NHS
London
Strategic Clinical Networks

Commissioners' Checklist for Dementia

Improving quality of care

NHS
London
Strategic Clinical Networks

Integrated commissioners' checklist for commissioning services which will provide excellent care to people with dementia in both specialist and non-specialist (mainstream) care settings

Authors: London Dementia Strategic Clinical Leadership Group
July 2015, version 0.2

Version	Date	Updates	By
0.1	*12/2014*	*Disseminated*	*London Dementia SCN*
0.2	*07/2015*	*Revised and re-circulated*	*London Dementia SCN*
0.3	*06/2016*	*Review*	*London Dementia SCN*

Contents

Background 3
How to use the checklist 3
Risk reduction 4
Effective diagnosis 4
Living well with dementia 6
Coordinating care 7
Improving quality of care 8
Key 16
Further reading/sources: 17
References 18

Background

The Dementia Strategic Clinical Network has produced this checklist with input from a wide range of professionals and would like to thank all those who have been involved. Its aim is:

- To help ensure the particular needs of people with dementia are considered when commissioning services (in both health and social care needs)
- It is not specific to any particular service or setting, but useful for all
- It is aimed at achieving excellent quality care
- It can be used throughout the commissioning cycle, from tendering of services to ongoing evaluation and is compatible with the assessment ,planning, contracting and monitoring as defined within relevant SCIE recommendations e.g. guide 46 :Home care
- It does not in any way replace the NICE support for commissioners of dementia care (CMG48) and recommends that NICE guidelines are used alongside this checklist
- It has taken into consideration likely requirements of CQC that services are safe, effective, caring, responsive and well led
- The checklist is also available to support service providers and Health and Wellbeing boards
- This checklist is also going to be available in a format better suited for people with dementia and carers

How to use the checklist

This list of aims applies across all levels of care and within services both in primary and secondary care but the level of detail for each stated aim would depend on the service being commissioned and the local needs. When commissioning a service the particular diversity of the population being served should be a key consideration e.g. BME, LGBT etc
For example, in a hospital the commissioner may specify specific dementia friendly environments such as signage, however, in domiciliary care where this is not possible, it might be that there needs to be a system in place to report any negative environmental factors such as loose rugs so that the person with dementia and their carer can be informed in an appropriate manner and then make an informed decision.

	Aim	Detail	Measurement /Outcome	Evidence base/Resources
1.	**Risk reduction**			
1.1	**Reducing risk of dementia (1)**	Promote information re reducing risk of dementia by modifying vascular risk factors	Evidence of using brain health (risk reduction in dementia and stroke) as key health message for vascular risk reduction	PHE.: The Blackfriars Consensus
1.2	**Reducing risk of Dementia (2)**	Services collaborate with partners in ongoing research into causes and modifiable risk factors for all dementias	Evidence of data sharing and research collaboration	NDS: Objective 16: A clear picture of research evidence and needs.
1.3	**Improve awareness of risk reduction and incorporate in practice**	Staff incorporate risk reduction within healthy living discussions. Care settings offer access to healthy lifestyle choices i.e. diet and exercise	Evidence that service user reviews include discussion on dementia risk and brain health Evidence of support to help individuals modify risk factors/lifestyle	PHE.: The Blackfriars Consensus
2.	**Effective diagnosis**			
2.1	**Identifying people for referral to memory service**	Staff recognise indicators of possible dementia and make appropriate referral (usually to GP) See also section 5.16: Understanding dementia/training	Evidence that GPs to recognise signs and symptoms e.g. DES etc.	NDS: Objective 1: Improving public and professional awareness and understanding of dementia
2.2	**Best practice approach to diagnosis - Dementia Diagnostic Services**	Services offer initial assessment, and where required investigations, within 18 weeks of referral.	Evidence of discussion in service user notes and letter to GP.	SCN: Immediate post diagnosis support NICE DP - Specialist Assessment Services

