What do we think?
We welcome this first step while recognising that real progress will require strategic financial investment and a new social and community approach to dementia. The priority actions in the Strategy have the potential, if implemented, to significantly improve rates of diagnosis and people’s journey through the health and social care system. In addition, implementation of priority area one will, it is hoped, significantly reduce stigma as people begin to understand and become more aware of dementia.

The Alzheimer Society of Ireland utilised the opportunity, as a member of the collaborative National Dementia Strategy Working Group, to ensure that the views of our members, people with dementia and family carers were represented and informed the development of the Strategy. Many of the priority issues in our 2012 submission have been included in the strategy, including those relating to clinical leadership, assistive technologies, dementia care pathways, awareness raising, education, research and the values and principles underpinning the document.

As with all policy documents developed in a collaborative manner there are certain aspects of the Strategy that have not met our expectations. One such area is the lack of priority given to the needs of people with younger onset dementia and the absence of a commitment to remove age discrimination barriers in the health system. In addition, there is little focus on residential care. There is also very little in the priority actions that gives rise to a new social and community approach to dementia or prioritises the development of the Dementia Friendly Community model. We do welcome the identification of new HSE leadership around dementia, but are disappointed that this is not mirrored within the Department of Health.

What will the ASI do?
The Strategy presents The Alzheimer Society of Ireland with opportunities to influence how living with dementia can be transformed. Our work will assist the implementation of the 14 priority actions outlined in the strategy in the following ways:

- We will continue to raise public awareness of dementia and challenge the stigma that surrounds it.
- Our Dementia Adviser service will provide information supports to people with dementia and their families throughout their journey.
- Alongside the Dementia Advisers our information service will continue to produce high quality information materials and resources and provide additional support through our helpline.
- We will strengthen our education and training for family carers while also strengthening the skills of staff and volunteers.
- We will continue to develop our community supports for people during all stages of dementia.

The Alzheimer Society of Ireland will also play a role in monitoring the implementation of the Strategy.

Funding
The Department of Health and the Health Service Executive have allocated €14.7 million in matched funding to a grant from Atlantic Philanthropies, generating a combined total of €30 million to implement three key areas of the Strategy. This money has been ring-fenced to fund intensive home care supports, GP education and training, and dementia awareness.

In addition, €4.7 million has been allocated for research funding into dementia. The Health Research Board is responsible for the administration of this funding. As a result we should see an increase in the level of dementia research being undertaken over the coming years.

A Short Guide to the National Dementia Strategy.

In December 2014 the Department of Health published Ireland’s first National Dementia Strategy (NDS). Over the three years it was developed, The Alzheimer Society of Ireland (ASI) worked with the Government to ensure that the concerns and interests of people with dementia and their carers were heard and considered in the Strategy. This short guide to the National Dementia Strategy outlines the priority areas identified by the Government in which they believe they can improve the lives of people with dementia.

The National Dementia Strategy is a response from Government to address dementia at a national level. It aims to meet the needs of the 48,000 people currently living with dementia and the expected increase of people who will live with dementia in the future. Despite the growing challenge that dementia presents, until now it has been a neglected, under-funded and under-prioritised health issue in the Irish health and social care system.

From our experience working with people with dementia and their carers, we know they are often left feeling isolated and frustrated by their experience of living with dementia. In advance of the 2011 general election the ASI ran a campaign titled ‘Prioritising Dementia - Towards a National Strategy’, to secure a commitment in the next Programme for Government for a National Dementia Strategy. ASI staff, volunteers, family carers and people with dementia lobbied across the country to secure this commitment, motivated by the knowledge that lives can be transformed if dementia is made a national priority.

What is in the NDS?
The National Dementia Strategy (NDS) is a first step to this transformation. It sets out the Government’s plan to meet the needs of people with dementia and their families and carers.

There are six priority areas within the strategy. Across these six areas are 14 priority actions and under each a number of additional actions.

The table in this document summarises each of the six priority areas and lists the relevant actions under each. The full strategy is available on the Department of Health’s website, see www.alzheimer.ie*

* www.alzheimer.ie/Asi/Attaches/ASNDS2014.pdf
### 14 Priority Actions

**Better Awareness and Understanding**
- **HSE** to implement public awareness and health promotion measures to:
  - provide a better understanding of dementia in society.
  - reduce stigma.
  - target populations particularly at risk.
  - implement the National Physical Activity encouraging the population to be more physically active.

**Timely Diagnosis and Intervention**
- **HSE** to develop a National and Local Dementia Care Pathway.
- **HSE** to develop material for GPs:
  - dementia reference material.
  - on care pathways to investigation and diagnosis.
  - info on health and social supports in the community.

**Integrated Services, Supports and Care for People with Dementia and their Carers**
- **HSE** to critically review health and personal social services for people with dementia.
- **HSE** to consider how best to use existing resources for home care packages and respite care and improve the supports available for carers to facilitate people with dementia to live at home.
- **HSE** to evaluate the potential of assistive technology to support carers and people with dementia.
- **HSE** to ensure information on how to access advocacy services, voluntary organisations and other support services is routinely given to people with dementia and their families/carers.

