



# Supporting seamless unscheduled care for dementia patients

## CAV & WAST Partnership Bevan Exemplar project



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## Bevan Commission's Foundations for the Future Model of Health and Care include:

- Building resilient and resourceful people & communities
- Reducing waste across health & social care
- Integrating care and tackling inequalities
- Using data and technology to support system change

Feedback from initial consultations from multiple partners told us:

- Unscheduled care process can be complex & can cause added stress to people affected by dementia
- Issues with long & difficult handovers causing delays in care, treatment and discharge planning
- Over-stimulation from ambulance & hospital emergency department environments are not conducive to the needs of the person with dementia

# Project Outline



Ymddiriedolaeth GIG  
Gwasanaethau Ambiwlans Cymru  
Welsh Ambulance Services  
NHS Trust



Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

This Welsh Ambulance Service Trust (WAST) and Cardiff & Vale (CAV RPB) collaboration project aimed to:

- **Phase 1:** Research and stakeholder engagement to map existing process
- **Phase 2:** Consider improvement initiatives
- **Phase 3:** Environment modifications including therapeutic interventions and dedicated quiet spaces
- **Phase 4:** Implement and roll out improvement, collect and monitor feedback
- **Phase 5:** Full implementation, evaluate outcomes and sustainability planning

# Foundation year's key objectives:



ADAPTATIONS TO EMERGENCY  
ENVIRONMENTS TO REDUCE DISTRESS  
AND OVERSTIMULATION



MAPPING THE HANDOVER PROCESS TO  
SUPPORT SMOOTHER TRANSITIONS  
BETWEEN STAFF



INCREASING AWARENESS AND USE OF  
BIOGRAPHICAL TOOLS, SUCH AS THE  
*READ ABOUT ME* DOCUMENT IN CARDIFF  
& VALE



DELIVERING TARGETED TRAINING  
OPPORTUNITIES TO BUILD STAFF  
CONFIDENCE AND CAPABILITY IN  
DEMENTIA CARE

# Anticipated benefits:



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- Smarter handovers mean effective movement of the individual through care planning pathway
- Person-centred care provided by skilled staff
- Prevention of avoidable distress through improving physical spaces and environments
- Reduced pressure on the system through effective and smart planning

# Delivery



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## Preventing hospital admissions

Utilise data sets to build clear understanding of the footfall of people living with dementia in unscheduled care

Mapping existing services and initiatives which may divert or avoid ED admission. Engage with services to discuss dementia case mix and explore potential joint working and potential improvements

## Efficient handover

Review handover process

Explore systems for areas where flagging and communication between services could be improved

## Process Improvement

- Improving use of biographical tools
- Improving handover timeliness and efficiency
- Increase training opportunities
- “What Matters” conversations & patient surveys to map patient experiences
- Improving physical spaces and environments
- Where possible, having quiet spaces
- Improving interactive and social environment
- Reducing time spent, where possible in ambulance and emergency department
- Utilise Dementia Care Mapping in wards
- Efficient discharge planning

Co-production

Joint learning

Toolkits

Communication

Digital solutions

# Outcomes

Read About Me  
distributed  
200

Emergency  
Ambulance  
changes  
5

Ward  
Environment  
changes  
2

Patient Experience  
Feedback  
80

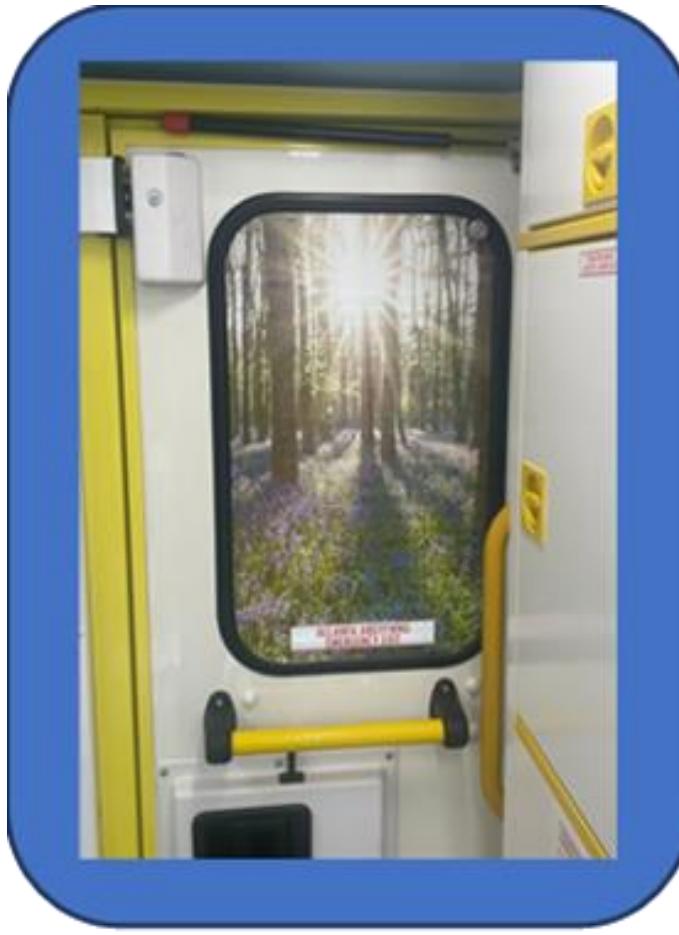
WAST staff training  
workshops  
18

ED Staff training  
9

E-learning video  
views  
135

Engagement sessions  
(inc Lived Experience)  
22

# Example of dementia friendly ambulance



## Interventions included:

- Opportunities for music
- Pictures of local areas on windows/cupboards
- Reminiscence therapy tablets

# Window stickers for spaces without natural sunlight



**Social interventions could include :**

- Activities, arts and crafts, music.



# Impact



Better understanding  
of patient experience



Increased staff  
education



Improved service  
efficiency



Development of tools  
and resources

# Conclusions

- Better WAST-ED relationships enable clearer, timely handovers
- Biographical tools help staff provide person-centred care
- Training empowers staff to spot signs of confusion
- ED confirms cognitive issues are addressed and patients moved to dementia-friendly areas

# Next steps



Continue to network and build together



Present findings across Wales



Scale and Spread



Continue to measure impact

# Thank you

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