		Diagnosis should be given only following service user review with a senior clinician Services should include a senior clinician, specialist nurse and clinical (neuro) psychologist and have access to specialist occupational therapist and dementia advisor. Investigations and treatments should be in line with NICE guidance Services should include expertise from old age psychiatry, specialist neurology and geriatric medicine, with direct transfers to facilitate accurate diagnosis. See also section 5.12: Data Collection for People with Dementia Dementia diagnostic services should offer service users enrolment in clinical trials and research.	Evidence of awareness of best practice diagnosis guidance. Memory clinics demonstrate clinical standards equivalent to Memory Services National Accreditation Programme (MSNAP) standards. Database of clinical activity facilitating capacity planning and enable quality improvement. Contributes to the wider collection of data see also 5.12: Data collection for people with dementia Data shared for comparison with equivalent services	NICE QS 1: Quality statement 2: Memory assessment services NDS Objective 2: Good-quality early diagnosis and intervention for all.

3.	Living well with dementia			
3.1	**Best practice immediate post diagnosis support**	Support tailored to the individual's needs and wishes. Services work together towards equity of access to diagnosis See also London Dementia SCN: Immediate post diagnosis support [available November 2014]	Evidence of comprehensive discussion including diagnosis, prognosis, treatment and support, carer support, keeping well and planning for the future. For the full checklist see also London Dementia SCN immediate diagnosis support [available November 2014}	NDS Objective 3: Good-quality information for those with diagnosed dementia and their carers. London Dementia SCN: Immediate post diagnosis support
3.2	**Activities in all settings suitable for people with dementia and appropriate to their needs**	There is a range of meaningful activities appropriate to the severity of their dementia (including late stage)	Evidence of range of activities that are based on ability and likes of the person with dementia Evidence of regular review of whether current activities meet the needs of the individual	NICE QS50:Quality statement 1: Participation in meaningful activity NHS OF: Domain 2 – Enhancing quality of life for people with long-term conditions SCIE 47: Private sector providers NICE QS4 - Leisure activities of interest and choice

4.	Coordinating care			
4.1	**Each individual has a coordinated care plan led by them, with family/carer as appropriate**	Involve carers and/or family Care plan regularly reviewed and updated, accepting people's needs and wishes change. Care plan includes end of life planning ahead (e.g. preferred place of care, place of death, lasting power of attorney. Care plan reflects locally available services (generic and dementia specific). Takes a multidisciplinary team approach service user Includes documentation of consent	Evidence of regular review including health and social care considerations Evidence of involvement of person with dementia and where appropriate carers Evidence of Service user/carer satisfaction e.g. service user experience surveys. Care plan reflects locally available services. Care plan regularly reviewed and updated, accepting people's needs and wishes change. Care plan includes end of life Evidence of documentation of consent QOF measurement	NICE QS 1:Quality statement 4 - Assessment and personalised care plan NICE QS30: Quality statement 3: Reviewing needs and preferences DH Quality Outcomes for People with Dementia National Dementia Declaration: I statements Healthcare for London - Dementia Services Guides JCPMH: Guidance for Commissioners NHS England: Avoiding Unplanned Admissions Guidance QOF Guidance Health Innovation Network My Brain Book (under development)
4.2	**Key points of transition from service to service are defined**	Defined minimum information needed when leaving each service to improve quality and manage risk (especially around medications). Locally agreed interagency protocols for	Service operational policy details measures to support transfer of care Evidence of successful discharge to usual place of	World Alzheimer's Report (2011) King's Fund: Making best use of the Better Care Fund Spending to save?

		transfer of care including medication information Use a recognition system - see also section 5.8: Use of a recognition scheme for people with dementia	residence Evidence of Service user/carer satisfaction e.g. service user experience surveys,	
4.3	**Providing the right information and support for care navigation**	Named care coordinator Access to dementia expertise Consider role of technology. Ongoing access, including face to face contact, to specified dementia adviser or another member of the care team.	Evidence of named professionals in care records Evidence of positive impact on unplanned and urgent care Evidence that Technological solutions have been considered Evidence of case management and risk management Evidence of Service user/carer satisfaction e.g. service user experience surveys	Dementia Connect – Alzheimer's Society Healthcare for London: Dementia Services Guide, JCPMH: Guidance for commissioners Alzheimer's Society. Dementia-Friendly Technology Charter King's Fund. Making best use of the Better Care Fund Spending to save? RCN: Commitment to the care of people with dementia in hospital settings, Alzheimer's' Society: The dementia guide
5.	**Improving quality of care**			
5.1	**Recognition of pain in people with dementia**	Understanding of the impact of pain in dementia Awareness of staff on how to use verbal and non verbal pain assessment tool	Evidence of use of behavioural pain assessment if unable to use verbal pain assessment tool Evidence of training including the use of non verbal pain assessment	PAIN AD, Abbey Pain Scale, Doloplus2 SCIE 15: Dignity in Care - Pain Management NDS: Objective 11: Living well in care homes

