2013 WaMH in PC Bursary

Personal Details	_
Name of Individual / service / organisation apply for the bursary:	
Crossroads Care Bridgend	
If you are successful, WaMH in PC will require you to:	
 Showcase your Grant Project at a WaMH in PC event Provide a short abstract describing your Grant Project for inclusion on the WaMH is website 	n PC
Please tick the box if you are happy for your Grant Project to be promoted in this manner	
Application Form for 2013 WaMH in PC Bursary	
Please fully complete all sections. We are unable to process your application if details are missing.	Э
Application Categories Please tick the appropriate boxes to indicate which category/categories you are applyir under. Note: If you are applying for more than one category please tick the relevant boxes	ng
Category 1 – To improve the experience of dementia patients and their carers.	
To apply for a category 1 bursary, individuals and/or organisations must:	√□
Work within, or be associated with, the provision of primary care mental health services in Wales	\ \
Category 2 – to support the local delivery of Part 1 of the Mental Health (Wales) Measure 2010	
To apply for a category 2 bursary, individuals and/or organisations must:	√□
Work within, or be associated with, the provision of primary care mental health services in Wales	
Category 3 – to raise awareness of mental health, or impact on mental wellbeing or	
improve mental health promotion.	
To apply for a category 3 bursary, applicant(s) are invited from services and organisations from both within and outside the NHS and must:	√□
© Evidence a demonstrable link and benefit to primary care mental health in Wales	

Details of Project

1. Title of proposed project for which you are seeking funding: Dementia Outside Care (DOC)

2. Project Summary- Crossroads Care are aiming to achieve regional development of our work with primary care services and other specialist providers, to deliver holistic approaches with those who are elderly mentally ill (EMI) carers and cared for. Initially we will offer training in 'person centred care' approaches and increase choice and control through information, signposting, advocacy and support from point of diagnosis throughout the illness.

The aim of our project is to improve the experience of dementia patients and their carers by:

- a) Demonstrating and disseminating person centered approaches to care while providing respite and other services.
- b) Outreaching to carers through primary services (general practitioners and memory clinics).
- c) Develop improved communication, relationships, knowledge, understanding and wellbeing of carers and cared for, interagency working, and coordinated approaches to meet needs.

The aim of this first stage project is to train thirty senior staff, care managers and EMI specialist care coordinators from the Crossroads Care Valleys and Vale Consortium. The senior staff will cascade the training to Care Workers through formal training sessions, supervision and observed client interaction. This project will purchase specialist DVD sets that will also be used in each area to cascade the learning to all our care support workers. Once trained, the Care Workers will be able to promote the Dementia Care Matters person centered care and support family carers through conversation and role modelling. Through our assessment, review and carers' groups, we will promote the DVDs and offer carers the opportunity to borrow them to watch when convenient to themselves. We aim to increase carers understanding of providing a stimulating and inclusive approach to providing care, involving the person with care needs in their own care plan where ever possible. These will also be made available to general practitioners and other agencies for promotion in work environments.

The outcomes of our project

- a) Carers will increase knowledge and understanding will report enhanced relationships, understanding and communication between carers and cared for
- b) 30 Crossroads Care staff attend Bridgend facilitated regional training and disseminate person centered care approaches.
- c) Carers report benefit to using person centered care approaches.
- d) Carers report improved experience, behaviours and / or relationships.
- e) A minimum of 30% of carers report using new tools and techniques, responsive to the personal needs and preferences of each individual.
- f) Regional consortium member share these approaches.

The total cost of this project is £3000.

This project will meet and 'improve the experience of dementia patients and their carers' as a precursor to further specialist development and specialism in dementia care and the creation of a direct link to primary care services across the region of south and west Wales.

This evidences the three hallmarks of positive relationships as it meets the mental health and general wellbeing of all the people of Wales, empowering people to take control of their own recovery through self-management and good practice by engaging with individuals.

3. Background to the proposed project:

Applicants are required to detail, in this section:

There is a need for this project as:

- 1) Statistics identify increasing numbers of those caring for the elderly mentally ill. Health, personal and financial implications of an aging population demonstrates an increasing need for support and efficient and effective preventative interventions to improve outcomes.
- 2) Training is required for professionals and unpaid carers in order to maintain health and well-being.
- 3) Crossroads Care workers have identified the significant strain and stress that can be experienced by individuals caring for those who are elderly mentally ill. Examples of care to the detriment and neglect of carers own health are common and can lead to crises.
- 4) The Valleys and Vale consortium have a vision to share best practice with the current 560 EMI cared for and all future carers of those elderly mentally ill, across the south and west Wales region.

Dementia UK 'estimates that there are now 683,597 people with dementia in the United Kingdom. This represents one person in every 88 (1.1%) of the entire UK population (ref. http://www.psige.org/psige-pdfs/Dementia_UK_Summary.pdf). One in 14 people over 65 years of age and one in six people over 80 years of age has a form of dementia (Ref: Demography: Alzheimer's Society). In Wales, the alzheimers society report a significant increase (please reference http://www.alzheimers.org.uk/site/scripts/directory home.php?directoryID=15) in those with dementia over the Crossroads Care Valleys and Vale consortium health board areas of Bro Morgannwg, Cardiff and Vale, Hywel Dda and Cwm Taf rising by an average of 27% over the consortium by 2021.

A report into the prevalence and cost of dementia prepared by the Personal Social Services Research Unit (PSSRU) at the London School of Economics and the Institute of Psychiatry at King's College London, for the Alzheimer's Society

Recommendation 3: Improve dementia care skills

Dementia care training should be made a core and substantial part of the training curriculum for nurses and social care staff. National Minimum Standards must be developed to include dementia specific requirements on dementia care training.

