


Dementia Carers Zoom Forum

4th November 2020



1	Present
	<p>Carers 7</p> <p>Carers in Herts Sally Stratford – Involvement and Development Worker Dementia</p> <p>Guest Speakers Karen Malone – Involvement and Development Worker Kate Grainge Charlotte Mayhew Amanda Stratford Mental Health Services for Older People Hertfordshire Partnership University NHS Foundation Trust</p>
2	Welcome
	<p>All carers were welcomed and introductions were completed. Carers were informed that the presentation and notes would be sent out to all who has attended. Carers were also informed that it was an informal session and to raise their hand if they had a question or comment.</p>
3	Taster Training session – Kate Grainge
	<p>Kate Grainge delivered the following taster session to give carers an idea of the training that they offer to carers:</p> 

Introduction

- Dementia types
- What part of brain controls speech
- What types of dementia does your loved one have?
- Pop in chat if you are happy to share.

Dementia: different types

Alzheimer's Disease ~60%

Protein build up in brain, cells die - atrophy

Vascular Dementia ~20%

Poor blood supply to brain, strokes, fluctuations

Lewy body Dementia ~15%

Like Parkinson's Disease- movement disorder, hallucinations, fluctuations

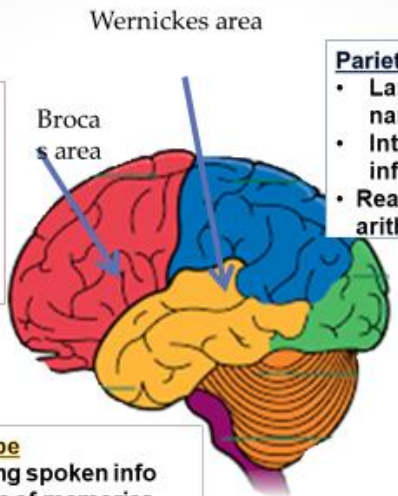
Fronto-temporal Dementia (+others ~5%)

Younger, personality, behaviour and language changes

Alcohol related dementia- Korsakoff's syndrome

Often younger, can resolve if stop drinking excessive alcohol





Frontal Lobe

- Problem solving
- Self-monitoring
- Understanding sarcasm
- Motivation
- Motor Speech

Broca's area

Wernicke's area

Parietal lobe

- Language – naming/recognition
- Integration of Sensory information
- Reading, Writing, arithmetic

Occipital lobe

- Visual information
- Perception
- Reading

Temporal lobe

- Processing spoken info
- Formation of memories
- Word retrieval, verbal memory

Role of different areas of brain

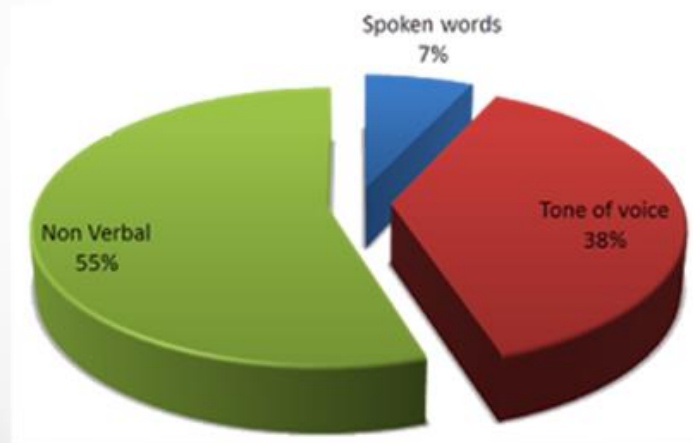
How much is words?

100%

How much of this is the words we use?

Put in the chat the percentage.
Not the tone, or the gestures just the words?