			Evidence of responsiveness to pain when detected	NDS Objective 13: An informed and effective workforce London Dementia SCN: Managing Pain For People With Dementia
5.2	**Recognition of mental and emotional wellbeing**	Staff recognise symptoms of depression, anxiety or underlying mental health problems. Staff aware of signs of potential depression in those with dementia so they can seek advice early. Support people with dementia to continue to engage in meaningful occupations integrated into the wider community See also 3.2: Activities in all settings suitable for people with dementia and appropriate to their needs	Evidence of awareness of mental health issues. Evidence of training. Evidence of factors to look for in depression. Evidence of awareness of how to seek further help and advice. Records of social recreational activities engaged in.	NSF OP: Standard 7: Mental Health in Older People NICE QS50 – Quality statement 3: Recognition of mental health conditions
5.3	**Person-centred care for people with dementia**	Use of personal fact files to influence care provided Use of care support plan that addresses all the needs the person with dementia including their cultural needs The care plans should be integrated Involvement of carers. See also section 5.13: Support for carers which is later on in the document	Use of "This is Me" or similar Life histories – information in life history is used to help formulate care plan Evidence care plan is reviewed in a timely manner	Personalisation: Beyond Life Histories NCF: Key Principles of Person Centred Dementia Care NSF OP: Standard 2: Person Centred Care SCIE guide 52: Residents' entitlements and requirements NICE DP: Principals of care – need and preferences of people with dementia NHS OF: Domain 2 – Enhancing

				quality of life for people with long-term conditions Care Fit For VIPs Carers Trust: The Triangle of Care
5.4	**Medicines management for people with dementia**	Review system for those on antipsychotics Review system for those drugs for dementia System for recording capacity Covert administration policy in place Drug reviews of all medications to reduce polypharmacy	Treatment should continue only if it is considered to have a worthwhile effect on cognitive, global, functional, or behavioural symptoms Evidence of regular GP reviews Written record of capacity assessment	NICE: TA217 Donepezil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease NICE SC1: Managing medicines in care homes NHS London Guidelines: Anti-psychotics in dementia SCIE guide 52: Managers' responsibilities and the NHS reforms
5.5	**Keep people with dementia physically well**	Recognise increased risk of: delirium, falls, UTIs, constipation, pressure sores and respond to changes early Take a preventative approach to managing recognised risks e.g. ensure residents have regular opportunity to mobilise (links to nutrition indicator) Supporting continence Support people with dementia to maintain physical activity and fitness	Evidence of understanding symptoms and what tests/measurements to do (e.g. dip stick urine) Evidence of training Documented falls assessment Documented continence assessment Records of physical activities engaged in	NICE CG103 Delirium - recommendations 1.2.1 and 1.4.1. NSF OP: Standard 6: Falls NICE QS50: Quality statement 5: Recognition of physical problems Carers Trust: The Triangle of Care London Dementia SCN: Guidance on Delirium Policies

