

Timely accurate diagnosis and treatment planning



Mary

I know that I will have access to appropriate diagnosis when it is right for me. My assessment was sensitive enough to identify my difficulties while they were still mild
I received a more detailed assessment if my initial assessment was inconclusive
I was diagnosed early and my holistic needs were fully identified and my diagnosis was sensitively explained
I was involved in developing a clear plan for meeting my health needs that is reviewed regularly to address any changes
My GP, Health and Social Care Workers all understand what I am able to do and support me to make decisions for myself

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Pathway Area/ Statement	Tier 1: Foundation/Awareness	Tier 2: Intermediate/Practitioner	Tier 3: Advanced/Specialist
	Dementia awareness raising in terms of knowledge skills attitudes for all those working in health and care	Knowledge skills and attitudes for roles that have regular contact with people living with dementia	Enhancing knowledge, skills & attitudes for key staff (experts) working with people living with dementia designed to support them to play leadership roles
Recognise early signs of Dementia - selecting the most sensitive tools in order to detect functional cognition changes at an early stage and knowing how and when to request/administer more sensitive/detailed assessment when brief tools are inconclusive. Understand support/treatment available	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • causes of dementia and reversible causes of memory loss and mild cognitive impairment (MCI) • how the assessment of individuals may be a complex process • the causes of dementia, and the changes that occur as a result, and how these may be expressed by an individual. 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • the importance of a full medical history, laboratory tests, imaging, physical examination, characteristic changes in cognition function and behavior, in diagnosing dementia. • the implications of testing and diagnosis, who may be available to help, and the process now involved • interventions that are available depending on the type and stage of the dementia • the dementia support services that are available. 	<p>Ability to:</p> <ul style="list-style-type: none"> • provide specialist supervision and consultation on how to identify hard to recognize or rare manifestations of dementia
Recognise early signs of Dementia - selecting the most sensitive tools in order to detect functional cognition changes at an early stage and knowing how and when to	<p>Ability to:</p> <ul style="list-style-type: none"> • recognise what may be early signs of dementia and use appropriate communication strategies. 	<p>Ability to:</p> <ul style="list-style-type: none"> • give information, advice, guidance and support with reference to assessment and the possible outcome, and who may help • carry out the diagnostic process • take into account a positive 	<p>Ability to:</p> <ul style="list-style-type: none"> • provide specialist advice, and consultation when people present with non-standard signs and symptoms

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request/administer more sensitive/detailed assessment when brief tools are inconclusive and understand the support/treatment available		<p>diagnosis is a distressing and life changing event</p> <ul style="list-style-type: none"> • recognise when to refer individual for additional assessments • carry out referral for further assessment. • Interpret test result 	
National Occupational Standards	Tier 2 and Tier 3: CHS38 CHS39 CHS118 CHS42 CHS99 CHS83		
Appropriate investigations undertaken by suitably qualified and skilled staff; ruling out reversible causes of memory loss and mild cognitive impairment (MCI)	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • behavioural changes related to dementia. <p>Ability to:</p> <ul style="list-style-type: none"> • communicate effectively with the individual and make arrangements in a manner that helps the individual to comply with the process taking account of their anxieties or agitation • reassure and support an individual anticipating a particular diagnosis. 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • the process and governance issues related to the diagnostic process • physical conditions that may be responsible for symptoms of dementia • behavioural changes related to dementia • suitable examinations and test including bio markers, memory and mental/cognitive tests • when each should be used and the relevance of their potential outcomes. <p>Ability to:</p> <ul style="list-style-type: none"> • identify and request appropriate 	<p>Ability to:</p> <ul style="list-style-type: none"> • provide specialist advice and consultation when people present with non-standard signs and symptoms

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		<p>investigations</p> <ul style="list-style-type: none"> • take and record a history from an individual who may be anxious, nervous or agitated • carry out investigations that will assess memory, cognition, mental health, and/or physical examinations. 	
National Occupational Standards (NOS)	Tier 1,2 and 3: CHS168 CHS217 CHS132.2013 CHS19.2012 Tier 2 and Tier 3 CHS38 CHS40 CHS167 CHS118 CHS39		
Sensitively communicate diagnosis	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • how to ensure ongoing support to help accept diagnosis. <p>Ability to:</p> <ul style="list-style-type: none"> • take into account and help to manage the shock and anger that the individual and family may experience. 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> • the resources to support people prior to, at, and post diagnosis • facilitating difficult conversations • how to address stigma and prejudice • the benefits of diagnosis • how technical support e.g. apps, can be used to help at this time. <p>Ability to:</p> <ul style="list-style-type: none"> • give advice, information and guidance re support available to help manage the initial impact and effects of dementia and its diagnosis. • give advice and support, for instance pre-diagnosis, to enable the person to make an informed decision 	<p>Ability to:</p> <ul style="list-style-type: none"> • communicate diagnosis in a sensitive manner, and in a way that can be understood by the individual, family and carers • follow up with post diagnosis education and advise and encourage individual to inform pharmacist, dentist, podiatrist etc. of diagnosis.

