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Improving hospital care for people with dementia

Alzheimer's Society Fix Dementia Care

www.alzheimers.org.uk/fixcampaign

What is the problem?

- Dementia accounts for 42% unplanned acute medical admission amongst older people (Sampson, et al., 2013).
- A majority of carers think a hospital stay had a negative effect on the symptoms of dementia. (The Alzheimer's Society report 'Counting the cost: Caring for people with dementia on hospital wards' (2009))
- People with dementia remain longer in hospital than other people who go in for the same procedure.
- Discharge to a care home becomes more likely and antipsychotic drugs are more likely to be used.

Hospital Liaison Dementia Support Workers

Provide information and support around diagnosis and dementia, support plans for discharge and signposting to community services post-discharge.

Side by Side (SbS) Hospital Service

A volunteer led service to reduce loneliness and isolation in hospital.

Dementia Crisis Prevention Service

Three Multi-Disciplinary Teams including clinical staff, community nursing supported by two support worker posts.

Objectives

- improved patient experience
- reduced hospital stay and re-admissions
- reduced loneliness in hospital
- support for the carer
- timely discharge

Evaluation

The Hospital Liaison Service has been evaluated by the Open University.

The SbS model is currently being evaluated by the Charities Evaluation Service.

There has been an internal NHS evaluation of the Dementia Crisis Prevention Service.

Positive signs from our pilot studies show that these services can:

- Help to improve quality of discharge.
- Reduce length of hospital stay.
- Reduced emergency attendance by 47%
- Reduce in patient spells by 27%
- Reduce number of GP visits by 43%
- Each SbS service reaches around 500 people a year.

Questions

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