5.6	**Nutrition and hydration for people with dementia**	Food with a variety of consistencies suitable for different swallowing needs of people with dementia Aids to facilitate independent eating Finger food and food available outside mealtimes Use of an identifier to indicate that the person needs support to eat Enough time for staff to facilitate good nutritional input e.g. via protected meal times Use of food and fluid charts Accessible weighing scales	Evidence of variety in menu and responsiveness to weight changes Awareness of how to use thickeners and who is on them Use of nutritional support plan Evidence of training in nutrition and hydration Staff able to use food and fluid charts	SCIE guide 15 :Eating and Nutritional Care
5.7	**Communication and responding to "challenging behaviours" (behaviours that carers find difficult to manage)**	Staff understanding the behaviour and where to seek additional support when required. Staff aware of how to respond thorough assessment of the symptoms and implementation of non-pharmacological interventions as first line of treatment. Access to specialist assessment where anti-psychotics are in use.	Evidence of assessment of behaviour and review of impact of treatment in care planning Evidence of ability to use ABC charts Use of learning logs	NHS London Guidelines: Anti-psychotics in dementia Alzheimer's Society: BPSD: Good Practice Guide Douglas et al (2004) Non-pharmacological interventions in dementia. Adv in Psychiatric Treatment: 10:171-177
5.8	**Use of a recognition scheme for people with dementia**	Staff to be aware who has dementia and how that impacts on the care they need. Identified actions which are taken when	Ability to demonstrate local recognition scheme Evidence from service user	NDS: Objective 11: Living well in care homes NDS Objective 13: An informed and effective workforce

		people are identified. For people identified with cognitive impairment but no diagnosis for request to be made to GP to review. See also London Dementia Strategic Clinical Network 'Guidance on use of recognition schemes' [will be available November 2014]	care plans that scheme is in active use	NAD: 6 Information and communication London Dementia SCN: Recognition Scheme Guidance
5.9	**Recognise and address the palliative care needs and end of life wishes for people with dementia**	Ensure primary care teams are resources and training to assess and provide palliative care for people with dementia Awareness of the need for end of life planning and how to access support for the people to achieve this Systems for discussing and recording end of life wishes	Having end of life care covered in the care plan addressing • Physical needs • Psychosocial needs • Spiritual needs Evidence of local arrangements for primary care teams to assess the palliative care needs of people in the later stages of dementia, ensuring the resulting information is communicated within the team and with other health and social care staff. Evidence of end of life wishes being recorded and met e.g. preferred place of care and preferred place of death	NICE QS 1: Statement 9. People in the later stages of dementia are assessed by primary care team to identify and plan their palliative care needs. NDS: Objective 12: Improved end of life care for people with dementia. End of Life Care Strategy: Particularly 4.26-4.39 NICE CG 42:1. 10 Palliative care, pain relief and care at the end of life for people with dementia. National Council for Palliative Care: Difficult conversations in dementia

5.10	**People with dementia, while they have capacity, have the opportunity to discuss and make decisions, together with their carer/s.**	Service providers ensure staff are appropriately trained to provide information on advance care planning including: • Advance statements • Advance decisions to refuse treatment • Lasting Power of Attorney • Preferred Priorities of Care Health and social care professionals offer the person with dementia, whilst they have capacity, the opportunity to discuss and make decisions together with their carer/s.	Evidence of local protocols on the discussion of advance decision making.	NICE QS1 5: Decision making National Council for Palliative Care: Difficult conversations in dementia
5.11	**Safeguarding for people with dementia**	Evidence of staff being aware how to respond to safeguarding issues	Has safeguarding policy in place (evidence of consideration whether there is any Deprivation of Liberty [DoLs]) If there is someone on a DoLs staff are aware of what this means for that individuals care	MCA 2005 NICE QS1 5: Decision making SCIE 4: Common Safeguarding Issues
5.12	**Data collection for people with dementia**	Contributes to the wider collection (local and national) of data on people with dementia and cognitive impairment relevant to the setting being commissioned Evidence that care setting is informed about their current client group composition Evidence that managers actively listen to	Numbers diagnosed with a dementia Number of people with cognitive impairment Numbers diagnosed who have care plan Staff feedback Feedback from people with dementia and their carers Evidence of involvement in evaluation	NDS: Objective 15: Improved assessment and regulation of health and care services and of how systems are working for people with dementia and their carers. NDS: Objective 17: Effective national and regional support for implementation of the Strategy. NSF OP: Standard 2: Person Centred Care

