SECOND EDITION

Excellence in Dementia Care

Research into Practice



Edited by Murna Downs & Barbara Bowers

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Praise for this book

"Awareness of dementia is at its highest and this reflects the importance of the condition for individuals, their families, health and social care services and the wider community. While we have made significant advances in the care for people with dementia and their families, there is much work yet to be done. This book provides a fantastic framework in which to set our understanding of dementia and to take things forward."

Alistair Burns, Professor of Old Age Psychiatry, Faculty of Medical and Human Sciences, University of Manchester, UK

"This edition of Excellence in Dementia Care provides an important, new and comprehensive overview of the state of the art in caring for the diversity of people with dementia. The international authors and global focus have created a unique textbook that will help educators, students and the broader care community to better understand the challenges and opportunities related to dementia care. I am particularly excited about this new edition because it goes beyond the individual and the family by showcasing efforts to create dementia-friendly communities and adapt physical design, offers a critical perspective on how dementia is portrayed in the media, literature and the arts, tackles issues related to whole person assessment, care planning and care transitions, and addresses the unique concerns of living with young-onset dementia. This volume is a welcome addition to the dementia care toolbox and will prove valuable to a very diverse international audience."

Dr Robyn I. Stone, Senior VP for Research, LeadingAge, Washington DC, USA

"The depth and breadth of this book invites all involved in practice, research and policy to reconsider dementia as something other than a degenerative brain disease and to shift their perspective to the person. The voice of the individual living with dementia, their family, care partners and collaborating professionals are all reconsidered within the context of our current evidenced-based knowledge. This book deeply challenges the status quo of dementia care and sets an expectation for so much more."

Anna Ortigara, Organizational Change Consultant, PHI PolicyWorks, USA

"This text will meet the needs of registered and preregistered student nurses working with people with dementia. It skilfully discusses all aspects of dementia drawing on the work of a number of experts in the field. The book considers the biological, social and physiological impact of the condition. It presents a balanced discussion of current research and thinking on the treatment of the condition and the care of dementia sufferers and their families. New and updated chapters help ensure readers of this text gain a holistic understanding of contemporary issues around this distressing and life-limiting condition."

Nichola Barlow, Senior Lecturer Adult Nursing, University of Huddersfield, UK

"The first edition of this book was a vitally important and a key text in its field combining the talents of multiple experts in dementia and older people's care. It is pleasing to say that the second edition is equally as pivotal in gathering key expertise and providing the reader with the essential and important insight to provide forward-thinking care. The text takes forwards the concepts of dementia-friendly communities and explores the crucial topics of care in acute wards and end of life care. The text is a comprehensive book that would be useful to many health and social care professionals across a range of diverse organisations within the NHS, Voluntary Sector and other private and public health sector providers. Anyone working with older people and people with dementia and their carers should have access to a copy within their organization or I would strongly encourage individuals to purchase their own copy. I feel this is an essential text for anyone teaching health and social care courses from undergraduate to postgraduate students across a range of health and social care education settings. The sound evidence base to each chapter allows people working with individuals with dementia and their families to have access to the evidence quickly and easily, which is ultimately useful to practitioners and staff working on the ground. I feel this text is long overdue and of immense value to the field."

Donna Doherty, Senior Lecturer, Faculty of Health Sciences, Staffordshire University, UK

"Bravo to the authors of Excellence in Dementia Care! They have created a must read guidebook for those providing care to persons experiencing cognitive changes and their families. This collaborative effort focuses on successful provider strategies encompassing topics across the dementia journey and is filled with spot on, relevant, and timely information. Best of all, this work is loaded with real case studies to help translate knowledge to practice, making it a true resource for all practitioners."

Suzanne Bottum-Jones, MA, Wisconsin Alzheimer's Institute, School of Medicine & Public Health, University of Wisconsin-Madison, USA We would like to dedicate this book to:

Sweens and her Tommy Tomkins for their inspiration
Christopher Robin for his generosity

And all people with dementia and their family members.

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Cathy Henwood leads on the Bradford Dementia Friendly Communities project. The project has developed tools to enable organizations to review their approach to people living with dementia and write action plans. She has recruited organizations ranging from a local pharmacy, branches of Lloyds Bank and the Co-operative Supermarket to community centres, churches and Gurdwaras to get involved in making their organizations dementia friendly. She is now developing a community-based approach, working with Bradford City Council and other organizations, to empower communities to be more accessible and inclusive to people living with dementia. Cathy is passionate about involving people with dementia in the process of making the aspiration of a dementia-friendly Bradford District a reality. Her work is jointly funded by the Joseph Rowntree Foundation and Bradford City Council.