**Hospitals** to prioritise the assessment of social and environmental supports to meet the needs of people with dementia and their carers.
- **HSE** to develop guidelines on dementia-friendly ward specification for the design stage of all refurbishments and new builds.
- **HSE** to ensure dementia specific care pathways through Emergency Departments and Acute Medical Units.
- **HSE** to develop programmes and policies to ensure the use of the carer assessment component of the Single Assessment Tool.
- **HSE** to develop and implement a dementia and delirium care pathway.
- **HSE** to assign a senior clinician within each hospital to lead the development, implementation and monitoring of the pathway.
- **HSE** to ensure data on dementia care in Ireland.

**Research and Information Systems**
- **HSE** to develop appropriate training courses for family and other informal carers in keeping with priorities highlighted in the National Educational Needs Analysis completed by the HSE in 2009 and Dementia Skills Elevator 2014.
- **HSE** to ensure data from the Single Assessment Tool is factored into research to inform dementia care in Ireland.
- **HSE** to take measures to ensure appropriate recording and coding of dementia in primary care and the development of practice-based dementia registers.
- **HSE** to ensure data is captured on HIPE (Hospital In-Patient Enquiry).

**Leadership**
- **Clear overall responsibility for dementia will be assigned to a person at HSE senior management level.**
- **The HSE Clinical Strategy and Programmes Division to establish a work stream on Dementia Care as part of its Integrated Care Programme for Older Persons.**
- **Within primary care services, a key worker to play a key role in co-ordinating each patient’s care and promoting continuity.**

### 6 Priority Action Areas

<table>
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<tr>
<th>Better Awareness and Understanding</th>
<th>Timely Diagnosis and Intervention</th>
<th>Integrated services, supports and care for people with dementia and their carers</th>
<th>Training and Education</th>
<th>Research and Information Systems</th>
<th>Leadership</th>
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<tr>
<td><strong>HSE</strong> to implement public awareness and health promotion measures to:</td>
<td><strong>HSE</strong> to develop a National and Local Dementia Care Pathway.</td>
<td><strong>HSE</strong> to critically review health and personal social services for people with dementia.</td>
<td><strong>HSE</strong> to encourage and facilitate the provision of dementia-specific training, including continuous professional development, to relevant occupational and professional groups, including peer-led support and education for GPs, and to staff of nursing homes.</td>
<td><strong>Clear overall responsibility for dementia will be assigned to a person at HSE senior management level.</strong></td>
<td><strong>The HSE Clinical Strategy and Programmes Division to establish a work stream on Dementia Care as part of its Integrated Care Programme for Older Persons.</strong></td>
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<td><strong>Department of Health and HSE</strong> to consider how best to promote a better understanding of dementia among staff of frontline public services, as part of the Health-Promoting HSE Initiative.</td>
<td><strong>HSE</strong> to develop material for GPs:</td>
<td><strong>HSE</strong> to consider how best to use existing resources for home care packages and respite care and improve the supports available for carers to facilitate people with dementia to live at home.</td>
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<td><strong>HSE</strong> to promote awareness of the Assisted Decision-Making (Capacity) Bill, when enacted and support people with dementia to participate in all decisions that affect them.</td>
<td><strong>HSE</strong> to consider the provision of Dementia Advisers on the basis of the experience of demonstrator sites, with an appropriate number of Advisers to be dedicated to the needs of those with early-onset dementia.</td>
<td><strong>HSE</strong> to evaluate the potential of assistive technology to support carers and people with dementia.</td>
<td><strong>HSE</strong> to ensure data is captured on HIPE (Hospital In-Patient Enquiry).</td>
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<td><strong>HSE</strong> to examine the issues arising regarding assessment of people with Down Syndrome and other types of intellectual disability.</td>
<td><strong>Department of Health to formulate proposals and timelines for the regulation of home and community care services for older people.</strong></td>
<td><strong>HSE</strong> to ensure data from the Single Assessment Tool is factored into research to inform dementia care in Ireland.</td>
<td><strong>HSE</strong> to develop approaches to promote continuity.</td>
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<td><strong>The decision by Government to publish Ireland’s first National Dementia Strategy is an important milestone for public health policy in this country and for the 48,000 people living with the condition, as a lack of diagnosis and referral to the appropriate services needs to be vastly improved. Adequate home care supports to enable people to live well in the community are also critical and with stigma still a real issue, greater public awareness is crucial. The publication of the Strategy is a first step and we must now turn our attention to it’s implementation. With Government and Atlantic Philanthropy funding, the strategy is a real opportunity to transform this potential into actual results for the lives of the thousands of families effected by dementia throughout Ireland.</strong> “Helen Rochford-Brennan, Chair of the Irish Dementia Working Group.</td>
<td><strong>HSE</strong> to ensure the use of the carer assessment component of the Single Assessment Tool.</td>
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