SECTION B PART 1 - SERVICE SPECIFICATIONS

Service Specification No.	
Service	Dementia Adviser Service
Commissioner Lead	Lancashire and South Cumbria ICB
Provider Lead	
Period	1 April 2023 – 31 March 2024
Date of Review	April 2023 – will be reviewed during 2023/24

. Population Needs

1.1 National/local context and evidence base

1.1 Aims

Alzheimer's Society will provide Dementia Adviser Services within the scope of primary care for patients served by Lancashire and South Cumbria ICB.

The Dementia Adviser role

- To offer ongoing advice, information, and support to people with dementia and their carers that enables people's quality of life to improve and deflect or delay them from requiring longer term or intensive health and social care services.
- To ensure everyone with dementia has a connection into support and / or services at a level that ensures they can come to terms with a diagnosis of dementia and increases their opportunity to live their life well with their dementia.
- To help people to navigate the care system and local services and provisions successfully at any point that they require this help.

Alzheimer's Society will provide personalised information, advice and signposting services to people living with dementia. The information will be accurate and of good quality and the advisers will support people to make use of this information, signposting and facilitating access to services to ensure people have the help and care they need.

The service should aim to maintain and develop abilities and work directly with the person with dementia to promote independence. The service should enable people with dementia to remain active and social citizens, retain multiple and complex relationships with individuals, groups and wider society, and to share the rights of all citizens, as they choose.

The Dementia Advisers will facilitate access to information normally provided through carers or family to those service users who live alone and who do not have a carer.

The service will signpost and support access to other appropriate support and services to ensure

that people with dementia and their carers have access to the right help for them at the right time and are enabled to make the most of their abilities.

2. Scope

2.1 Aims and objectives of service

2. AGREED VALUES ON WHICH THE SERVICE IS BASED

The service will be provided in accordance with the values enshrined within " Living well with dementia " A National Dementia Strategy (Department of Health, 2009) which aims to ensure that all people with dementia and their carers live well with dementia. The strategy sets out two objectives in relation to information and advice for people living with dementia:

Objective 1

Good quality information for those with diagnosed dementia and their carers. Providing information on the illness and on the services available both at diagnosis and throughout the course of their care.

Objective 2

Enable easy access to care, support and advice following diagnosis. A dementia adviser to facilitate easy access to appropriate care, support and advice for those diagnosed with dementia and their carers.

3. SERVICES THAT WILL BE PROVIDED

The advice aspect of the service includes providing the service users with specialised information. It involves:

- Problem solving and ideas to support day to day living with their symptoms
- Person-centred individualised service
- Giving information and explaining options relevant to their wants and needs
- Help for today, and for tomorrow identifying and explaining considerations for the future such as Wills, Power of Attorney, planning for advance of symptoms
- Identifying further action the service user can take and empowering them to do so
- Can involve some assistance e.g. contacting third parties to seek information or progress external provision
- Supporting and signposting a service user to understand and access additional sources of help, bespoke to their needs, as part of their support plan and personally identified outcomes, including signposting to legal and welfare specialists.
- If a service user's needs or requirements appear to be beyond the scope of the service typically on medical grounds or needs not related to dementia. The Dementia Adviser Service will identify the most relevant organisation or individual for the service user to contact or be referred to. Signposting may include identifying barriers to accessing services and supporting service users to minimise these.

The information aspect of the service includes:

- Providing general information e.g. factsheets and leaflets.
- Signposting e.g. providing factual information about the role of other organisations or how to find or contact additional services
- Explanations and links to additional Alzheimer's Society services such as our web site and Talking Point web forum

The service will typically be available between the hours of 9am – 5pm Monday to Friday, with occasional by-agreement service provision outside of these hours to accommodate service user needs. The service will not be available on bank holidays

3.1 Referral processes

The service is provided to anyone affected by dementia.

A referral pathway to the service can be via:

- GP
- Memory assessment service
- Health clinic or health and or social care professional
- Social services
- Other voluntary agencies
- Alzheimer's Society internal referral
- Self-referral

3.2 Response times

Referrals will normally be responded to within 5 working days of receipt, by contact with the individual, the referrer, etc, whichever is identified by referrer or deemed to be the most appropriate.

3.3 Care pathways (where applicable to meet each care cluster)

Interdependencies

Interdependencies exist with several stakeholders including LSC ICB, Lancashire and South Cumbria NHS Trust (particularly Memory Assessment Services), Lancashire County Council Adult and Community Services, and Dementia Community Links Services provided by local Age UK and Age Concern organisations.