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Rachael Litherland has worked with people with dementia since 2002. With a background in psychology and advocacy, she developed and managed the national "Living with Dementia" programme for the Alzheimer's Society (2000–2006). This included providing leadership on issues relating to the involvement and support of people with dementia and supporting people with dementia in service and information development, campaigning, and self-advocacy. Rachael is now a director with Innovations in Dementia CIC, a national community interest company. Innovations in Dementia works on a range of positive projects with people with dementia, including Shared Lives, circles of support, work on dementia-friendly communities, and the Dementia Engagement and Empowerment project (DEEP). The work of the organization is centred on the voices and experiences of people with dementia.

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Pam Schweitzer has many years' experience developing reminiscence work both in the UK and internationally. In 1983, she founded the Age Exchange Theatre Trust and Reminiscence Centre and remained its Artistic Director until 2005. For the last decade she has been actively developing reminiscence projects for people with dementia and their carers, including developing and coordinating a Europe-wide project, "Remembering Yesterday, Caring Today". In 2000, she was awarded an MBE for services to Reminiscence and she continues to direct the European Reminiscence Network. She is an Honorary Research Fellow of Greenwich University and continues to lecture, train, and write on all aspects of reminiscence.

Blossom Stephan completed her training in psychology and mathematical statistics at Sydney University in Australia. Her PhD was in the field of clinical neuropsychology, undertaken at the School of Psychology at Sydney University. She completed her postdoctoral training in epidemiology at Cambridge University, at the Institute of Public Health and Primary Care. Blossom was recently appointed as a lecturer within the Ageing, Health and Society Research Group at the Institute of Health and Society, at Newcastle University, UK. Her research focuses on issues related to risk prediction of neurodegenerative diseases. She is currently working with several large epidemiological studies conducted in the UK and internationally to integrate risk factor research across multiple disciplines (e.g. genetics, metabolic, nutrition, cardiovascular, and lifestyle) to identify not only those individuals at risk of cognitive decline and dementia, but to determine how different risk and protective factors interact to promote successful ageing.

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John Young has over 20 years' experience as a consultant geriatrician. He is Professor of Elderly Care, University of Leeds and Head of the Academic Unit of Elderly Care and Rehabilitation, Bradford Teaching Hospital Trust. His research interests focus on stroke rehabilitation, intermediate care services, frailty, dementia and delirium, and he has received major grant awards, predominantly from the National Institute for Health Research. He is National Clinical Director for Integration and the Frail Elderly.

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Hannah Zeilig is a senior research fellow at the University of the Arts, London and also a senior research associate at the University of East Anglia. Her work explores the intersections between literature, culture, and ageing. Hannah coordinates a multidisciplinary team comprising poets, artists, a psychiatrist, dementia care workers, and researchers in health care and the humanities to find ways of using the arts in educating and supporting the dementia care workforce. This project uses innovative methods (such as comics) to challenge some of the stigmas surrounding dementia and to encourage new ways of thinking about "dementia". She also curates an international event on representations of age(ing), "Mirror Mirror" at the London College of Fashion. She is currently critically reviewing the role of the arts in dementia care across the UK.

Foreword

Estimates suggest dementia affects nearly 36 million people worldwide, and the prevalence of dementia is expected to rise as those over 65 increase to 66 million by 2030 and over 115 million by 2050 (Alzheimer's Disease International 2010). Alzheimer's disease (AD) accounts for approximately 60–70% of all dementias and is the most common type of age-related dementia (Fratiglioni et al. 2000; Barker et al. 2002). In 2010, the global cost of dementia was estimated to be over US\$600 billion, about 1% of the world's gross domestic product (Alzheimer's Disease International 2010). Care for the increasing number of people with dementia will strain world governments and public health systems. Dementia and related disorders signify a global public health crisis of indescribable proportions, and demand a massive integrated, multidisciplinary, and global response.

