

# Develop workforce

The rise in numbers of people with dementia will increase the need for health workforce capacity. Dementia knowledge is specialised and workforce capability needs addressing.

To ensure capability, the dementia workforce needs to hold, or work toward, nationally-recognised qualifications to deliver dementia care. A process for upskilling the general health workforce in dementia best practice standards is also required.

Care plans and service delivery by Primary Health Care teams and specialists should involve the person with dementia and their family. Care approaches should be person-centred and enable safe decisions.

Education and training providers need to understand the importance of applying knowledge of the person with dementia's life history to the delivery of care.

Paid carers and health professionals need to be adequately recompensed for the specialised nature of the work they do.

Accredit the experience of dementia carers towards formal dementia qualifications.

## Action

- Implement standards-based training in dementia for all medical students in both the preclinical and clinical years and all nursing staff and allied health professionals at undergraduate level.
- Provide appropriate dementia-specific training for all residential and hospital staff involved in the care of someone with dementia.
- Implement processes to upskill the health workforce in dementia best practice.
- Require appropriately skilled staff in service contracts with residential care facilities and care agencies.
- Ensure people with dementia receive quality dementia-specific programmes in residential care.
- Develop guidelines for family care and resource programmes on dementia care for family carers.

# Dementia research

New Zealand has the lowest level of funding for dementia research of all OECD countries. Funding needs to double and research agendas broaden to include social research and evaluation.

Medical, scientific and social research all contribute to reducing risks, delaying onset and slowing progression of dementia.

More research is needed to provide evidence to improve the quality of dementia care practices. Research into NZ-based service models and care pathways are required.

Research into factors delaying entry into residential care should be a priority. Provision of dementia-specific care within general settings needs thorough evaluation. Innovative models for respite care and community support require consideration.

Effective policy and planning for projected service provision requires ongoing collection of accurate population-based data. Consideration of the accessibility of service structures for Maori, Pacific and Asian people with dementia is required.

## Action

- Ensure ongoing collection of population-based data on dementia within Ministry of Health processes.
- Provide grants to residential care, respite, and support organisations to evaluate service innovation and document effective dementia care practices.
- Encourage DHBs to share quality dementia care practices in residential care and hospitals, as well as beneficial provider processes and tools.
- Determine appropriate care pathways for people with dementia through research, consultation and evaluation.
- Undertake assessment of dementia workforce needs and capabilities and model solutions.
- Undertake longitudinal research on the effectiveness of advance planning for people with dementia.

# New Zealand 2008 Dementia Manifesto

The number of people with dementia is rising. It's time to do more about the human and economic impacts. Alzheimers New Zealand calls on all parties to commit to a national dementia strategy.



- Every seven seconds someone in the world receives a diagnosis of dementia.
- An estimated 40,746 New Zealanders have dementia.
- By 2026 the number of New Zealanders with dementia is projected to increase to 74,821. By 2050 it is estimated there will be over 44,000 new cases of dementia a year in New Zealand.
- The total financial cost of dementia in New Zealand in 2008 is estimated at \$712.9 million.
- New Zealand has the lowest level of funding for dementia research of all OECD countries.

## Action

Commit to developing and resourcing a national dementia strategy that will:

1. Improve diagnosis and management of dementia.
2. Provide appropriate services to all people with dementia.
3. Provide support for people with dementia and their carers.
4. Develop the workforce to deliver quality dementia care.
5. Increase dementia research and the evaluation of dementia practices.



**"Making life better for all people affected by dementia"**

To contact your local Alzheimers Member Organisation: Freephone 0800-004-001

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# Diagnosis & management

**GPs require support to diagnose dementia. Resources need to be provided to undertake ongoing assessments and support self-management. Timely access to specialists and referral to community support services are vital for advance planning.**

People concerned about loss of memory and changes to their functioning, need accurate diagnoses. More sensitive diagnostic tools are required for early assessment. These should include assessment of decision-making (executive) functions.

Failure to make an early diagnosis of dementia reduces the time for advance planning and causes trauma and uncertainty for people with dementia, their families, and their workplaces.

Timely referrals to specialists and prompt referrals to Alzheimer organisations can assist with advanced care planning, and delay entry into residential care.

Education about risk reduction and self-management needs resourcing. Intervention guidelines need to be developed for PHOs, DHBs and community-based agencies to undertake monitoring and manage social behaviours.

## Action

- Provide GPs with a robust diagnostic tool for early diagnosis.
- Develop intervention guidelines to support dementia diagnosis and monitoring.
- Provide information on risk reduction, advance planning and supporting self-management of dementia.
- Provide community-based coordination of home help, medical and support services following diagnosis.
- Improve timeliness of referrals to dementia specialists.
- Ensure prompt referral processes to appropriate community supports.
- Provide funding for DHBs to develop and share best dementia care practices in Primary Health Care.

# Appropriate services

**More people with dementia means more demand on community support services, respite care services, residential care facilities and hospitals. Innovative approaches and service structures are called for to meet the specific issues and needs of people with dementia.**

A wide range of specialised care options is required from the time of diagnosis. Social enrichment activities can delay entry into residential care and reduce economic and social costs. Age-appropriate day activity programmes need to continue. A range of other home and community services need to be provided.

Providers of services assisting people with dementia to remain in the community need appropriate resourcing. Alzheimers NZ organisations provide the only community dementia-specific support.

Flexible DHB funding packages are required to meet the needs of people with dementia aged under 65 years of age.

Residential care facilities need to provide quality management of communication and safety issues, best practice therapeutic and diversional activities, and to keep antipsychotic medication to a minimum.

## Action

- Fund providers to deliver a full range of services for people with dementia to delay entry into residential care.
- Ensure policy to enable people to remain at home is resourced to include people with dementia.
- Provide cross sector funding from MoH / MSD for programmes that recognise the health value of social activity for people with dementia.
- Provide grants to community care providers to trial innovative dementia-specific programme and share success.
- Ensure and resource appropriate pathways of dementia-specific care for acute hospital admissions.
- Ensure community care packages are dementia-specific.

# Support carers

**Family carers are vital to the person they care for. They are socially and economically valuable to our society. Carers need to be resourced and supported to continue their role as long as they can.**

Dementia profoundly changes the lives of family, whanau and friends close to that person.

Carers develop a wealth of understanding about the person with dementia that can assist health professionals in the later stages of dementia.

Family crises can be reduced by the carer information, education and support provided by Alzheimers NZ organisations. However, funding is not keeping pace with rising demand.

To improve the health and safety of carers, people with dementia need accessible and age-appropriate respite care options.

Family carers need to be reimbursed for a range of care costs to assist them to maintain the person in their own home eg mileage and medication.

Raising community awareness of dementia could increase support for the person with dementia and the carer plus reduce the stigma of dementia.

## Action

- Ensure funding for dementia information, education and carer support services reflects increased demand.
- Increase availability of local dementia respite in rural areas.
- Increase the number of fully funded dementia beds for respite.
- Increase the subsidy for respite provided through carer support packages and ensure respite is available when required.
- Provide a range of respite options within home and residential care settings.
- Provide a range of practical supports to carers to enable them to maintain home-based care.
- Provide flexible financial reimbursements for family to provide a range of care.

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