### **Background Information: Dementia Competencies**

These competencies have been developed in response to the Department of Health (DH) National Dementia Strategy in and specifically relate to objective 13 within the strategy, 'an informed and effective workforce across all services'.

These competencies are based on national recommendations and existing national occupational standards in relation to dementia.

Department of Health 'Living well with dementia: The National Dementia Strategy - Joint commissioning framework for dementia (2009) states:

People with dementia and their carers should be able to expect services and support form staff who are knowledgeable about dementia and who have skills to work effectively with individuals....an informed and effective workforce should be present in specialist as well as universal services. The level of skill and expertise should be proportionate to the level of contact staff have with people with dementia.

The DH Workforce Development Action Plan concludes:

A key finding from all studies and reports researched is that **all staff** in most adult settings within Health and Social Care may be involved in the care of people with dementia. Therefore they all require some elements of dementia-specific education and training. This education and training will be pre-registration for qualified staff and on entry to employment for other staff. Post-registration education and training and continuing professional development (CPD) should include relevant elements of dementia-specific education or training in order to meet the objectives of the National Dementia Strategy.

The competency framework outlined endeavours to embrace these statements and the National Dementia Declaration.

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### The National Dementia Declaration

The National Dementia Declaration has been created by people with dementia, carers of people with dementia and a large number of organisations who seek radical change in the way that our society responds to dementia.

People with dementia and their family carers have described seven outcomes they would like to see in their lives.

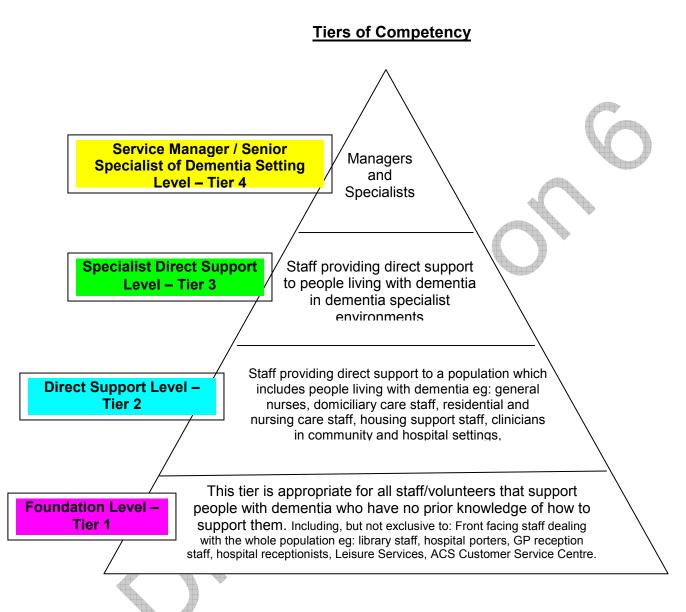
There is overlap between these outcomes and the draft outcomes in the Department of Health's National Dementia Strategy Implementation Plan. Both the Department of Health's draft outcomes and those described below will need to be developed further. In addition work will need to be done to better understand how to measure these outcomes.

- 1. I have personal choice and control or influence over decisions about me
- 2. I know that services are designed around me and my needs
- 3. I have support that helps me live my life
- 4. I have the knowledge and know-how to get what I need
- 5. I live in an enabling and supportive environment where I feel valued and understood
- 6. I have a sense of belonging and of being a valued part of family, community and civic life
- 7. I know there is research going on which delivers a better life for me now and hope for the future

More detailed explanation of these outcomes can be found in Appendix 1 or by clicking on the embedded document below:



# Overview of the Dementia Competencies for all people who come into contact with someone who has dementia



The DH Workforce Development Action Plan deals with the tiers 2, 3 and 4, but does not address the foundation level needed by front facing staff dealing with the whole population.

The North Yorkshire and York Dementia Competencies Framework includes competencies for all four tiers, including those working within universal services, services offering support to a population which includes people with dementia, and services offering support in dementia specific settings.