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National Occupational Standards (NOS)	Tier 1,2 and 3 Tier 2 and Tier 3 Tier 3	SCDHSC0226 SCDHSC0419 SCDHSC0026 GEN99 CHS177 CHS48 GEN62 CHS56	
Mental capacity assessment	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> possible indicators of dementia the memory clinic process <p>Ability to:</p> <ul style="list-style-type: none"> identify when an individual expresses non cognitive signs of dementia contribute to a Mental Capacity Assessment offer responses and manage difficult situations and emotions both own and from others 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> assessment tools, how they are used and what they indicate the Mental Capacity Act, Mental Capacity Assessment and who should be involved the implications, processes and outcomes associated with Mental Capacity Assessment <p>Ability to:</p> <ul style="list-style-type: none"> use indicators such as: an independent consultation with the person with dementia the rates of use of antipsychotics and anti-depressive medicines death rate compared to death rate of those without dementia in a unit performance monitoring tools to monitor the care programme approach, communicate and share information with mental health teams to ensure a positive outcome for the individual lead on carrying out a Mental 	

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		<p>Capacity Assessment</p> <ul style="list-style-type: none"> refer on to specialist services for example: speech and language therapy, occupational therapy, clinical psychology, dietetics use specialist skills to find innovative ways to engage, communicate and enable people with dementia and their carers to make decisions 	
National Occupational Standards (NOS)	Tier 1,2 and 3: SCDHSC0226 Tier 2 and Tier 3: CHS52 CHS230		
Assessment processes including non-cognitive symptoms/behaviour perceived as challenging	<p>Knowledge and understanding:</p> <ul style="list-style-type: none"> awareness of behaviour as communication. <p>Ability to:</p> <ul style="list-style-type: none"> respond positively to behaviour to validate, recognise the feeling or emotion, to reassure and offer a response. 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> behaviour as an expression and communication of feelings biopsychosocial model of evaluation of behaviour, which may be multi-factorial, e.g. isolation, pain, noise. <p>Ability to:</p> <ul style="list-style-type: none"> apply the biopsychosocial model to recognise the cause of distress/behaviour and respond appropriately. 	<p>Ability to:</p> <ul style="list-style-type: none"> assess complex presentations of behaviour and plan a multifactorial response.
National Occupational Standards (NOS)	Tier 1, 2 and 3: SCDHSC0226 Tier 2 and Tier 3: GEN99 CHS230 CHS39		

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Processing information and formulation		<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> formulation as a process of making sense of the information gathered in an assessment and using that information to make a productive way of helping the individual. <p>Ability to:</p> <ul style="list-style-type: none"> take part and contribute to the process of formulation using the information to develop a meaningful care plan, involving the individuals as much as possible. 	<p>Ability to:</p> <ul style="list-style-type: none"> offer specialist support and consultation to teams in the formulation process
National Occupational Standards	Tier 2 and Tier 3: FMH1 CHS45		
Treatment planning including palliative care	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> the individual, their preferences, and how they may be recorded as soon as possible for future reference the particular issues of young onset dementia the range of dementias, types and prognoses for example alcohol related dementia 	<p>Knowledge and understanding of:</p> <ul style="list-style-type: none"> the multidisciplinary team and who should be part of it, may include for example occupational therapist, social worker, falls prevention service, psycho geriatrician or geriatrician benefits of forward planning to avoid crisis, e.g. accommodation and health needs the process and implications of 	

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	<p>Ability to:</p> <ul style="list-style-type: none"> • maintain an active current care plan, with regular reviews. 	<p>advanced care planning</p> <ul style="list-style-type: none"> • how to enable/empower people to have difficult conversations. <p>Ability to:</p> <ul style="list-style-type: none"> • plan treatment with the individual concerned and multidisciplinary team • plan treatment for palliative care/ advanced care planning with individual concerned and multidisciplinary team • take into account longer term housing options to reduce transitions, including assistive technology, aids & adaptations • forward plan to manage risk and avoid a future crisis • utilise and take account of documents which express the character and requirements of the individual in the planning process. 	
National Occupational Standards (NOS)	Tier 1, 2 and 3: SCDHSC0025 Tier 2 and Tier 3: CHS45 CHS41 CHS44		