

# Dementia Strategy

2025 – 2028







# **Contents**

Foreword	03
Our Vision	04
Introduction	05
What is Dementia?	06
National and Local Context	07
National Perspective	8
Our Strategy	9-18
Monitoring Our Success and Conclusion	19
References	20

## **Foreword**

#### **Phil Bolton – Executive Chief Nurse**



As Chief Nurse I am extremely proud to be able to introduce our new Dementia Strategy. We will all be affected by dementia at some stage of our lives, and I am sure many of us either know someone, care for someone or have come into contact with someone who lives with this condition. It is estimated 982,000 people in the UK have dementia and these numbers are likely to increase year by year. I feel it's our responsibility to have a clear plan and strategy outlining how we will best prepare and equip our staff to deliver outstanding high quality evidenced care to our patients, their families and carers regardless of their diagnosis. It's important we develop a strategy that helps people to live well with dementia.

We are fortunate to have our own Admiral Nurse and a Dementia Team here at SFHT, but I believe it is everybody's role to ensure they have an awareness and the skills to support and care for all patients with a dementia diagnosis within our organisation.

#### Dr Steve Rutter - Lead Geriatrician

The number of people living with dementia in our communities rises each year and it is not a surprise therefore that the numbers of people with dementia being admitted to hospitals in the UK is also increasing at a rapid rate: the number increased from 210,000 in 2010/11 to 405,00 in 2017/18. This represents a 93% increase.

Approximately 1 in 4 hospital beds are occupied by people living with dementia and 25% of all frail and elderly in-patients will have delirium.



As an organisation we have made year on year improvements in the care we give to our inpatients with dementia, and this can be seen in the results from the 6 National Audits of Dementia (NAD) since 2016. However, there is always more that we can do, and it will always be 'work in progress'.

This Dementia Strategy sets out clearly how we intend to improve the care for our in-patients with dementia (and delirium) over the next 3 years and focuses on 8 key standards of care (see below). The challenge is to translate the document into meaningful change that makes a real difference to the experiences of patients with dementia and their relatives and carers.

It is an important document and demonstrates our commitment to this group of vulnerable patients and to building on the existing work that has been done within the Trust.

## **Our Vision**

Our vision is to be leaders in delivering compassionate, evidence-based care that empowers individuals living with dementia to lead fulfilling lives. We commit to fostering a supportive and skilled workforce, ensuring every team member is equipped to provide outstanding care to patients, their families, and carers. Guided by our shared values and eight key standards, we aim to continuously enhance the quality of care, transforming our Dementia Strategy into meaningful actions that create positive experiences for those we serve. Together, we will build a future where dignity, understanding, and excellence are at the heart of dementia care.

Sherwood Forest Hospitals' collaboration with Dementia UK and the Admiral Nurse service directly supports the goals outlined in their Dementia Strategy. This partnership has enabled the Trust to appoint its first Admiral Nurse to provide expert, person-cantered dementia care. Admiral Nurses not only offer emotional and psychological support to families but also work to enhance the skills and confidence of hospital staff in caring for patients with dementia.

The Admiral Nurse service aligns with the strategy's emphasis on equipping staff to deliver high-quality, evidence-based care and fostering a culture where all team members contribute to supporting patients with dementia. This collaboration demonstrates the Trust's commitment to improving patient experiences and outcomes, as well as addressing the growing challenges posed by dementia in hospital settings.



## Introduction

Sherwood Forest Hospitals NHS Foundation Trust (SFHFT) is committed to improving the service we provide for people living with dementia, their families, and carers. Our overall aim is to provide an outstanding service by facilitating the development of dementia care through a collaborative approach, ensuring a consistent and quality service throughout all areas of the Trust.

The Trust will continue to work towards maximising the potential of our workforce by continuously learning and adopting evidence-based practice, utilising information and advancements in digital technology and continue to be innovative and forward-thinking for the benefit of our patients and the local community.

It is our responsibility to ensure that people living with dementia receive the highest standard of care that is equitable, compassionate, accessible, and community-focused throughout the whole trajectory of the condition – from diagnosis to end-of-life. This has become a driver for SFHFT's Dementia Strategy and aligns to the Trust's strategic objectives and 'Care Values'.