### Tiers of Competency explained

### Tier 1 Foundation Level

These outcomes and competencies for this level have been determined by using National Dementia Declaration, the following competencies have been identified as being pertinent to this foundation level. The specific outcomes which were identified are located in appendix 2.

The competencies have been defined to enable all people who support someone with dementia, and their manager, to identify what is needed to achieve the foundation level outcomes. The manager would be expected to follow up any learning and development undertaken to ensure the person/worker was applying their knowledge in the workplace.

# It is expected that these competencies are interpreted WITHIN THE CONTEXT of the person who is supporting the individual with dementia's role.

Competency NOS I	Jomontia
	Dementia
Explain what is meant by the term dementia and how someone may DEM 2	-
present who has dementia Outcom	
	Guilds unit 001
Outline the impact that the attitudes and behaviours of others may DEM 2	01
have on an individual with dementia 🛛 🛶 🚺 Outcom	ne 4.2
	Guilds unit 001
Describe what is meant by a person centred approach DEM 2	02
Outcon	ne 1.1
City and	Guilds unit 002
Outline the benefits of working with an individual in a person centred DEM 2	02
manner Outcom	ne 1.2
City and	Guilds unit 002
Describe the role that carers can have in the care and support of DEM 2	02
individuals with dementia Outcom	ne 2.1
City and	Guilds unit 002
Explain how dementia may influence an individual's ability to DEM 2	
communicate and interact Outcom	ne 1.1 (3)
	Guilds unit 003
Explain how to identify the communication strengths and abilities of an DEM 2	05
individual with dementia Outcom	ne 2.1
	Guilds unit 003
Describe how to adapt your style of communication to meet the needs, DEM 2	05
strengths and abilities of the individual with dementia Outcom	ne 2.2
City and	Guilds unit 003
List different techniques that can be used to facilitate positive DEM 2	05
interactions with an individual with dementia Outcom	ne 3.2
	Guilds unit 003
Explain how involving others may enhance interaction with an DEM 2	05
individual with dementia Outcom	ne 3.3
City and	Guilds unit 003
Explain the importance of recognising that individuals with dementia DEM 2	07
have unique needs and preferences Outcom	ne 1.1
	Guilds unit 004

### Overview of Tier 2 Direct Support and Tier 3 Specialist Direct Support Level

For staff and volunteers working in a setting which includes supporting individuals who have dementia and for those working in specialist dementia settings, there are a range of dementia national occupational standards relevant to all these roles.

Managers and commissioners are recommended to use these standards to commission training, it is at the commissioner's discretion whether or not the training provision is accredited or not.

The important factor is that the training commissioned meets the identified occupational standards and the outcomes for the individual as identified in the National Dementia Declaration.

Level 2 Award in Awareness of Dementia Level 2 Certificate in Dementia Care Level 3 Award Awareness of Dementia

Level 3 Certificate in Dementia Care

A full list of the units within these awards can be found in appendix 3. The following hyperlink is to the full suite of dementia standards which provides more details about the awards/certificates identified above:

'skills for care /dementia qualifications

### Tier 2 Direct Support Level

**Front line staff working with adults/older people, some of which have dementia:** Consider undertaking the Level 2 Dementia Award, or equivalent learning and development based on these standards.

Senior Health Care Assistants, Senior Care Workers and Supervisory Staff and Nurses working with adults/older people, some of which have dementia: Consider undertaking the Level 3 Dementia Award, or equivalent learning and development based on these standards.

### Tier 3 Specialist Direct Support Level

# Front line staff working with adults/older people, in specific dementia settings or primarily with people who have dementia:

Consider undertaking the Level 2 Dementia Certificate, or equivalent learning and development based on these standards.

Alternatively the Level 2 Health and Social Care Diploma has a dementia route, which covers all of the dementia award competencies and some of the certificate competencies.

### Senior Health Care Assistants, Senior Care Workers and Supervisory Staff and Nurses working in specific dementia settings or primarily with people who have dementia:

Consider undertaking the Level 3 Dementia Certificate, or equivalent learning and development based on these standards.

