

THE SOUTHEND ON SEA DARBY & JOAN ORGANISATION LIMITED

Dementia Care

Policy Statement

This organisation recognises that a significant number of its residents might have some form and degree of dementia, which might change or progress during their period of residence. Other residents might develop the signs and symptoms of dementia after admission. Our homes strive to achieve the same high standards of care for all of its residents with dementia. It also recognises that dementia is an illness in its own right and that people with dementia have specific needs requiring, in turn, specific strategies in response.

Aim of Policy

This policy is intended to set out the values, principles and strategies underpinning the organisation's approach to people who have some form of dementia.

Principles

1. Our homes follow principles of person-centred care in assessing and addressing the needs of its users with dementia.
2. It also attempts to see the person with dementia as a whole person — not just someone who has a label of dementia attached to them.
3. This organisation's policies on equality and diversity apply to its users with dementia as they do to all others. People are not to be excluded from any aspect of the service provision as defined in the Statement of Purpose because they have been assessed as having dementia in addition to other needs.
4. This organisation requires its staff to treat people with dementia with respect at all times and to value their dignity.
5. Our homes work closely with informal carers and relatives in assessing and addressing the needs of the person with dementia.
6. It also recognises that people with dementia have a right to express their wants and wishes and to take their own decisions according to their capacity to do so.
7. Our homes comply with the provisions of *the Mental Capacity Act 2005* in respect of the decision taking required by or on behalf of anyone with dementia.

Assessment, Diagnosis and Reviews

1. Our homes work closely with local medical services to ensure all residents are properly and appropriately diagnosed and assessed.
2. It ensures that the health of all residents who have a diagnosis of dementia is regularly monitored and reviewed.

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3. It pays particular attention to ensuring that the medication prescribed to residents with dementia is monitored and regularly reviewed.
4. Our homes recognise that residents might have different forms of dementia and will be at different stages in the progression of the illness. It recognises that the effects of the illness will therefore vary from individual to individual and that a differential approach to each person's needs should always be taken.
5. Care Strategies
 1. Our home recognise that no single strategy is sufficient and that most with dementia will need a combination of approaches that might involve the prescribing of appropriate medicines and drugs, focused social care and support and in some cases specialised psychological interventions. All interventions need to be developed as a whole and in relation to one another.
 2. Our home use pharmacological interventions in response to behaviours that challenge only when these are appropriate and do not impair the person's sense of well-being. They are never used to restrain or control the person unnecessarily. It ensures that clinical guidelines are strictly adhered to in any prescriptions made.
 3. Our home therefore offer in response to the range of residents' needs a range of interventions and programmes that commonly aim to maintain the capacities of people with dementia and improves their sense of wellbeing and quality of life. These are carefully selected to meet each person's assessed needs.
 4. Our home work to ensure that all residents with dementia are never socially excluded because of their dementia and are able to participate fully in the life of this home and in the community.
 5. Our home provide a range of adaptations and aids to help residents with dementia negotiate their way around the premises and gardens as freely and independently as possible. It is always reviewing their effectiveness and seeking cost-effective ways of making improvements.

Reference

National Institute for Health and Clinical Excellence and Social Care Institute for Excellence (2007)
Dementia a NICE-SCIE Guideline on Supporting People with Dementia and Their Carers in Health and Social Care . National Clinical Practice Guideline No. 42.

The organisation aims to ensure each new member of staff receives training in Dementia Care Awareness within the first 6 months of commencement of employment with refresher training carried out every 2 years.

This policy will be reviewed annually