## What is dementia?

Dementia is a broad term used to describe a range of symptoms associated with a decline in cognitive function. It affects memory, thinking, behaviour and social abilities to the extent that it interferes with daily life. Dementia is progressive, which means symptoms may be relatively mild at first, but they get worse over time.

There are over 200 subtypes of dementia. The most common are Alzheimer's disease, vascular dementia, Lewy body dementia, frontotemporal dementia and mixed dementia.

Nerve cells carry messages between different parts of the brain, and to other parts of the body. As more nerve cells are damaged, the brain becomes less able to work properly.

Dementia is not a natural part of ageing. It is caused when a disease damages nerve cells in the brain.

Dementia can be caused by many different diseases. These diseases affect the brain in different ways, resulting in different types of dementia.

(Alzheimer's Society; Alzheimer's Research UK; Dementia UK)



## **National and Local Context**

Dementia is a significant public health issue in the United Kingdom, affecting a large number of individuals and their families. Approximately 944,000 people in the UK are living with dementia. This number is projected to increase to over 1 million by 2030 and 1.6 million by 2050.

#### One in three people in the UK will develop dementia in their lifetime

The risk of developing dementia increases significantly with age, particularly after the age of 65. For instance, the prevalence of dementia among those aged 65 and over is approximately 7.1%, rising to 25% among those aged 85 and over.

The economic impact of dementia in the UK is substantial, costing the country around £23 billion per year. This cost includes direct costs such as healthcare and social care, as well as indirect costs like lost productivity and informal care provided by family members. The cost is expected to rise as the number of people living with dementia increases, with projections suggesting it could reach £50 billion per year by 2040.

Approximately 540,000 carers in England support people with dementia, often impacting their employment and personal lives. Local initiatives aim to provide better support and resources for these carers, including respite care, financial assistance, and emotional support.

#### **Local Context: Sherwood Forest Hospitals**

Hospital admission can trigger distress, confusion and delirium for people living with dementia (PLWD). This can contribute to a decline in function, a longer length of stay and reduced ability to return home to independent living (NICE 2019). At any time, 1 in 4 hospital beds are occupied by people living with dementia. Sherwood Forest Hospitals provide comprehensive dementia care across its three hospital sites: King's Mill Hospital, Newark Hospital and Mansfield Community Hospital, and serves the local communities of Nottinghamshire, Derbyshire and Lincolnshire.

Region	Nottinghamshire	Derbyshire	Lincolnshire
No. of PLWD	10,246	16,905	12,200

(2019/2020)

# **National Perspective**

In recent years there have been several national documents that have been published which highlight the importance of dementia care and the need for increased awareness of health and social care professionals. The Trust's strategy has been informed by the following:

- National Dementia Strategy (2009) identifies improving dementia care and services as a key national priority. The strategy focused on raising awareness and understanding; early diagnosis and support and living well with dementia.
- The Well Pathway for Dementia (2009) designed by NHS England to assist hospital trusts in planning dementia care and services. The Well Pathway consists of Preventing Well, Diagnosing Well, Supporting Well, Living Well and Dying Well which supports the priorities of the National Dementia Strategy.
- The Right Care Call to Action (2012) for the improvement of care for people with dementia in acute hospitals, developed by the Dementia Action Alliance in partnership with the NHS Institute for Innovation and Improvement.
- National Audit of Dementia (2010) led by the Royal College of Psychiatrists and identifies several key recommendations to improve care for patients with dementia in acute hospital settings.
- The Care Act (2014) designed to put people and their carers in control of their own care and support.
- Dementia Friendly Hospital Charter (2015) launched in 2015 by the Dementia Action Alliance, the Charter outlines the high-level principles that a dementia-friendly hospital should provide and was revised in 2018 to include a section on the important role of the hospital volunteer.
- The Prime Minister's Challenge on Dementia (2020) initially published in 2015, contains
  over 50 commitments that together aspire to make England the best country in the world
  for dementia care and support. It focuses on increasing research, improving care, and raising
  public awareness about dementia.
- The Dementia Statements (2017) reflects what people with dementia and carers say are essential to their quality of life.
- Dementia Assessment & Improvement Framework (2017) describes what 'outstanding' care looks like and consists of eight standards to achieve best practice.
- 10-Year NHS Plan (2025) developed by NHS England, the plan sets out several actions to improve dementia care, bringing emphasis to addressing and reducing risk factors for dementia such as smoking, as well as a focus on community-based care and digital health integration..
- The Dementia NICE guidance (2018) sets out expectations, including appropriate admission to hospital, assessment, personal history taking, coordinated discharge, referral, and diagnosis. It also identifies that people living with dementia have a higher risk of developing delirium when admitted to hospital.