		staff Evidence of service evaluation and improvement		NHS OF: Domain 2 – Enhancing quality of life for people with long-term conditions
5.13	**Support for carers**	Carers needs assessed	Evidence of carers (mental and physical) needs being assessed Knowledge of how to refer for carers assessment and support	Carers Trust: The Triangle of Care
5.14	**Information for people with dementia and their carers**	Easy access to advice (such as benefits) and information (such as voluntary services) which is in a dementia friendly format See also London Dementia SCN guidance on signposting [available November 2014]	Evidence of easy access to sites/material to give information to relatives and person with dementia Evidence of feedback from service user and carers on this information/advice	NDS: Objective 3: Good quality information for those with dementia and their carers SCIE guide 52: Residents' entitlements and requirements
5.15	**Environment suitable for people with dementia (this will vary in degree depending if in own home or in institution)**	Evidence of consideration of principles of dementia friendly design e.g. uncluttered environment, avoidance of heavily patterned furnishings, use of colour / landmarks to assist way-finding, appropriate lighting Access to outside space, Aspirational - ideally without steps Range of suitable seating (as maintaining posture and mobility can be affected in dementia) Use of technology to optimise self-	Evidence that the environment has been taken into account Evidence that staff understand the role of environmental design /factors in optimising care	NICE QS 30: Standard 7: Design and adaptation of housing. Stirling University Dementia Design Guides King's Fund Developing supportive design for people with dementia Alzheimer's Society: Dementia-Friendly Technology Charter

		management and help co-ordinate agencies involved e.g. medication lists, "This is Me", Gold Standards Framework, telecare Access to Pressure relieving cushions Beds should be suitable to need e.g. pressure relieving, adjustable Dementia-friendly signage		
5.16	**Understanding dementia/training**	Staff to have the necessary knowledge of dementia to recognise possible indicators of dementia in people in their care Staff awareness of the common symptoms of dementia Staff ability to deliver care accounting for individual needs and preferences London Dementia SCN: Training Standards	Evidence of individualised care planning Use of life histories Evidence of workforce development Evidence of standards and regulation of these standards Development of trained and confident care worker Feedback from people with dementia and their carers	NSF OP: Standard 2: Person Centred Care NICE QS50: Quality statement 2: Personal identity NICE QS50: Quality statement 4: Recognition of sensory impairment NICE DP - Training in Dementia Care NDS: Objective 13: An informed and effective workforce for people with dementia. SCIE guide 52: Workforce development, standards and regulation London Dementia SCN: Training Standards
5.17	**Presence of named dementia lead to ensure implementation**	Named person who is knowledgeable about how to meet needs of person with dementia to sustain change	Evidence of effectiveness of role (feedback from staff)	NAD: National Report 2013 NDS: Objective 8: Improved quality of care for people with dementia in general hospitals. NICE SC1: Managing medicines in

				care homes: 3 Evidence and Recommendations Counting the Cost: Recommendation 3
5.18	**Person with dementia and their carers involved in service development**	Service users and carers are involved with the development and continued evaluation of services	Evidence of person with dementia being involved Evidence of carer involvement	Carers Trust: The Triangle of Care