Verbal / non-verbal



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Things that can affect successful communication

Internal factors

- hearing, vision
- Illness
- Fatigue
- Motivation (depression)
- Personality



External factors

- Back ground noise
- Communication partner
- Body language



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To help understanding

- Think about speed and volume
- Simple vocabulary
- Concrete words whenever possible
- Short sentences
- Support spoken words with visuals (objects / written words / gestures/books)
- Write key words and names down



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To help with talking



- Give plenty of time (don't rush)
- Recap / summarise if they go off track / get stuck
- Provide words / names
- Don't correct mistakes
- Provide something to talk about – magazine articles, photo,
- Focus on opinions rather than facts
- Prime names – before social events
- Reassure – may need to come back to something later

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4 Questions and Comments

- What is an Occupational Therapist?

Occupational therapists look at the quality of life, what is important to the person and use practical occupational skills to help improve the persons life. We look at physical strength, cognition, behaviours, adaptations, and much more.

- Are the carers in a care home trained like this?

Different care homes have different training. The government do have a framework for training in care homes which includes dementia care. Hertfordshire Care Providers Association is a county wide service which supports care homes with a variety of services including the training for their staff. They offer a huge variety of training which is free for members, including for dementia. Please see this link for more information: <https://www.hcpa.info/>

- Not all care home staff have good English which can be difficult.

As we have just learnt in the training session, the words we use is actually only 7% of our communication, so this doesn't necessarily have to be a problem as long as they have basic English and have a caring nature they can still deliver good quality care.

- Would you lie when having a conversation with someone with dementia?

This is tricky – I would say that I would go with their thoughts and conversation rather than tackle the facts, if there is no risk involved. It can be less stressful for the person with dementia.

	<ul style="list-style-type: none"> • At the beginning of the dementia it can be difficult not to challenge and correct the person with dementia? There is also a big shift in the relationship and trust, and it can be difficult to adjust and not argue back. <p>We would suggest that you try changing the conversation, distracting them rather than challenging them. This is a new skill to learn as it is not what we naturally do but it can make things easier and be less distressing and stressful.</p> <ul style="list-style-type: none"> • Research is very important – the more people that get involved the, more they can learn and help to understand dementia. Whole body and organ donation are a difficult subject but one that is needed.
5	What sessions would be helpful/beneficial to you the carers?
	<p>Below are some of the training courses that we can offer:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Communication in Dementia <input type="checkbox"/> Managing Behaviours that Challenge Us <input type="checkbox"/> Information & Signposting (Benefits/Respite/Carers breaks etc) <input type="checkbox"/> Maintaining Independence & Living Well with Dementia <input type="checkbox"/> Meaningful Activities / Promoting Independence <input type="checkbox"/> Understanding Dementia (The SPECAL Method) <p>Discussion: Carers felt that they would all be beneficial including something around loss and change, sleep and stress, different types of dementia, the use of music, what health services are available for people with dementia and their carers including how to access them, and how to look after yourself as a carer including the guilt of taking time for yourself.</p> <p>Carers felt that a longer session of an hour would be needed, with perhaps half presentation/training then half a discussion time.</p>
6	How to access an occupational therapist.
	<p>You can visit your GP and ask them to make a referral for an occupational therapist or you can self-refer via single point of access, details are below:</p> <p>Single Point of Access</p> <p>Tel: 0800 6444 101</p> <p>Email: hpft.spa@nhs.net</p> <p>Website: https://www.hpft.nhs.uk/contact-us/</p>

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7	Closing comments and information
	<p>Carers were thanked for attending and invited to join the next session (details below). Carers were also asked if they would be interested in joining the dementia coproduction board – carers felt that they did not have the time to join a board currently as their caring roles and responsibilities where too high.</p> <p>The next session will be on Thursday 3rd December 2020 from 11am -12.30pm. We will be discussing the support available for carers from Hertfordshire County Council, including carers assessments. Please book a place by calling the office on 01992 58 69 69.</p> <p>Sally Stratford</p> <p>sally.stratford@carersinherts.org.uk</p>