Over the past few years, there has been a most welcome commitment by individual nations to develop and implement dementia strategies or plans. These have provided a framework for discussion and action aimed at turning the tide on this challenge. Moves to create dementiafriendly communities, to build health and social care systems that are fit for purpose, and increase investment in cure and care research are a big step in the right direction. Though given the financial challenges that dementia and related disorders presents the community, there is now a clear need for a networked global response to this public health problem. In addition to re-evaluating assumptions, ideas, and approaches to evidence-based care and support, we must improve the process by which we communicate community needs and best practices across the globe. The field must articulate a unified and integrated vision recognizing that the problem of dementia is complex. No single entity or country has the capability, resources or knowledge to solve or mitigate the challenges we face today and in the future: the need for new multinational partnerships in care, support, and research is critical. The leadership shown by the G8 in holding a dementia summit in London in December 2013 has provided an exciting platform to stimulate a conversation around global solutions for this global problem, and it is one that we ought use to maximum effect.

Dementia is an illness that affects the brain and eventually causes a person to lose the ability to perform daily self-care. All areas of daily living are affected over the course of the disease. Over time, a person with dementia loses the ability to learn new information, make decisions, and plan the future. Communication with other people becomes difficult. People with dementia ultimately lose the ability to perform daily tasks and to recognize the world around them.

Dementia also affects family caregivers. Seventy per cent of persons with dementia live in the community, and family caregivers are largely responsible for helping them to remain at home. Family caregivers must be vigilant 24 hours a day to make sure that the person with dementia is safe and well. Providing constant, complicated care to a person with dementia takes a toll on family caregivers. Family members and other unpaid caregivers of people with dementia are more likely than non-caregivers to report that their health is fair or poor (Alzheimer's Association 2009).

This second edition of *Excellence in Dementia Care* addresses critically important social and interpersonal challenges experienced when facing dementia. The personal challenges that care partners and family members experience in many instances go beyond the financial to highly stressful and exhausting contributions of unpaid caregiving. These challenges exist not only due to the nature of the disorder itself but also in large part to a lack of national and global coordination of best practices in care planning, support, long-term care, education, and accessibility of information on resources. Research is key to driving innovation and improvements in dementia care and support, though it is of little value if it is not implemented in practice to reach the people that could benefit. This publication responds directly to this need for compilation and dissemination of best practices in dementia care and provides the type of blueprint that will put the international community on the path towards addressing the most significant health challenge facing our global ageing population, that of dementia.

Doug Brown and Maria Carrillo

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Preface

Since the publication of the first edition of this book (in 2008), much has been written about dementia care and what should be done to improve it. I am honoured to be asked to write a preface to this second edition. My dementia, diagnosed very early, has thankfully not progressed very much. My involvement in projects, teaching, and discussions has however increased, and takes up a great deal of my spare time. I am sure that the many new developments and ideas since 2008 have informed much of the reformation of this valuable book.

As someone involved in the work to produce the Department of Health's "Living Well with Dementia: A National Dementia Strategy for England" (2009), I was so pleased that both carers and people with dementia were involved in reference groups to ensure that their ideas were included. Three years after the publication of the Strategy for England (and several other national strategies in the UK and Europe followed), the Prime Minister issued his Challenge on Dementia: "delivering major improvements in dementia care and research by 2015". As we move towards 2015, more work has been done and particular areas of concern and policy have been highlighted.

In this climate of moving on, there is an even greater need for this scholarly work to be updated. New ways of working and different expectations have led to a variety of initiatives and research projects in this changing situation. The sub-title "Research into Practice" points to the value of investigative work and the possibilities of continuing improvements in dementia care.

When I worked as a professional in assessing and – with the help of the team I worked with – improving the lives of those with dementia and their carers, I could not imagine such a growth in purpose as there is now. There is a long way to go but creating "dementia-friendly communities" is now a recognized way of increasing awareness and encouraging inclusion of those affected by dementia in the social framework of our daily lives. As those affected by dementia gain courage at speaking out, the acceptance of their problems and the development of ways of helping are improving the lives of those around us.

Dementia is not fussy in choosing victims. People in all walks of life and all ethnic groups develop dementia but their culture may have a different interpretation of what is happening and why. A chapter in the book provides help with these very important issues.

Chapter 5 looks at a very important issue – representation of people with dementia can affect perceptions and lead to increased stigma. There are still those in the community who have not knowingly met anyone with an early diagnosis. The idea that such a person can contribute to education, campaigning, and general understanding may be difficult to believe but can be a very powerful aid to banishing former prejudices.

