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 initiative. It provides high level principles of what a dementia-friendly hospital should look like and recommended actions that hospitals can take to fulfil them. In the Prime Minister’s challenge on dementia 2020, one of the key aspirations is to create dementia friendly hospitals.

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 minimum set of standards 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 (RCN 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 (dementiacao.org.uk)
Dementia-Friendly Hospital Charter

We are committed to becoming a dementia-friendly hospital and this means that we are working to ensure:

If you are a person with dementia or their carer you can expect:

Staffing

1. **You receive care from staff appropriately trained in dementia care.**

   Notes for self-assessment:
   
   - ‘Dementia awareness’, e.g. Dementia Friends/ Tier 1 training, is a standard component of the organisation’s induction programme and is achieved within first 3 months of appointment
   - All staff have undertaken appropriate dementia training commensurate to their role
   - Dementia training is an integral part of the organisations training and development strategy

2. **Staff have a positive attitude towards you and your carer and are knowledgeable and skilled in meeting your needs.**

   Notes for self-assessment:
   
   - The organisation commits to making ‘reasonable adjustments’¹ for people with dementia and those that care for them to promote and ensure equality e.g. environmental changes, clear explanations, accessible information, and managing issues of consent.
   - Appropriate staffing levels and skill mix are determined to meet the physical, psychological and social needs of people with dementia

Partnership

3. **You, with the involvement of your carer, have choice and control in decisions affecting your care and support whilst you are in hospital and on discharge.**

   Notes for self-assessment:

¹Equality Act (2010)
• Offering flexible visiting, including overnight stays, in line with the needs of the person with dementia
• Enabling carers and family to assist during protected mealtimes
• Use the principles of the ‘Triangle of Care’ to enable assessment of carer need, support and involvement in care
• Sharing information between hospitals and discharge providers e.g. care homes, support services, GP’s, with your permission and according to the relevant laws
• Actively involving care homes and family carers in discharge arrangements

Assessments

4. You have access to an accurate assessment of your needs including cognitive changes, and are referred for further assessment if required.

Notes for self-assessment:
• Assessments are carried out which rule out other treatable conditions such as delirium or depression
• Access to a liaison service or dedicated dementia team that specialises in the assessment and management of dementia and older people’s mental health
• Assessments include information about physical health, mental health, emotional and social needs

Care

5. You receive care that is person-centred and responsive to your individual needs.

Notes for self-assessment:
• Profiles or passports are used to provide a short summary of individual needs including biography and personal preferences e.g. ‘This is me’
• Availability of activity which offers stimulation, engagement and supports rehabilitation e.g. dining together; physical, music, and creative therapies
• Changes in behaviour are investigated and steps taken to identify possible causes and alleviate distress
• Pain assessment tools are used for those with advanced dementia
• Staff encourage and support hydration and nutrition
• Use of mental capacity assessments, best interest decisions and advance plans/directives where appropriate
• Participation is enabled, with the involvement of carers where appropriate, in a review of needs and preferences when circumstances change

Environment

6. You are able to find your way around the hospital and the care environment supports your well-being and independence.

Notes for self-assessment:
• Signage that uses pictures and text that is hung at a height where it can easily be seen
• All the toilet doors being painted a single distinctive colour and the toilet seats and rails are in a colour that contrasts with the walls and floor
• Pictures/objects and or colours are used to help people find their way around
• Seating areas are provided in wards, departments and along corridors
• Wider use of King’s Fund and other environmental assessment tools

Governance

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

Notes for self-assessment:

Governance
• A senior dementia lead within the trust
• Clinical Dementia Specialist Lead(s) and champions
• Dementia steering group
• Estates strategy incorporates dementia-friendly design principles
• Regular dementia care updates to the Board
• Contracts with contractors and agency staff providers specify how they will uphold the principles of this Dementia-Friendly Hospital charter
• Membership of your Local Dementia Action Alliance

Human Resources
• Consideration of carer leave for staff caring for a person with dementia
• 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 the hospital’s services. If you have a concern about your care you will be given a named contact and receive 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, working with outside partners where appropriate
• Participation in the National Audit for Dementia Care
• A complaints policy accessible in an appropriate format to people affected by dementia
• Patient Advice and Liaison Service
• Participating in the DAA Impact Survey
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.dementiaaction.org.uk/
Johns Campaign www.johnscampaign.org.uk
15 steps challenge formerly NHS Institute Higher Education England
The King’s Fund EHE programme – Environments of care for people with dementia and EHE environmental assessment tools
NHS England - Strategic Clinical Networks (Dementia)
Royal College of Psychiatrists:
Memory Services National Accreditation Programme (MSNAP)
http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/mem oryservicesaccreditation.aspx
Psychiatric Liaison Accreditation Network (PLAN)
http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/liaisonpsychiatry/plan.a spx
AIMS
http://www.rcpsych.ac.uk/workinpsychiatry/qualityimprovement/qualityandaccreditation/psychiatricwards/aims. aspx
Quality Mark
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:
SPACE principles and self-assessment tool:
http://www.rcn.org.uk/development/practice/dementia/commitment_to_the_care_of_people_with_dementia_i n_general_hospitals
RCN development programme; Transforming dementia care in hospital
http://www.rcn.org.uk/development/practice/dementia/rcn_development_programme
University of Worcester - Care fit for VIPs
http://www.worcester.ac.uk/discover/9980.html