Introduction

In October 2012 the Dementia Action Alliance launched the Right Care: a call to action to create dementia-friendly hospitals. All acute trusts in England were asked to make a public commitment to becoming dementia-friendly. 164 acute and non-acute trusts made that commitment with 88 submitting Action Plans and joining the Dementia Action Alliance (DAA).

The Charter is the second phase of the Right Care. It provides high level principles of what a dementia-friendly hospital should look like and suggested actions for self-assessment tools that hospitals can take to fulfil them.

Why the Dementia Action Alliance is leading this work

Because of its core role, its strategic position and its membership, the DAA can:

• identify, assure and bring together resources in one place
• liaise with relevant stakeholders, including strategic clinical networks and the CQC
• offer advice, brokerage and endorsement
• share good practice
• facilitate and support the embedding of dementia-friendly principles in hospitals.

Purpose of the Charter

The Charter is for people with dementia, their carers and hospitals in England. Its purpose is to:

• Act as a short, accessible and visible statement of the principles that contribute to a dementia-friendly hospital
• Provide a set of expectations that people with dementia and carers can have when they access a dementia-friendly hospital
• Build on the foundation offered by the Staff, Partnership, Assessment, Care and Environment (SPACE) principles by including the latest developments and signposting resources hospitals can use to embed dementia-friendly principles in their organisations
• Offer a framework to assist hospitals in their self-assessment against the dementia-friendly principles and assist them to develop / update a DAA Action Plan on the DAA website (dementiaaction.org.uk)
Dementia-Friendly Hospital Charter

We are committed to becoming a dementia-friendly hospital. This means that we commit to ensuring that you can expect:

**Staffing**

1. **Everyone that you come in contact with to have been trained in dementia to an appropriate level for their role.**

   Notes for self-assessment:
   - ‘Dementia awareness’ as a standard component of the organisation’s induction programme
   - Staff have undertaken appropriate training e.g. that all staff are Dementia Friends and staff on wards and in departments receive the required specialist training

2. **Staff to have a positive attitude towards people with dementia and their carers and to be knowledgeable and skilled in meeting your needs.**

   Notes for self-assessment:
   - Hospitals’ corporate values reflect the needs of people with dementia and those that care for them
   - Evidence of carer assessment
   - Appropriate staffing levels
   - Offering flexible visiting and overnight stays
   - Enabling carers to assist at mealtimes

**Partnership**

3. **To be treated as an expert partner in your care and to be involved and consulted whilst you are in hospital and afterwards.**

   Notes for self-assessment:
   - Using the Triangle of Care
   - Sharing information between care homes and hospitals on changes in care plan and medication
   - Actively involving care homes in discharge arrangements
   - Joining your Local Dementia Action Alliance (local stakeholder network with action plans)
**Assessment**

4. To have a comprehensive and specialist assessment and access to specialist care when you need it.

   Notes for self-assessment:
   - Existence of a dedicated dementia team
   - Assessments conducted that includes information about a person’s physical health, mental health and their emotional and social needs

**Care**

5. To have a care plan that shows an understanding of you as a person and reflects your needs and preferences.

   Notes for self-assessment:
   - Recording spiritual, cultural needs, sexual orientation, and wishes regarding end of life care when requested
   - ‘This is me’ tool for people with dementia receiving professional care
   - Butterfly Scheme
   - Pain assessment tools for people with advanced dementia
   - Noting changes in behaviour and taking steps to identify cause
   - Staff continually prompting people to drink and eat to reduce risk of urinary tract infection, dehydration and malnutrition
   - Taking measures to reduce falls such as bed rails, lowering beds, pressure alarms and crash mats for patients most at risk

**Environment**

6. To be able to find your way around the hospital and that the care environment supports your well-being and independence.

   Notes for self-assessment:
   - Signage that uses pictures and text
   - All the toilet doors being painted a single distinctive colour
   - Wider use of King’s Fund’s dementia friendly environmental assessment tools
Plus

7. That the people who manage this hospital continuously see improving the quality of care for people with dementia and their carers as being very important and have ensured that the right resources and governance structures are available to support staff to deliver care that is dementia-friendly.

Notes for self-assessment:

**Governance**
- Dementia lead within the trust
- Dementia Champion on each ward
- Dementia steering group
- Regular dementia care updates to the Board
- Arrangements with contractors and agency staff providers

**Human Resources**
- Carer leave
- Combating stigma towards employees affected by dementia
- Making reasonable adjustments to enable people affected by dementia to continue working

8. There is a system for routinely gathering meaningful feedback on how people with dementia and their carers experience our services. If you have a concern about your care you will be given a named contact and get a comprehensive, timely and personal response.

Notes for self-assessment:
- Regular focus groups with people with dementia and their carers who have used the services
- Participation in the National Audit for Dementia Care
- A complaints policy which is accessible to people affected by dementia
Resources

This is an indicative list of the range of resources currently available. It is not exhaustive neither is it quality assured.

Alzheimer’s Society - This is me
http://alzheimers.org.uk/thisisme

Alzheimer’s Society - Dementia Friends
https://www.dementiafriends.org.uk/

Alzheimer’s Society – Dementia-Friendly Communities

The Butterfly scheme
http://butterflyscheme.org.uk/

Bradford Dementia Group
http://www.bradford.ac.uk/health/career-areas/bradford-dementia-group/

Commissioning for Quality and Innovation (CQUIN)

Dementia Action Alliance
http://www.dementiacaoaction.org.uk/

15 steps challenge formerly NHS Institute
Higher Education England

King’s Fund EHE programme – Environments of care for people with dementia

NHS England - Strategic Clinical Networks (Dementia)
Royal College of Psychiatrists: Memory Services National Accreditation Programme (MSNAP) and Psychiatric Liaison Accreditation Network (PLAN).

Here are links for these projects, and AIMS and Quality Mark:

http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/memoryservices/memoryservicesaccreditation.aspx

http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/liaisonpsychiatry/plan.aspx

http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/psychiatricwards/aims.aspx

http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/elder-friendlyqualitymark.aspx

Royal United Hospitals Bath - Dementia Charter mark

http://www.rcpsych.ac.uk/pdf/Dementia%20Charter%20Mark.pdf

Royal College of Nursing - Triangle of Care self-assessment tool, development programme and SPACE principles for dementia Care

http://www.rcn.org.uk/development/practice/dementia/triangle_of_care

RCn http://www.rcn.org.uk/development/practice/dementia/rcn_development_programme

http://www.rcn.org.uk/development/practice/dementia/commitment_to_the_care_of_people_with_dementia_in_general_hospitals

University of Worcester - Care fit for VIPs

http://www.worchester.ac.uk/discover/9980.html