Alternatively the Level 3 Health and Social Care Diploma has a dementia route, which covers all of the dementia award competencies and some of the certificate competencies.

### Tier 4 Service Manager / Senior Specialist of Dementia Care Setting Level

**Managing Adult and Older Peoples' Services, Where Some People Have Dementia** Manager of adult and older peoples' services, where some have dementia need to have similar competencies around dementia as the people they manage.

Managers in these settings should consider undertaking the Level 3 Dementia Award, Level 3 Dementia Certificate, or equivalent learning and development based on these standards.

### **Managing Dementia Specific Care Settings**

Managers of adult and older peoples' services, where some have dementia need to have similar competencies around dementia as the people they manage, therefore in addition to the competencies identified it is essential managers of dementia care settings have the skills and knowledge to manage the environment and staff practice to ensure the individual living with dementia and their carers receive support of sufficient quality to meet the National Dementia Strategy Outcomes.

There are no specifically designed competencies to address this level of manager, however the following needs to be considered when commissioning learning and development for these managers:-

Awareness, knowledge and understanding of dementia Design and management of dementia care services Management of risk and minimising restraint – best practice when supporting someone with dementia Leadership in Person Centred Dementia Care Business Leadership in Dementia Care

The above are guidelines only and should not be used as a prescriptive list when commissioning training, it is important managers and commissioners consider the dementia outcomes and ensure any learning and development is scheduled to meet these outcomes.

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### Overall comments in relation to delivery of workforce development solutions to meet this competency framework

It is fully recognised organisations will need to ensure they have a flexible approach to learning, with a variety of learning methods available, including elearning, distance learning, fact sheets with coaching, case studies, reflective learning practice development workshops as well as face-to-face workshops etc...

Ideally commissioners need to continue to support joint initiatives to commission effective dementia education and training as part of the strategy to enhance the quality of dementia care by improving awareness and skills of all people who come into contact with someone who is living with dementia or their carer.

### Additional recommendations in relation to workforce development for those people supporting individuals who are living with dementia.

The DH Workforce Development Action plan also identified competency needs in the following areas:-

### 1. Management of Dementia Care

Managers of adult and older people services, where some will have dementia, and managers in dementia care settings need to have a similar competencies set around dementia as the people they manage.

### 2. Foundation Degrees (Level 5)

The Foundation Degree is a link from the vocational into Higher Education levels. Skills for Care (North West Region) have developed a framework for a Foundation Degree (Dementia). It is recommended that when this has been validated each regional Joint Implementation Partnership should identify how Foundation Degrees (Dementia) can meet the needs of different staff groups working with people with dementia. This should include relevant assistant practitioners and senior social care staff and possibly dementia leads in specific dementia care social care settings.

### 3. <u>Pre-Registration and Post Registration Education and Training for</u> <u>Professional Staff</u>

All key stakeholders in the development of pre-registration education and training for professional staff in health and social care should be involved in agreeing the process and timescale for developing the curriculum relevant to each category of professional staff to include learning outcomes that meet the objectives of the National Dementia Strategy.

### 4. Nurses/Health Visitors

Recent research has found that they majority of nursing staff have either had no dementia training as part of their pre-registration education/training or insufficient training to work effectively with people with dementia. Work is needed to ensure that dementia is a core element of all nurse training, and to identify appropriate post-registration and CPD pathways.

### 5. Doctors

Work is needed with the GMC, Medical School Council and royal Colleges to ensure that the need for doctors to gain an appropriate level of awareness and understanding of dementia as part of their foundation training is taken into consideration in the development or revision of learning objectives, curricula and assessments. In addition, work is needed with the RCGP to ensure that post registration training, and ongoing CPD of GP's includes dementia.

The current priority being given to the reduction in the prescribing of antipsychotics indicates the need for focused work on alternative treatments for GP's and consultants.