3.4 Discharge process

Alzheimer's Society Dementia Advisers are available throughout person's experience of dementia. If a service user indicates at any time that they do not wish to continue with a support provision, this is respected but they can re-refer at any time. Declining services includes non-verbal clues that the person does not wish to have contact with the Dementia Adviser and nil-response to 3 contact attempts.

On rare occasions Dementia Adviser support is inappropriate – needs do not relate to dementia, over-riding safety concern, more pressing health need is barrier to effective or safe support – person will be signposted and/or supported to access appropriate help first.

4. ELIGIBILITY FOR THE SERVICE

The Dementia Adviser Service in Central Lancashire, Fylde and Wyre and West Lancashire will be available to people diagnosed with dementia or a family member/friend/unpaid carer to someone diagnosed with dementia to support and to provide information and guidance following diagnosis and throughout their life.

5. LOCATION/S and STRUCTURE OF THE SERVICE DELIVERY

The service benefits from support from our national Alzheimer's Society provision - including

awareness raising, campaigns, Dementia Friends, Dementia Friendly Communities.

The Dementia Advisers will be community based, working from home and conducting visits; and maintain a regular presence alongside Memory Assessment Service.

The Dementia Adviser Service will be available to people with dementia and their supporters, carers and families through a range of channels including:

- Face-to-face contact through booked appointments at service centres, and/or at home dependant on the service users preference
- Telephone contact or other digital means (e.g. zoom etc)
- Email
- Post

Dementia Advisers will arrange an initial assessment, face-to-face or via alternative channels as appropriate.

A follow up full assessment will typically take place between 0 - 2 weeks from initial assessment (unless agreed that this is not required or to different timescale). The purpose of this assessment will be for the Adviser to discuss with the service user what are the service users initial requirements from the service, information, advice etc.

Support will continue through to completion of each individuals support plan, and service users can return via self-referral or professional referral throughout their life as circumstances/needs change.

6. INTERDEPENDENCIES WITH OTHER SERVICES

The service will be a key component of the wider Dementia Care Services and there is an expectation that close integrated working relationships will be developed between the service staff other NHS, primary, secondary and acute sector and social care staff. This will include the screening of referrals to the service, where appropriate, the sharing of all information, including outcome and performance data, with NHS staff.

3. Applicable Service Standards

3.1 Applicable national standards e.g. NICE, Royal College National Dementia Strategy *Living Well with Dementia* (DH 2009)

3.2 Applicable local standards

Local guidelines will also be developed and introduced:

- i) In response to new national guidance
- ii) To establish best practice

iii) To minimise a risk that has been identified via an adverse incident, a risk assessment or a significant event analysis

- iv) To improve outcomes
- v) To improve patient safety
- vi) To provide support and guidance for staff

3.3 Whole System Relationships

i) The service user experience

The Provider will arrange for a user satisfaction survey to be undertaken to provide feedback on the service user experience. The survey will be undertaken annually to ensure year on year service improvements.

ii) Service user complaints

As part of its continuous improvement strategy, NHS South Cumbria and Lancashire ICB views service user complaints as potential learning experiences where service improvements can be identified or learning experiences shared. The Provider will address any complaints appropriately and the service will adapt according to lessons learnt.

iii) Collaborative working

To ensure a person-centred approach is encouraged when providing individual care it will be necessary for the staff within this service to have the skills and expertise to provide advice, information and signpost individuals to other appropriate services. Therefore, it is essential these staff have an understanding of related services across health and social care, statutory, independent and third sector services.

3.4 Interdependencies

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4. Key Service Outcomes

The Dementia Adviser Service will be based around key quality outcomes:

- i) Contribute to the reduction of admissions to secondary care
- ii) Reduction in primary and secondary care dependency
- iii) Promotion of independent living
- iv) Maintenance of community presence
- v) Reduction in social isolation

As part of its audit programme, the Dementia Adviser Service will be measured as part of its outcomes by the following:

- i) Service user waiting times for the service
- ii) Levels of user satisfaction

5. Location of Provider Premises

Dementia Advisers are Community-Based workers, working from a mixture of visits,

homeworking, and community venues including Memory Assessment Service.

The service will operate Monday – Friday excluding Bank Holidays. Typically 9.00 am – 5.00 pm (Monday – Friday)

6. Individual Service User Placement

N/A