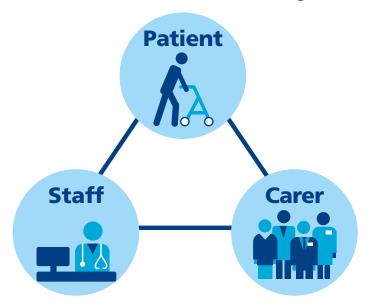
# **Our Strategy**

Sherwood Forest Hospitals NHS Foundation Trust (SFHFT) is dedicated to becoming a world leading provider of dementia services. We want to provide outstanding care for everyone living with dementia that is easy to access. We want to champion and develop our staff's expertise and knowledge and work with patients, carers, and families to review and develop our services.

This 3-year strategy has been developed to recognise the work already undertaken by the Trust and builds on those foundations to improve and develop our hospital services further. It aims to provide a clear overview and understanding of how staff at SFHFT can support people with dementia when they are in our care.

The Dementia Strategy sets out the objectives for exceptional healthcare personally delivered for people living with dementia recognising the vital role that family and carers provide. The relationship between the person living with dementia, families / carers and the healthcare professional is fundamental to achieving the key elements of safe care through effective communication.

#### The Carers Trust (2015) described this as the 'Triangle of Care'



The strategy has utilised and adapted the Dementia Assessment and Improvement Framework produced by NHS England (2017). The framework is evidence based and integrates national policy, practice guidance, best practice from organisations achieving an 'outstanding' rating from CQC and the patient and carer voice. The following 8 standards describes what 'outstanding' care looks like to Sherwood Forest Hospitals:



#### **Assessment and Diagnosis**

- Assessments are comprehensive and person-centred
- People with suspected dementia are referred for investigation
- Principles of the Mental Capacity Act 2005 are applied when asking people with dementia to make specific decisions

#### **Person-Centred Care**

- Staff are aware of patients living with dementia and their carers
- Care is person-centred and meets the individual's needs

#### **Information and Support**

- Patients and carers impacted by dementia feel supported
- Colleagues impacted by dementia feel supported
- Dementia awareness and support is promoted throughout our local community

#### **Triangle of Care**

- People with dementia and their families/carers are partners in care
- Carer Passport
- Care pathways are seamless through multi-agency collaboration
- Feedback

#### **Effective Leadership and Governance**

- Governance structures
- Patients, carers and staff are engaged

#### **Workforce Education and Training**

- Staff will participate in dementia training relevant to their role
- Staff will demonstrate a proactive approach to care

#### **Environment**

- Structures are in place to support dementia-friendly principles
- Connected Care Volunteer Support

#### **End of Life Care**

- Advance Care Planning is timely and supportive
- End of Life care is holistic and compassionate

## Standard 1:

# **Assessment and Diagnosis**

SFHFT recognise that effective diagnosis and assessment of dementia and delirium are critical components of patient care. These processes enable healthcare providers to accurately identify and differentiate between the two conditions, ensuring that patients receive tailored and timely interventions. By addressing the unique needs of patients with dementia and delirium, we can improve outcomes, enhance safety, and provide essential support to families.