One omission noted in the first edition was the fact that younger people with dementia were not specifically given much attention. This has been rectified by a special chapter on this group and how dementia may have a different effect on the lives of themselves and their families. Other omissions mentioned in the introduction to the first edition are dealt with in Part 2, "Conceptualizing dementia care". In Chapters 8 to 11, a bio-psycho-social approach offers a new

way of looking at the capabilities of the person with dementia and at approaches in care that respect their individual personhood.

In Part 3, important areas also covered are new to many people's way of working. Best practice care recognizes that people with dementia need support and cognitive intervention. Important ways of working are outlined, including: life-history work that assists person-centred care; recognition that behaviour changes are a form of communication; health and well-being of the individual and its significance; and recognition of the importance of relationships between people with dementia and their families, who themselves need support.

Part 4 looks at care pathways in the person's journey with dementia. The stages and types of help appropriate are covered. An area of understanding of end-of-life issues is covered in Chapter 26. This is part of recent campaigns and hopefully people with dementia will get the best care available as others do at the end of life.

Altogether, this second edition breathes new life into the ways of achieving the admirable objectives of the various recent plans and strategies. Many of the challenges of care of people with dementia are experienced by people with other disabilities. Person-centred approaches are important to everyone.

A document published in the same year as the Dementia Strategy (but not as often quoted) by the Equality and Human Rights Commission is equally applicable to the overall objectives of this book. The Foreword, after quoting Eleanor Roosevelt, "Where, after all, do universal rights begin? In small places, close to home . . . ", goes on to say, "A decent quality of life where people are able to live with dignity and respect is a basic human right. For millions today and many millions more in the future, only effective care and support has the power to translate that right from an aspiration into an everyday reality" (From Safety Net to Springboard: A New Approach to Care and Support for All Based on Equality and Human Rights, 2009).

Daphne Wallace September 2013

Preface

My mother lived and died with Alzheimer's disease and during the years that she lived with us, I learned a great deal about the disease, about health services, adult and social services, and the voluntary sector as we were necessarily involved with all of them. I discovered a parallel universe. At one point, we were in touch with over thirty professionals and others *simply* because my mother had Alzheimer's disease. During that time, I learned about the way people with dementia were seen and treated and particularly I learned much about people's attitudes, whether professionals, care workers or the general public. Thus this book has huge resonance with me.

During the years that I looked after my mother, I valued the consultation, the discussion, and feeling part of the team that cared for my mother, as in effect I had become my mother's memory and her voice. There were many positives and some negatives, but the positives far outweighed the negatives. Though my mother's memory was increasingly damaged by her condition, she was able to comment with insight on her situation, she was able to think and analyse. Her memory caused her to forget what she had said but at the time she said what she did it was important and pertinent. After a member of staff and a volunteer had come to see us about using the sitting service, she commented: "What a lot of good friends we have". On being reminded that it was the day she went to the day centre, she said: "I like going there, don't I?" and a comment, which continues to haunt me, towards the end of her life in an acute ward – "I don't like it here".

As I reflect on my mother's experience and that of our family, I believe that ultimately dementia can only be defeated by research but meantime there is an imperative to care for those with dementia as well as we possibly can, which is why I so love and approve the assertion in the title of the goal of this book – *Excellence in Dementia Care*.

Research into dementia means looking for the cause or causes of dementia, looking for a cure or cures, looking to prevent dementia, and *looking for the best ways of caring for those with dementia now.* Research into the care of those with dementia is vital but it is only a first step for both dissemination and implementation of the research is necessary to make a difference. Techniques of best practice that are evidence based need to be disseminated and implemented to make life better for those with dementia and their carers. They then need to be monitored and evaluated following their use. Perhaps routinely it should be asked: "What did we do well?" and "What could we do better?"

There has been increasing research into the best ways to care for people with dementia but there has been a shortfall in the implementation of such research findings. Evidence-based approaches for improving dementia care exist but who is implementing the findings and who should implement the findings? The contributors to this textbook (how dry that sounds for such an inspiring book) are well respected, highly regarded researchers in their fields with published peer-reviewed work who have shown that by putting into practice their findings, quality of life for people with dementia can be enhanced. The researchers are so obviously on the side of those with