, advice & guidance supporting Living Well plan. Living Well Clubs reflect Dementia Framework
Challenges to Well Being	Access to specialist advice	Review Living Well Care Plans	Review of Living Well Plan to support change in health status	Timely access, advice & guidance supporting Living Well plan.
End of Life	Access to palliative care planning	Support in palliative care planning. Review Living Well plan.	Review of Living Well Plan to support change in health status	Timely access to appropriate experts



There have been local conversations to acknowledge;

- Maori & Pacific People want to support their elders at home. But those supporters are often the bread winners too
- Day programmes that have succeeded for Pacific people have been provided through Pacific providers, pacific languages, food, music and faith are important
- Focussed support to whanau to understand the issues of wandering, changes in behaviour and manging and home safety
- Supporter stress can be very high and the feeling of isolation when caring, not knowing where to go
- The inclusion of Maori medicine to help maintain spiritual wellness is often overlooked

Source; Central Region Services programme, Supporting Older Maori & Pacific Peoples in the Central Region 2012



Hutt Valley NZ Framework for Dementia Care Stakeholder Group

Membership broadened to include clinicians, aged residential care day programme providers and links into older the people's mental health team

Meet quarterly with a focus on the implementation of the framework when the stocktake provides the priorities for localisation

Feeds into regional dementia group via Health of Older People portfolio manager

Many of the organisations continue their day to day work plans that started as a result of the Socialisation Group

Don't loose sight of why we came together

Sarah, who is living with dementia just wanted to play tennis

Stocktake of activities that are progressing the elements of the NZ Framework for Dementia Care

Five years since the framework was released



Key elements

Awareness and Risk Reduction

Assessment, diagnosis, early intervention and ongoing support

Living well

Meeting the challenges to maximise wellbeing

End of life

Stocktake contribution



Awareness & Risk Reduction

Does your employer provide education & training to you that includes healthy lifestyle messages to reduce dementia?

Record the best ways in which this education can be provided to you?

Living Well

Can you discuss examples of services that meet the social participation and support needs of:

- Young onset dementia
- Intellectual disability & dementia
- Pacific People with dementia
- Maori People who have dementia

Record the service and the key characteristic that makes it different from other services.

Stocktake contribution



Assessment, diagnosis, early intervention & ongoing support

Does the clinical team in your organisation develop care plans for people with dementia and their families and whanau?

Record a good practice example.

Can other providers also see the care plan?

Meeting challenges to maximise wellbeing

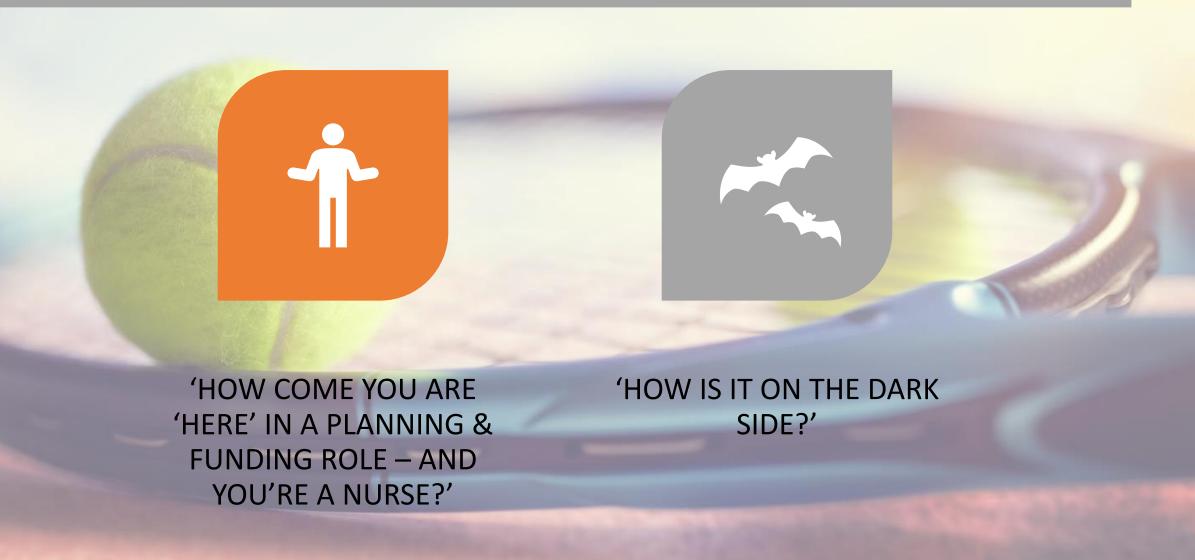
Can you share an example of support for the Supporters, of people living with dementia? Is there specific support for any of the groups below?

- Young onset dementia
- Intellectual disability & dementia
- Pacific People with dementia
- Maori People who have dementia

Record the service and the key characteristic that makes if different from other services.



Clinical nursing colleagues asked



Nursing process

- Assessment
- Diagnosis
- Planning
- Implementation
- Evaluation

McCann et al (2014) Nursing Times 110;48, 15-17

Nurses as Commissioners of services

Commissioning process

- Assess population health needs
- Plan services
- Implement & deliver services
- Evaluating outcomes

Nurses as commissioners of services

UK has recognised that an experienced nurse who participates in executive leadership position will provide;

- Care
- Compassion
- Dignity
- Quality
- Safety

Following a series of high-profile cases around poor care, Dept of Health's Chief Nursing Officer responded with a strategy where;

- Care
- Compassion
- Competence
- Communication
- Courage
- Commitment

Would be embedded as values in health service

Nurses as commissioners of services

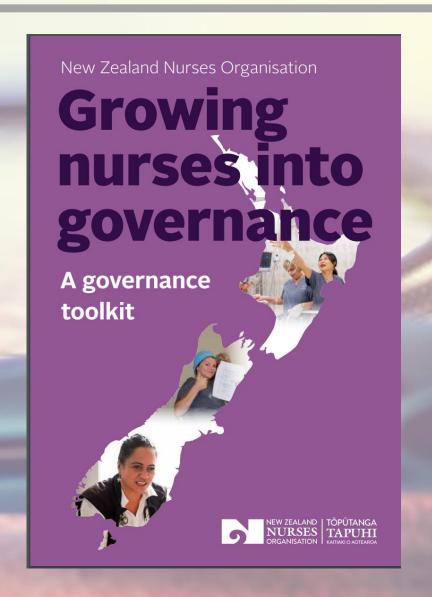
Are we devaluing our profession by being part of commissioning processes?

I really hope we have moved away from historic patterns of behaviour that then marginalise nurse's situation where the clinical credibility of Nurses is rebuffed by medical colleagues.



Growing Nurses into Governance

'Nurses have a grounded understanding of finance. Nursing service are always delivered under budgetary constrains yet every day nurses see the practical consequences of social inequality and understand why resources need to be allocated according to long-term impacts.'



Nurses as commissioners

Credible leaders

- Vision
- Presence
- Senior profile

They bring

- Leadership
- Knowledge of the quality agenda
- Governance
- Skills in relationship building
- An understanding of the patient perspective





References

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Are senior nurses on Clinical Commissioning Broups in England inadvertently supporting the devaluation of their profession?: A study of literature. Allen et al Nursing Inquiry 2016 23(2) 178-187

Nurses Role in commissioning services McCann et al (2014) Nursing Times 110;48, 15-17