### 6. Allied Health Professionals

Pre-registration education and training does not provide significant or consistent

Awareness, knowledge and understanding of dementia care. Work is needed with relevant professional bodies to ensure that dementia is a core element of pre-registration training.

### 7. Mental Health Staff

The pre-registration framework, Best Practice Competencies and Capabilities for Pre-registration Mental Health Nurses in England does not make specific mention of dementia care. Work is needed to review the mental health nursing curriculum.

### 8. Social Workers

There is no specific mention of dementia at undergraduate level. It is possible to undertake Post Qualifying qualification which clearly demonstrates practice competence in dementia.

Some of these areas need to be tackled on a national basis, but there are a number of ways in which local initiatives could make a difference. For example, by managers of services attending dementia training courses, and social workers being encouraged to undertake PQ in dementia.

### Full set of Outcomes within the National Dementia Declaration

### 1 I have personal choice and control or influence over decisions about me

1.1 I have control over my life and support to do the things that matter to me.

1.2 I have received an early diagnosis which was sensitively communicated.

1.3 I have access to adequate resources (private and public) that enable me to choose where and how I live.

1.4 I can make decisions now about the care I want in my later life.

1.5 I will die free from pain, fear and with dignity, cared for by people who are trained and supported in high quality palliative care.

### 2 I know that services are designed around me and my needs

2.1 I feel supported and understood by my GP and get a physical check up regularly without asking for it.

2.2 There are a range of services that support me with any aspect of daily living and enable me to stay at home and in my community, enjoying the best quality of life for as long as possible.

2.3 I am treated with dignity and respect whenever I need support from services.

2.4 I only go into hospital when I need to and when I get there staff understand how I can receive the best treatment so that I can leave as soon as possible.

2.5 Care home staff understand a lot about me and my disability and know what helps me cope and enjoy the best quality of life every day.

2.6 My carer can access respite care if and when they want it, along with other services that can help support them in their role.

### 3 I have support that helps me live my life

3.1 I can choose what support suits me best, so that I don't feel a burden.

3.2 I can access a wide range of options and opportunities for support that suits me and my needs.

3.3 I know how to get this support and I am confident it will help me.

3.4 I have information and support and I can have fun with a network of others, including people in a similar position to me.

3.5 My carer also has their own support network that suits their own needs.

### 4 I have the knowledge and know-how to get what I need

4.1 It's not a problem getting information and advice, including information about the range of benefits I can access to help me afford and cope with living at home.

4.2 I know where I can get the information I need when I need it, and I can digest and re-digest it in a way that suits me.

4.3 I have enough information and advice to make decisions about managing, now and in the future, as my dementia progresses.

4.4 My carer has access to further information relevant to them, and understands which benefits they are also entitled to.

# 5 I live in an enabling and supportive environment where I feel valued and understood

5.1 I had a diagnosis very early on and, if I work, an understanding employer which means I can still work and stay connected to people in my life.

5.2 I am making a contribution which makes me feel valued and valuable.

5.3 My neighbours, friends, family and GP keep in touch and are pleased to see me.

5.4 I am listened to and have my views considered, from the point I was first worried about my memory.

5.5 The importance of helping me to sustain relationships with others is well recognised.

5.6 If I develop behaviour that challenges others, people will take time to understand why I am acting in this way and help me to try to avoid it.

5.7 My carer's role is respected and supported. They also feel valued and valuable, and neither of us feel alone.

# 6 I have a sense of belonging and of being a valued part of family, community and civic life

6.1 I feel safe and supported in my home and in my community, which includes shops and pubs, sporting and cultural opportunities.

6.2 Neither I nor my family feel ashamed or discriminated against because I have dementia. People with whom we come into contact are helpful and supportive.

6.3 My carer and I continue to have the opportunity to develop new interests and new social networks.

6.4 It is easy for me to continue to live in my own home and I and my carer will both have the support needed for me to do this.

### 7 I know there is research going on which delivers a better life for me now and hope for the future

7.1 I regularly read and hear about new developments in research.

7.2 I am confident that there is an increasing investment in dementia research in the UK. I understand the growing evidence about prevention and risk reduction of dementia.