6. Key

1. Alzheimer's Society: Dementia-Friendly Technology Charter (Alzheimer's Society, 2014)
2. Alzheimer's Society BPSD - Optimizing treatment and care for people with behavioural and psychological symptoms of dementia (Alzheimer's Society, 2011)
3. Caring for our future: Caring for our future: reforming care and support. (HM Government, 2012)
4. Counting the Cost. Counting the cost Caring for people with dementia on hospital wards. (Alzheimer's Society 2009)
5. DH Quality Outcomes for People with Dementia - Department of Health Quality Outcomes for People with Dementia: Building on the National Dementia Strategy (DH, 2010)
6. Douglas et al (2004) Non-pharmacological interventions in dementia. Advances in Psychiatric Treatment: 10:171-177
7. End of Life Care Strategy - End of Life Care Strategy: Promoting high quality care for all adults at the end of life (DH, 2009)
8. GPC- Living well with dementia: A National Dementia Strategy Good Practice Compendium – an assets approach (DH, 2011)
9. JCPMH - Joint Commissioning Panel for Mental Health: Guidance for commissioners of dementia services (JCPMH, 2012)
10. MCA (2005) - Mental Capacity Act. (HM Gov., 2005).
11. NAD - National Audit of Dementia Care in General Hospitals: National Report 2013. (Royal College of Psychiatrists)
12. NCF: National Care Forum (2007) Key principles of person-centred dementia care: statement of best practice. (NCF, 2007)
13. NDD - National Dementia Declaration (Dementia Action Alliance, 2010)
14. NDS - National Dementia Strategy (DH, 2009)
15. NHS London - Guidelines for discontinuation and reduction of antipsychotics in dementia patients in the community (NHS London, 2012)
16. NHS OF - NHS Outcomes Framework 2013/14 (NHS Confederation, 2013)
17. NICE CG 42 - Dementia Supporting people with dementia and their carers in health and social care (NICE, 2006)
18. NICE CG 103 - Delirium: Diagnosis, prevention and management (NICE, 2010)
19. NICE CMG48 support for commissioners of dementia care (NICE, 2013)
20. NICE DP - NICE Dementia Pathway (NICE, 2011 - updated 2014)
21. NICE QS1 - Dementia Quality Standard (NICE, 2010)

22. NICE QS 30 - Supporting people to live well with dementia (NICE, 2013)
23. NICE QS 50 - Mental Wellbeing of Older People in Care Homes (NICE, 2013)
24. NICE: SC1 Managing medicines in care homes (NICE, 2014)
25. NICE: TA217 Donepezil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease (NICE, 2011)
26. NSF OP - National Service Framework for Older People (DH, 2001)
27. PHE.: Public Health England: The Blackfriars Consensus (PHE, 2014)
28. QOF Guidance Quality Outcome Framework Guidance 2014/15 General Medical Services (GMS) Contract Quality and Outcomes Framework (QOF) Guidance for GMS Contract 2014/15. NHS Confederation (2014)
29. RCN - Royal College of Nursing: Commitment to the care of people with dementia in hospital settings (RCN, 2013)
30. SCIE Guide 4 - Commissioning care homes: common safeguarding challenges. (SCIE, 2014)
31. SCIE Guide 15: Dignity in Care (SCIE, 2011)
32. SCIE Guide 47 - Personalisation: a rough guide (SCIE, 2012)
33. SCIE Guide 52 - GP services for older people: a guide for care home managers (SCIE, 2013)
34. SCN: Immediate post diagnosis support - London Dementia Strategic Clinical Network Guidance on Immediate Post Diagnosis Support (LDSCN, 2014)
35. SCN: Recognition Schemes - London Dementia Strategic Clinical Network Guidance on Recognition Schemes (LDSCN, 2015)
36. SCN: Signposting - London Dementia Strategic Clinical Network Guidance on Signposting (LDSCN, 2014)
37. SCN: Training Standards - London Dementia Strategic Clinical Network Guidance on Training Standards (LDSCN, 2014)

Further reading/sources:

QS50 Mental wellbeing of older people in care homes: support for commissioning (NICE, 2013)
Contracting for quality: Driving up standards for people with dementia in care homes (Alzheimer's Society, 2010).

References

Alzheimer's Disease International (2011). *World Alzheimer Report 2011: The benefits of early diagnosis and intervention*. Available online at: http://www.alz.co.uk/research/world-report-2011 Accessed 28.09.14

Alzheimer's Society (2009). *Counting the Cost. Counting the cost Caring for people with dementia on hospital wards.* Available online at: http://alzheimers.org.uk/site/scripts/download_info.php?fileID=787 Accessed 07.09.14

Alzheimer's Society (2014). *Dementia-friendly technology charter*. Available online at: http://www.alzheimers.org.uk/site/scripts/download_info.php?downloadID=1452 Accessed 28.09.14

Alzheimer's Society (2011). *Optimising treatment and care for behavioural and psychological symptoms of dementia: A best practice guide*. Available online at: http://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=1163 Accessed 28.09.14