What evidence/research do you have which supports the need for this project to be implemented?

Recommendation 4(of the report above): Develop community support People with dementia need improved home care support packages, including low-level support to retain their independence and dignity.

'People with dementia can stay at home for longer with their families if the right support input in place.'

What existing services / strategies have informed the development of your project? Our specialist colleagues in the Crossroads Care in the Vale EMI scheme advocate and will support development of a 'person centered' approach.

The Carers Measure / Mental Health Measure Wales requires 'preventative interventions.' This will 'improve emotional well-being and mental health outcomes and reduce the risk of the individual's condition worsening.'

The services are 'expected to develop and maintain good working relationships with other relevant services to support individuals in their social and physical health needs to benefit their mental health. '

Section 8 of the carers measure identify training for each authority's own staff on their role in successfully delivering the strategy. Crossroads Care are working toward supplementing the

work and funding to 'increase in the community based capacity of carers organisations to help and support carers', in which developing our vision for developing links with primary care services will multiply outcomes. In the consortium working together with Local Health Boards we will offer economies of scale, dissemination and progressive support across a region,' providing resources to develop and sustain a local carers infrastructure or strengthening any existing carers infrastructure for authorities to effectively engage.' (References http://www.assemblywales.org/ms-ld7876-em-e.pdf)

How will your project link into and support/enhance new/existing services/strategies?

Carers Strategies (Wales) Measure and local Authority Health and Well-being and Community strategy recognises the synergy and benefit to all elements of well-being including social financial, accommodation, education and work, physical, medical, spiritual etc. The strategy for older people in Wales and the more recent Aging Well agenda will support the to active ageing, encouraging a holistic approach to activity and positive social, community and intergenerational engagement for older people in Wales Existing CSSIW registered, Crossroads Care are responding to new Estyn guidance to ensure mental health and well-being in included in inspection criteria and deliver on holistic needs

and all support the Time to Change Wales agenda in reducing stigma and our working towards creating dementia friendly community approaches to inclusion.

What benefits will be achieved through the implementation of this project?

This project will underpin stage two for creating holistic relationships for support from the point of identification and diagnosis in primary care and throughout the course of the illness. Carers and others will have learning opportunities through loaned Dementia Care Matters DVD's and through our staff in their own community and environment.

We are taking a learning opportunity to carers that they would not be able to access but for the support we will deliver in their own home with an opportunity to discuss through care workers regular planned visits.

The relationships between care givers, both paid and unpaid, with the individuals who are elderly mentally ill will improve, along with the individual's psychological well-being and productive behaviours, as they show decreased agitation, improved sleep patterns, maintenance of self-esteem through opportunity for self-expression.

We will assist our current 560 carers to maintain relationships with understanding, respect, stimulation and choice, using new tools and technique, responsive to the personal needs and preferences of each individual and remain healthier spiritually, physically and mentally. There will be an on-going sharing and development of proactive approaches and additional value added approaches to support carers of the elderly mentally ill on a consortium regional basis .

4. Purpose of the proposed project:

Methods Crossroads Care would use to develop our project

Evidence of the three hallmarks of positive relationships:

• Trust – demonstration of honesty, competence and openness Crossroads Care consortium members are:

Deliverers of specialist projects monitored and evaluated for outcomes CSSIW registered

Croquet (based on PQASSO) level 3 quality standard competent

Transparent and report to procurers, grant funders and charity commission for transparency of all transactions and implementation.

- Good Communication a meaningful interaction between living beings.

 Crossroads Care has been working in person centered approaches, delivering good practice by engaging with individuals, developing honest, non-judgmental relationships with the cared for, their families and carers and working alongside carer and cared for, to empower choice to maximise potential. Continuous improvement research has identified the work of David Sheard (Dementia Care Matters). This has 'produced some significant results.' 'Being a Star' incorporating the 'butterfly approach' is 'an evaluated training programme which really can transform cultures of understanding and care, and achieve a direct impact on the daily lives of people living with dementia and their carers.
- Person Centredness seeing the client/ practitioner as a person, sharing power and responsibility

'Implementing Dementia Care Matters approach enables carers and domiciliary care workers to be a 'care partner' with the cared for individual. Journeying together, we will be able to evaluate the impact, demonstrate the outcomes and responses of beneficiaries, and enhance their quality of life. A sample training material can be accessed at www.youtube.com/user/dementiacarematters.com

5. Planned Outcomes for dissemination, sustainability and evaluation

How will you evaluate the success of the project?

Crossroads Care will undertake monitoring and evaluation linked to anticipated outcomes a) Carers will report on base line after intervention relationships / understanding and/or communication

- b) Numbers of those trained and disseminated to will be recorded.
- c)Carers reports to the benefit to using person centered care approaches will be recorded
- d) The numbers of carers reporting using new tools and techniques will be recorded.
- f)Records of consortium member sharing of these approaches will be recorded.

What are the main outcomes and successes?

Main outcomes will be:

Informed staff and carers

Baseline data for development of person centered care, continuous improvement, links through primary and secondary health services to outreach and support carers from the point of diagnosis.

How have you actively raised awareness of your project?

Crossroads Care will promote through statutory and voluntary services to:

Promote awareness

Facilitate and disseminate learning to staff and carers

Share resources

Ultimately outreach and link support through GP's and memory clinics

6. Supporting Evidence / References

www.youtube.com/user/dementiacarematters.com

ref. http://www.psige.org/psige-pdfs/Dementia_UK_Summary.pdf References http://www.assemblywales.org/ms-ld7876-em-e.pdf

7. Commencement Date:

01/04/12

8. Completion Date:

30/12/12