#### How we plan to make it work:

#### Assessments are comprehensive and person-centred

- All patients aged over 65 years will be screened for cognitive impairment on admission.
- All patients who are assessed as having 'new confusion' as part of their NEWS2 score (ACVPU) should be assumed to have new delirium and referred to a doctor for further clinical assessment.
- If appropriate, patients will be referred to the Dementia Specialist Team or Liaison Psychiatry Team for further comprehensive assessment and support.
- Risks to health are identified and risk reduction strategies put in place.
- Person-centred care needs are identified as part of routine care assessments.

#### People with suspected dementia are referred for investigation

- If appropriate, memory assessment can be explored during their admission by the Liaison Psychiatry Team.
- Patients with suspected dementia can be referred directly to Memory Assessment Services from the acute setting, depending on the location of their GP.
- Diagnostic pathways, including post-diagnostic support, will be in place for patients assessed at SFHFT and for those who are referred for investigation in the community.

# Principles of the Mental Capacity Act 2005 are applied when asking people with dementia to make specific decisions

- Staff will understand their responsibilities in relation to the Mental Capacity Act and will record and share outcomes with all relevant members of the multidisciplinary team.
- Patients and carers will be involved in assessments and best interest meetings, alongside the appropriate specialist teams.

### Standard 2:

## **Person-Centred Care**

SFHFT recognise that person-centred care is a cornerstone of quality healthcare, particularly for people impacted by dementia. It focuses on the individuality and value of people living with dementia, as well as their families and carers, by understanding the person, their preferences and needs to adjust their care accordingly. This approach ensures dignity, respect, and better health outcomes, making the hospital experience more supportive and holistic.

#### How we plan to make it work:

#### Staff are aware of patients living with dementia and their carers

- Effective and efficient systems will be in place to ensure timely identification of patients with a formal diagnosis of dementia admitted to hospital.
- Essential information will be prominently displayed on the patient's board for quick reference, including the appropriate use of the forget-me-not magnet, what matters most to the individual and their preferred name.
- Carers will be identified and documented in the healthcare records.

#### Care is person-centred and meets the individual's needs

- All patients with a diagnosis of dementia or cognitive impairment will have a completed 'This is Me' booklet which will gather personalised information and guide the care that they receive.
- The 'This is Me' booklet will be available electronically to ensure continuity of care.
- Support is provided for patients to retain independence, mobility and involvement in activities that support their health and wellbeing by adopting a multidisciplinary approach to their care.
- All staff can make referrals to specialist teams such as Liaison Psychiatry, Dementia Specialist Team and Nutrition Team who can support with assessment of needs for patients with dementia.
- Pain assessment tools, such as the Behavioural Pain Assessment Scale (BPAS) and the Pain Assessment in Advanced Dementia (PAINAD) tool will be utilised to accurately record and respond to verbal and non-verbal indicators of pain for people living dementia.
- The Mental Capacity Act 2005 will be implemented to ensure that the person living with dementia and their families and carers are involved in care decisions where possible.
- Service provision for all patients and their carers is equitable, in a way which respects their age, sexual orientation, gender identities, race, ethnicity, religion and belief.

## Standard 3:

# **Information and Support**

SFHT recognise that providing comprehensive information and support to patients, carers and staff is essential in the management of dementia within both hospital and community settings. This approach not only improves the quality of life for patients with dementia but also ensures that staff and carers are well-equipped to make informed decisions and manage the challenges associated with the condition.

#### How we plan to make it work:

#### Patients and carers impacted by dementia feel supported

- Posters and banners will ensure constant visibility of the Dementia Specialist Team throughout the Trust.
- Leaflets and resources will be readily available across all three hospital sites.
- Monthly Dementia Drop-in Clinics are available across all three hospital sites to provide information and signposting, in collaboration with key stakeholders and community services.
- Relevant and up to date information will be available via the SFHFT internet page.
- National awareness days linked to dementia are identified with a focus on Dementia Action Week.