Alzheimer's' Society (2014). *The Dementia Guide.* Available online at: http://www.alzheimers.org.uk/site/scripts/download_info.php?fileID=1881 Accessed 29.09.14

Bennett, L. & Humphries, R (2014). 'Making best use of the Better Care Fund Spending to save?' King's Fund. Available online at: http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/making-best-use-of-the-better-care-fund-kingsfund-jan14.pdf Accessed 29.09.14

Carers Trust (2013). *The Triangle of Care: Carers included: A Guide to Best Practice for Dementia Care*. Available online at: http://www.rcn.org.uk/__data/assets/pdf_file/0009/549063/Triangle_of_Care_-_Carers_Included_Sept_2013.pdf Accessed 29.09.14

Clarke et al. (2013) *Healthbridge: The national evaluation of peer support networks and dementia advisers in implementation of the national dementia strategy for England. Available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/246406/Demonstrator_Sites_Evaluation_-_Final_Report_Master.pdf Accessed 29.09.14*

Dementia Action Alliance (2014). 'National Dementia Declaration'. Available online at: http://www.dementiaaction.org.uk/nationaldementiadeclaration Accessed 28.09.14

Department of Health (2008). *End of Life Care Strategy: promoting high quality care for adults at the end of their life*. Available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136431/End_of_life_strategy.pdf Accessed 28.09.14

Department of Health (2009) *Living Well With Dementia: a national dementia strategy*. Available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/168220/dh_094051.pdf Accessed 28.09.14

Department of Health (2001). *National Service Framework for Older People*. Available online at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/198033/National_Service_Framework_for_Older_People.pdf Accessed 28.09.14

Department of Health (2010). *Quality Outcomes for People with Dementia: building on the work of the national dementia strategy*. Available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213811/dh_119828.pdf
Accessed 28.09.14

Douglas et al (2004) 'Non-pharmacological interventions in dementia'. Advances in Psychiatric Treatment: 10:171-177 Available online at: http://apt.rcpsych.org/content/10/3/171.full Accessed 29.09.14

Healthcare for London (2011). *Dementia Services Guides*. Available online at: http://www.londonhp.nhs.uk/publications/dementia/ Accessed 28.09.14

Health Innovation Network *My Brain Book* (under development). Information available online at: http://www.hin-southlondon.org/projects/my-brain-book Accessed 29.09.14

Joint Commissioning Panel for Mental Health (2012) *Guidance for commissioners of dementia services*. Available online at: http://www.rcpsych.ac.uk/pdf/JCP-MH%20dementia%20(March%202012).pdf Accessed 29.09.14

King's Fund (2013) 'Developing supportive design for people with dementia'. Available online at:
http://www.kingsfund.org.uk/search/site/dementia%20design Accessed 29.09.14

National Audit of Dementia (2013). Royal College of Psychiatrists' Centre for Quality Improvement. Available online at: http://www.hqip.org.uk/assets/NCAPOP-Library/NCAPOP-2013-14/NAD-NATIONAL-REPORT-12-June-2013.pdf Accessed 28.09.14

National Care Forum (2007) 'Key principles of person-centred dementia care: statement of best practice'. Available online at: http://www.scie-socialcareonline.org.uk/key-principles-of-person-centred-dementia-care-statement-of-best-practice/r/a11G00000017tyfIAA Accessed 28.09.14

National Council for Palliative Care: *Difficult conversations in dementia*. Available online at: http://www.ncpc.org.uk/difficult_conversations Accessed 28.09.14

NHS Confederation (2013) *NHS Outcomes Framework* Available online at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/213055/121109-NHS-Outcomes-Framework-2013-14.pdf Accessed 28.09.14

NHS Confederation (2014). *Quality Outcome Framework Guidance 2014/15 General Medical Services (GMS) Contract Quality and Outcomes Framework (QOF) Guidance for GMS Contract 2014/15*. Available online at: http://bma.org.uk/practical-support-at-work/contracts/independent-contractors/qof-guidance Accessed 28.09.14

NHS England (2014). *Avoiding Unplanned Admissions Guidance*. Available online at: http://www.england.nhs.uk/ourwork/commissioning/gp-contract/ Accessed 29.09.14

