

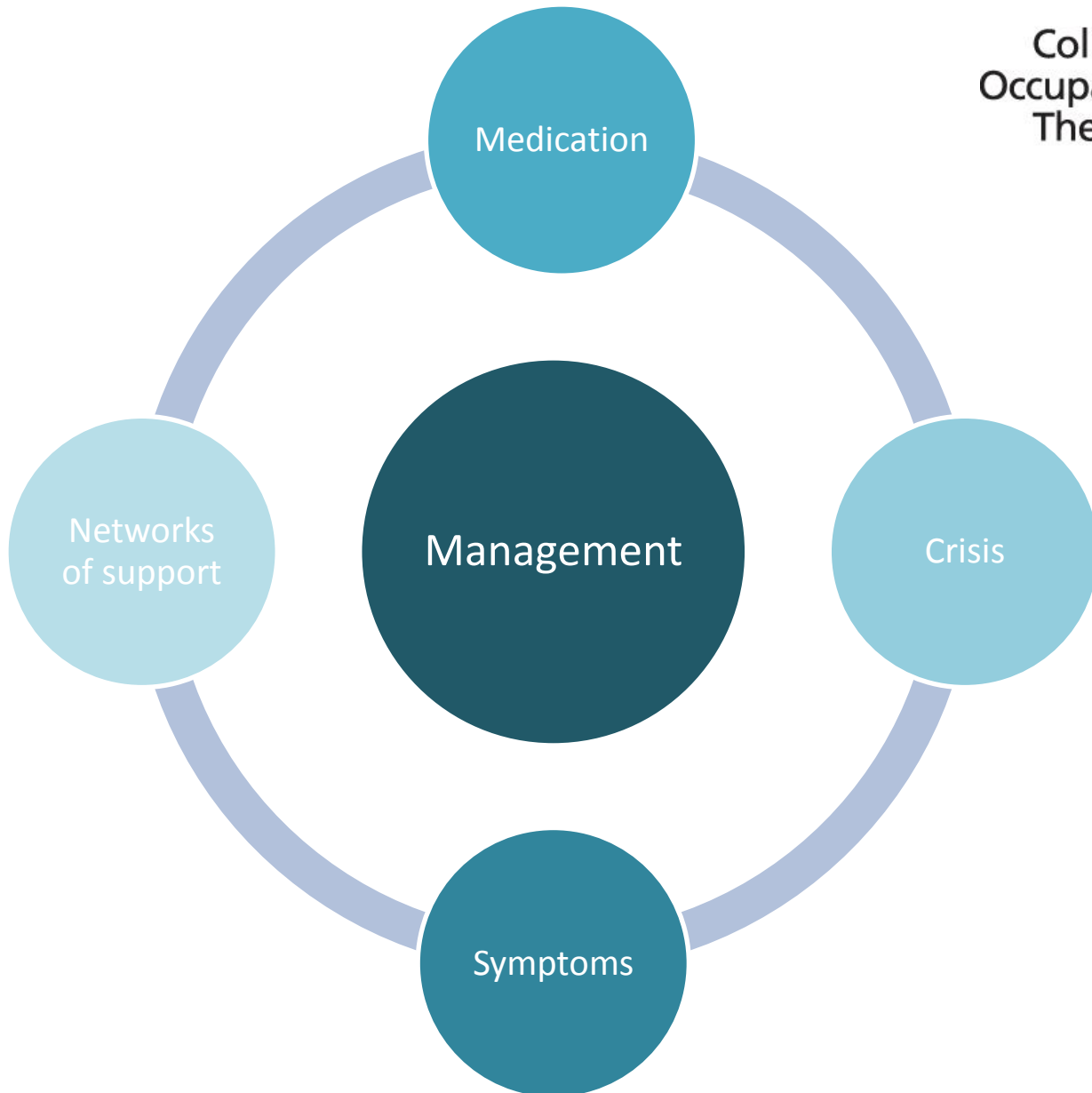


# Living well with dementia - addressing the aspiration



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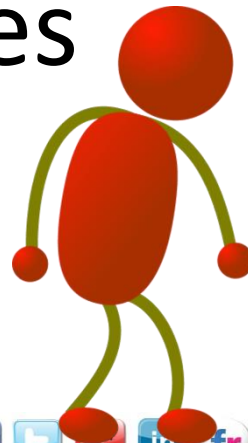
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# How do we shift the focus?



People come in different shapes  
and sizes....with different lifestyles,  
beliefs and values



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# Outcomes



Outcomes are the most important aspect to any health or social care involvement with people and their families. Outcomes should be measured through the difference made to a person or family's life.

1. Gathering information about the **wishes and aspirations** of the person and family (i.e. what does the person want for their future, perhaps in relation to being happy, healthy, being in a relationship, making friends, participating in family life, living independently, dying well etc.).
2. Establishing the priority areas (occupations)
3. Assessment of the priority occupation(s) is undertaken and outcomes refined into SMART goals.
4. Interventions / therapy / advice etc. to achieve the goals is undertaken.
5. Evaluation includes review of the outcomes and steps towards the outcomes

# Example: TOM

Tom's Aspirations: Stay in my home and continue to go to the pub.

Outcomes: what this means for the person	Steps towards outcomes	Indicative actions: What will be done and who will do it?	Resources (including frequency)
<p><b>For Tom to communicate with a range of people.</b></p>	<p><b>Communicating needs to home care staff:</b>            Within one month, Tom will communicate his needs including when he is hungry, thirsty, feeling unwell or in pain to home care staff.</p>	<ul style="list-style-type: none"> <li>• The occupational therapist will determine what cues Tom uses to indicate his needs and share these with all visiting health and social care staff.</li> <li>• The occupational therapist will consider Tom's daily routines and support his access to different activities of interest to him and which encourage communication with others.</li> <li>• The Care Provider will ensure the same three staff visit Tom.</li> </ul>	<p>The occupational therapist will visit and promote suitable occupations for Tom as well as monitor Tom's package of care for 6 weeks to ensure it is established. Care staff will visit twice a day to monitor Tom's health and wellbeing. They will keep a daily record.</p>
	<p><b>Communicating meal choices with staff at the pub:</b>            Within one month, Tom will communicate with the staff at the pub to order his lunch (and if desired to have general conversation).</p>	<ul style="list-style-type: none"> <li>• Occupational therapists will adapt a menu for Tom – large print and visual cues- to be kept and used at the pub.</li> <li>• With Tom's permission, the pub staff will be informed about how to support Tom's communication with them</li> </ul>	<p>Four sessions by the occupational therapist with Tom at home and in the pub over the next three weeks to trial strategies and review.</p>
<p><b>Tom will be able to continue visiting his local pub for lunch.</b></p>	<p><b>Leaving home and getting to the pub:</b> Tom will leave his house at lunchtime to walk to the pub within two months.</p>	<ul style="list-style-type: none"> <li>• The occupational therapist will order grab rails to be positioned at the front door of Tom's home and place a visual cue for Tom to remember his keys and mobile phone.</li> <li>• Tom's son will activate power of attorney and set up an account to pay the pub for lunch.</li> <li>• Home care staff will check that Tom has his keys in his pocket and phone about his person each morning.</li> <li>• The staff at the pub will contact Tom's son if they have concerns / notice changes in Tom or he fails to come for lunch.</li> </ul>	<p>As above. The occupational therapist during these sessions will also liaise with Tom's son and carers.</p>



# Could asking about someone's wishes and aspirations be a quick win



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