#### Colleagues impacted by dementia feel supported

- SFHFT colleagues who care for a person living with dementia are offered support and advice.
- All colleagues can access one-to-one support from the Dementia Specialist Team.
- The Carers Network Safe Space Meetings are provided as an informal space where members can come together, share their lived experiences, and receive peer to peer support from other members. The Dementia Specialist Team will be in attendance of these meetings to provide wellbeing support and signposting.
- National awareness days linked to dementia are identified with a focus on Dementia Action Week and other departments/ specialities are identified as partners in collaborative working to offer support around reducing risk and health promotion.
- Support will be provided for staff who require leave to care for a person with dementia.
- Reasonable adjustments are made enabling people affected by dementia to continue working wherever possible

# Dementia awareness and support is promoted throughout our local community

- The Dementia Specialist Team will work in partnership with local health, social care and third sector providers to host, advertise and participate in public awareness and educational events.
- Ensure ongoing collaboration between the acute and community Admiral Nurse services, with the support of Dementia UK.

## Standard 4:

# **Triangle of Care**

SFHFT recognise that involving patients, families / carers and the multidisciplinary team in the codesign of care is essential to achieving a holistic, person-centred approach. This collaboration, known as the Triangle of Care, creates a therapeutic alliance that is personalised and addresses the unique needs of each patient. Enhanced communication and shared decision-making empower patients and families / carers, fostering a sense of ownership and adherence to treatment strategies that consider medical, emotional, and social well-being. Co-design initiatives not only elevate the quality of care but also create a supportive and inclusive environment.

#### How we plan to make it work:

#### People with dementia and their families/carers are partners in care

- Carers will be identified at point of admission or on consultation.
- We will keep carers involved and informed throughout assessment, treatment and discharge planning and give them the opportunity to be with the person they care for.
- Carers will be involved in assessments and best interest decisions, as required under the Mental Capacity Act 2005.
- Carers will feel supported by staff and be referred for specialist support from the Dementia Specialist Team where required.

#### **Carer Passport**

- A philosophy of partnership caring will be implemented for patients with dementia and their families / carers in line with our commitment to the Carer Passport campaign.
- Carers will be provided a Carer Passport lanyard to enable them reasonable adjustments and benefits, such as free parking and meals.
- Carers will be enabled to assist with care and flexible visiting.

#### Care pathways are seamless through multi-agency collaboration

- Care pathways are established, and information is shared between GPs and community providers to facilitate admission and discharge.
- We will continue to develop relationships with third sector organisations across Nottinghamshire.
- Dementia will remain on the agenda across Trust-wide forums, including Violence and Aggression, Mental Capacity and End of Life Steering Groups.

#### **Feedback**

- Patients and carers will have the opportunity to provide feedback via the Dementia QR surveys displayed around SFHFT.
- The Dementia Specialist Team will provide support to the Patient Experience Team with elements of feedback and complaints.

## Standard 5:

# **Effective Leadership and Governance**

SFHFT recognise that effective leadership and governance are fundamental to the provision of high-quality dementia care. Leadership establishes a clear vision and strategic direction, ensuring that care practices are aligned with best practices and patient-centred approaches, while robust governance structures support continuous quality improvement, enabling hospitals to regularly assess and enhance their dementia care services.

#### How we plan to make it work:

#### **Governance structures**

- The Chief Nurse is the executive sponsor for dementia care.
- The Dementia Specialist Team and Lead Geriatrician guide and monitor delivery of the dementia strategy.
- The Dementia Specialist Team will report on progress through work plans, incidents, learning reviews, complaints and training compliance through the divisional governance structures within the Patient Safety Committee, Patient Experience Committee and Clinical Outcomes of Effective Care meetings.
- The voice of the person with lived experience will be heard and influence service development.

#### Patients, carers and staff are engaged

- Meaningful feedback is regularly gathered on how people with dementia and their carers experience the hospital and its services and is scrutinised by the Patient Experience Committee to identify areas for service improvement.
- Patient and carer voices are embedded into service improvements from the initial planning stages.
- Information from patients and carers on what is important to them will be shared with staff.
- Staff have opportunities to contribute thoughts on dementia care and ideas for service improvement through the Dementia Shared Governance Council.

## Standard 6:

# **Workforce Education and Training**

SFHFT recognise that workforce education and training are critical components of outstanding dementia care. By equipping healthcare professionals with the necessary knowledge and skills, we can ensure the delivery of high-quality, person-centred care. Comprehensive training programs enhance patient safety and experience, improve health outcomes, and address the unique challenges associated with dementia. Ongoing education also supports staff confidence and job satisfaction, as well as ensuring compliance with healthcare standards and regulations.