NHS England (London) Dementia Strategic Clinical Network (2015). *Guide to Dementia Training for Health and Social Care Staff in London* Available online at: http://www.londonscn.nhs.uk/?p=1329 Accessed 08.07.15

NHS England (London) Dementia Strategic Clinical Network (2015). *Guidance on the Content of Delirium Policies* Available online at: http://www.londonscn.nhs.uk/?p=1243 Accessed 08.07.15

NHS England (London) Dementia Strategic Clinical Network (2015). *Managing Pain For People With Dementia* Available online at: http://www.londonscn.nhs.uk/?p=1231 Accessed 08.07.15

NHS London (2013) *London Antipsychotics Audit and Reduction Exercise in Primary Care*. Available online at: http://www.medicinesresources.nhs.uk/upload/documents/Communities/SPS_E_SE_England/London_AP_Audit_and_Reduction_Exercise_in_Primary_Care_Vs1_Sep%2013.pdf Accessed 29.09.14

NICE (2006) 'CG42: Dementia: Supporting people with dementia and their carers in health and social care'. Available online at: http://www.nice.org.uk/guidance/cg42 Accessed 29.09.14

NICE (2010) 'CG103: Delirium: Diagnosis, prevention and management'. Available online at http://www.nice.org.uk/guidance/cg103/resources/guidance-delirium-pdf Accessed 28.09.14

NICE (2013) 'CMG48: Support for commissioning dementia care'. Available online at: http://www.nice.org.uk/guidance/cmg48 Accessed 29.09.14

NICE (2014) 'Dementia Pathway'. Available online at: http://pathways.nice.org.uk/pathways/dementia Accessed 28.09.14

NICE (2010) 'QS 1 Dementia Quality Standard'. Available online at: https://www.nice.org.uk/guidance/qs1 Accessed 29.09.14

NICE (2013) 'QS 30: Quality standard for supporting people to live well with dementia'. Available online at: https://www.nice.org.uk/guidance/qs30 Accessed 28.09.14

NICE (2013) 'QS50: Mental wellbeing of older people in care homes'. Available online at: http://www.nice.org.uk/guidance/qs50 Accessed 28.09.14

NICE (2014) 'SC1: Managing medicines in care homes'. Available online at: http://www.nice.org.uk/guidance/sc1/resources/guidance-managing-medicines-in-care-homes-pdf Accessed 28.09.14

NICE (2011) 'TA217 Donepezil, galantamine, rivastigmine and memantine for the treatment of Alzheimer's disease'. Available online at: http://www.nice.org.uk/guidance/ta217 Accessed 29.09.14

Public Health England (2014) 'The Blackfriars Consensus' Available online at: https://www.gov.uk/government/news/call-for-new-policy-focus-on-brain-health-to-reduce-the-risk-of-dementia Accessed 28.09.14

Royal College of Nursing (2013) *Dementia: Commitment to the care of people with dementia in hospital settings*. Available online at: http://www.rcn.org.uk/__data/assets/pdf_file/0011/480269/004235.pdf Accessed 28.09.14

SCIE (2013) 'Guide15: Dignity in care'. Available online at: http://www.scie.org.uk/publications/guides/guide15/index.asp Accessed 28.09.14
SCIE (2012) 'Guide 47: Personalisation: a rough guide'. Available online at: http://www.scie.org.uk/publications/guides/guide47 Accessed 28.09.14

SCIE (2013) 'Guide 52: GP services for older people: a guide for care home managers'. Available online at: http://www.scie.org.uk/publications/guides/guide52/ Accessed 28.09.14

SCIE (2012) 'Commissioning care homes: common safeguarding challenges'. Available online at: http://www.scie.org.uk/publications/guides/guide46/commonissues/ Accessed 28.09.14
UK Gov. (2005) *Mental Capacity Act* Available online at: http://www.legislation.gov.uk/ukpga/2005/9/contents Accessed 29.09.14.

University of Sterling (2014) *Dementia Design Guides*. Available online at: http://dementia.stir.ac.uk/design/design-guides Accessed 29.09.14