



Specialist Dementia Unit Improvement Programme

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Background and context

Across Scotland people are admitted to Specialist Dementia Units for further assessment or treatment of their symptoms associated with advanced dementia. In 2015, the Scottish Government identified 92 units with circa 1800 beds. *Dignity and Respect: Dementia Continuing Care Visits*¹, published in 2014 by the Mental Welfare Commission for Scotland concluded that “many people were receiving good quality care in a suitable environment” but also commented that “the care and/or environment in too many units is failing to meet acceptable standards.”

The Specialist Dementia Unit Improvement Programme (SDUIP) is being led by Healthcare Improvement Scotland. This programme is high profile and continues to be a key aspect of the third dementia strategy covering the period 2017-2020 as part of Commitment 7².

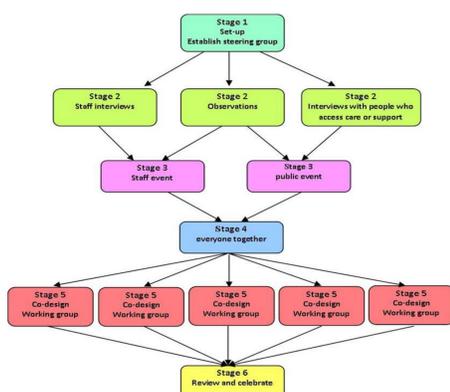
Specialist Dementia Units are not homogenous across Scotland. The four units we are working with have been identified to reflect this diversity (see Figure 1).

Improvement approach

Experience-based co-design (EBCD)³ was selected as the basis for the improvement methodology and provided the key framework to our approach (see Figure 2). The principle stages of ‘interviews’ (renamed conversations), observation and involving staff, relatives and carers were adhered to in all the sites.

- A partnership has been formed between Alzheimer Scotland, the Care Inspectorate, Healthcare Improvement Scotland, NHS Education for Scotland and Scottish Care to support the delivery of the programme.
- Within each site, a steering group involving all key stakeholders has been established to oversee the work.
- EBCD enables the experiences of those providing and using services to be captured. This process generates and prioritises the opportunities for improvement. The model was adapted for the dementia unit context.
- Implementation of change ideas is being introduced through use of the model for improvement⁴.

Figure 2: Experience-based co-design model



Website: ihub.scot

Figure 1: Location of the SDUIP units

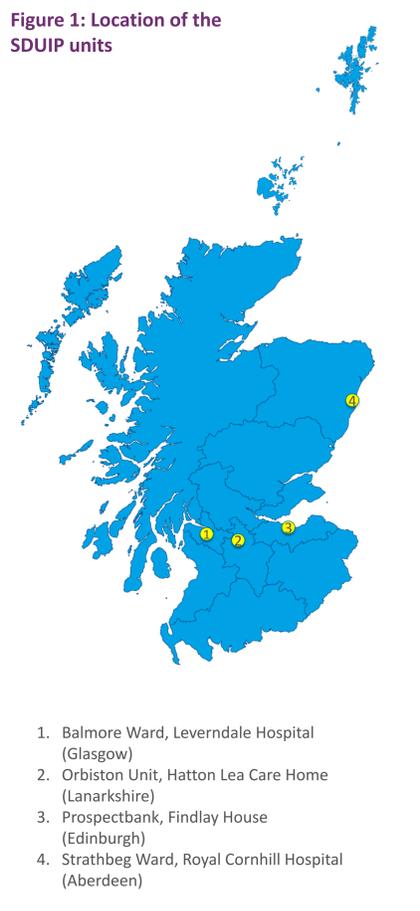


Figure 3: Observations under way in Prospectbank Unit



In practice

- Across the four units, 47 hours of conversations with relatives, carers and staff were captured, 144 hours of practice observed and 49 audit documents analysed (See Figure 3).
- Experiences of the patients in the units have been gathered through observation and use of dementia-focused communication tools, for example Talking Mats⁵.
- This data was analysed thematically and 122 key themes were identified.
- Following this, across the four units, 12 key priorities for improvement were identified by staff and relatives.
- Units have begun developing their change ideas and taking forward improvements.

Conclusion

- The SDUIP is providing a platform to raise the profile of Specialist Dementia Units and understand the challenges of carrying out improvement work in this setting.
- The four demonstrator sites are diverse and represent a broad cross-section of the types of Specialist Dementia Units across Scotland.
- The demonstrator sites are using the EBCD model. There has been extensive learning around the challenges of carrying out improvement work in this setting and how we protect the rights of people with dementia who may lack capacity or the ability to be involved in improvement using traditional methods of engagement.
- The process is highlighting areas for improvement that have not been previously identified.
- Work remains ongoing to continue taking forward change ideas.

References:

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3. Point of Care Foundation. *Experience-Based Co-Design Toolkit* (2013) accessed online 3 April 2018; www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/
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5. www.talkingmats.com/