#### How we plan to make it work:

#### Staff will participate in dementia training relevant to their role

- All staff will receive Tier 1 'Dementia Awareness' through the eLearning package which forms part of their mandatory update.
- All staff will have access to the Tier 2 dementia training and encouraged to complete.
- All staff will have access to Delirium training via a blended approach of training.
- All dementia training will be delivered in line with the Skills for Health, Health Education for England and Skills for Care (2018).
- All medical staff will receive education regarding dementia and delirium as part of their induction to the Trust.
- Training will be accessible, experiential and relate to acute hospital care.
- All staff will be trained in the implementation of the Mental Capacity Act (2005) and Deprivation of Liberty Safeguards (DoLS).
- Connected Care Volunteers will be trained in dementia awareness and will be Dementia Friends.

#### Staff will demonstrate a proactive approach to care

- Specialist services are available and adequately staffed to support patients, carers and staff.
- The Dementia Specialist Team at SFHFT is established with a Dementia Specialist Nurse, Admiral Nurse and Dementia Support Worker to provide specialist support and advise where required.
- Mental health support is available via referral to the Liaison Psychiatry Team.
- Relevant and up to date information will be available via the SFHFT intranet page, including signposting and links to support.
- Dementia Champions will have been identified on all areas across SFHFT and a programme for on-going development will be developed and undertaken.

## Standard 7:

# **Environment**

SFHFT recognise that the acute environment can be distressing for people living with dementia. Creating dementia-friendly environments is essential for enhancing the quality of care and overall well-being of our patients. These environments are designed to be safe, supportive, and stimulating, addressing the unique needs of patients with cognitive impairment. This approach not only improves patient outcomes but also supports healthcare professionals in delivering effective and compassionate care.

#### How we plan to make it work:

#### Structures are in place to support dementia-friendly principles

- A standardised specification for all future refurbishment throughout the Trust will be in place e.g. replacement toilet seats, appropriate signage, floor coverings, large clocks etc.
- The environment promotes safety, and encourages independence, activity, and social interaction.
- The Trust has access to the library's distraction resources to support person centred care.
- Will aim to minimise noise where possible and reduce visual clutter.
- Signage and orientation cues support navigation and ease decision-making throughout the building
- We will support carers to be present with the person living with dementia during their hospital stay and to personalise their bedspace with familiar items from home.
- Ward design enables people with dementia to continue to undertake activities of daily living.
- Patient led assessments of the care environment (PLACE) audits are carried out on a regular basis and demonstrate patient appropriate facilities.
- Future ward decorating/design projects to be in line with 'dementia friendly' guidelines e.g. use of accent colours, bays painted different colours, improved signage

#### **Connected Care Volunteer support**

- Volunteers contribute to positive patient experience by providing additional support for activities and pastoral care which compliment those of paid staff.
- Ward staff and the Dementia Support Team will support volunteers to enable wellbeing activities.
- Voluntary services will have a dedicated link with the Dementia Specialist Team.
- All volunteers will be Dementia Friends.
- Volunteers will be expected to participate in SFHFT dementia awareness training.

### Standard 8:

# **End of Life Care**

SFHFT recognise that end-of-life care for people living with dementia requires a compassionate and holistic approach. As dementia progresses, patients face increasing physical, emotional, and cognitive challenges. Effective end-of-life care ensures that symptoms are well-managed, dignity is maintained, and preferences are respected. This approach not only enhances the quality of life for our patients but also provides essential support to their families. By prioritising individualised care planning, communication, and coordination, we will deliver comprehensive and compassionate end-of-life care for people living with dementia.

#### How we plan to make it work:

#### **Advance Care Planning is timely and supportive**

- A clear pathway for a person living with dementia will be defined.
- We will ensure that Advanced Care Planning and RESPECT (Recommended Summary Plan for Emergency and Treatment) is referred to or completed in a sensitive and timely way.
- Recognise the importance of providing people living with dementia and their families the opportunity to be involved in advance care planning discussions and supported to develop this at the earliest opportunity. This will focus on life history, quality of life, best interest, goals, future planning and preferred place of care.
- Training will be provided to the workforce on facilitating advance care planning discussions with people living with dementia. All staff will recognise the importance of their role in facilitating these discussions.

#### **End of Life Care is holistic and compassionate**

- The possibility that the person living with dementia is dying is recognised, communicated clearly, decisions and actions are taken in accordance with the person's wishes, and regularly reviewed and revised accordingly.
- The Dementia Specialist Team will work in collaboration with the End-of-Life Team and Palliative Clinical Nurse Specialists to ensure that the needs of people living with dementia at the end of their lives are met and complex symptoms are managed.
- End of life care for people living with dementia will be holistic and person-centred and will ensure that diet, fluid, symptom control, psychological, social and spiritual support is agreed, co-ordinated and delivered with compassion.
- End of life discussions will be undertaken when required and documented.
- Staff working within end of life and palliative care will be aware of the Ambitions Framework and NICE guidelines to shape compassionate, holistic care.
- Staff have access to specialist services within the Trust to enhance the patient experience i.e., Pain Team, End of Life Care Team and Chaplaincy.
- Training will be provided to the workforce on dementia at the end of life, including prognosis, common symptoms and management of symptoms.

# **Monitoring our Success**

- Excellence in caring for people affected by dementia requires us to strive for continual improvement in all aspects of this strategy.
- There will be regular reporting of progress to both the Patient Experience, Patient Safety and Clinical Outcomes and Effective Care (COEC) meetings which will address as a minimum:
- Assurance of practice
- Training compliance
- Learning from incidents, learning reviews and themes from complaints and feedback.
- Participation in the National Audit for Dementia.
- Most importantly, the voice of our patients and carers will be heard both in helping to evaluate progress and by participation in audit and quality improvement initiatives.

## Conclusion

Implementing a comprehensive dementia strategy is crucial to providing high-quality, compassionate care for people living with dementia. By focusing on early identification, personalised care plans, staff training, and a supportive environment, we can significantly improve patient outcomes and experiences.

Sherwood Forest Hospitals NHS Foundation Trust has already made significant improvements to the care experience of our patients and their families living with dementia, and our commitment to continuous improvement, collaboration, and integration of best practices ensures that we remain at the forefront of dementia care. The existing drive and enthusiasm within the Trust, accompanied by this strategy, reaffirms our dedication to evolving and improving dementia services.

## References

Alzheimer's Research UK (2025). Types of Dementia. Types of dementia – Alzheimer's Research UK

Alzheimer's Society (2022). What is dementia? Symptoms, causes and treatments.

What is dementia? | Alzheimer's Society

Dementia Action Alliance (2012). Call to Action. Dementia Action Alliance

Dementia UK (2023). What is Dementia? What is dementia? - Dementia UK

Department of Health and Social Care (2009).

Living Well With Dementia: a national dementia strategy.

Living Well With Dementia: a national dementia strategy – GOV.UK

Department of Health and Social Care (2020). Prime Minister's challenge on dementia 2020 – GOV.UK

Department of Health., Skills for Health. Health Education England (2018). Dementia: Skills for Care. Dementia (2015, updated 2018) | Skills for Health

Mental Capacity Act (2005). UK Public General Acts. Mental Capacity Act 2005

National Dementia Action Alliance Hospitals Charter (2019).

DF HOSPITAL CHARTER 2018.cdr (dementiaaction.org.uk)

National Dementia Action Alliance (2010).

The Dementia Statements: Through a Legal Lens.
National-Dementia-Action-Alliance-Dementia-Statements.pdf

NICE (2019). Dementia: Quality Standard. Overview | Dementia | Quality standards | NICE

The Care Act (2014). UK Public General Acts. Care Act 2014

The Carers Trust (2019). The Triangle of Care. thetriangleofcare-thirdedition.pdf

The NHS 10-Year Plan (2018). The NHS 10-year Plan | The King's Fund