7.3 As a person living with dementia, I am asked if I want to take part in suitable clinical trials or participate in research in other ways.

7.4 I believe that research is key to improving the care I'm receiving now.

7.5 I believe that more research will mean that my children and I can look forward to a range of treatments when I need it and there will be more treatments available for their generation.

7.6 I know that with a diagnosis of dementia comes support to live well through assistive technologies as well as more traditional treatment types.

# Outcomes extracted from the National Dementia Declaration as specific to Tier 1 – Foundation Level

## It is expected that these outcomes are interpreted WITHIN THE CONTEXT of the person who is supporting the individual with dementia's role

2.3 I am treated with dignity and respect whenever I need support from services.

5.4 I am listened to and have my views considered

5.5 The importance of helping me to sustain relationships with others is well recognised.

5.6 If I develop behaviour that challenges others, people will take time to understand why I am acting in this way and help me to try to avoid it.

Note: for some roles this will be about the person supporting the individual with dementia being able to realise that the individual may demonstrate behaviour that is difficult to interpret.

5.7 My carer's role is respected and supported. They also feel valued and valuable, and neither of us feel alone.

6.1 I feel safe and supported in my home and in my community, which includes shops and pubs, sporting and cultural opportunities.

6.2 Neither I nor my family feel ashamed or discriminated against because I have dementia. People with whom we come into contact are helpful and supportive.

These outcomes and competencies support the statement in the Department of Health, Skills for Care and Skills for Health document: Working to support the implementation of the National Dementia Strategy Project – Workforce Development Action Plan. This plan states:

'A potential level of core awareness and understanding is that all staff across health and social care to ensure that they are comfortable and competent with, mapped against the Dementia knowledge set:

- Recognising the signs of dementia
- The principles of person centred care
- The basic strategies to communicate and assist people with dementia and their carers
- Where to go for more specialist advice and support

The outcomes and competencies identified also link to the outcomes within the DoH Quality outcomes for people with dementia: building on the work of the National Dementia Strategy. Particularly the following outcomes within this strategy:

- I am treated with dignity and respect
- Those around me and looking after me are well supported

Appendix 3

# Dementia National Occupational Standards

Divided by award



9

Title: Level 2	<b>Fitle: Level 2 Award in Awareness of Dementia</b>	reness	of Dementia
NDAQ no		Level Unit	Unit title
DEM 201	Knowledge	2	2 Dementia Awareness
DEM 202	Knowledge	2	2 The person centred approach to the care and support of individuals with dementia
DEM 205	Knowledge	2	2 Understand the factors that can influence communication and interaction with individuals
			who have dementia

2 Understand equality, diversity and inclusion in dementia care

Care
<b>Dementia</b>
ш
Certificate in
2
Level
Title:

Knowledge

**DEM 207** 

Mandatory units:			
NDAQ no		Level	Unit title
DEM 201	Knowledge	2	Dementia Awareness
DEM 204	Competence	2	Understand and implement a person centred approach to the care and support of individuals with domentia
DEM 209	Competence	2	Equality, diversity and inclusion in dementia care practice
DEM 210	Competence	2	Understand and enable interaction and communication with individuals with dementia
DEM 211	Competence	2	Approaches to enable rights and choices for individuals with dementia whilst minimising risks

Optional units: (at least 4 credits must be achieved)

NDAQ no	Teve	Level Unit title
DEM 302	Competence	<mark>3</mark> Understand and meet the nutritional requirements of individuals with dementia
DEM 305	Knowledge	3 Understand the administration of medication to individuals with dementia using a person
		centred approach
HSC 3047	Competence	3 Support the use of medication in social care
HSC2031	Competence	2 Contribute to support of positive risk-taking for individuals

Competence Competence Competence Competence Competence Knowledge Competence Knowledge Knowledge Knowledge Knowledge Knowledge Knowledge Knowledge Knowledge Knowledge Knowledge Competence	2   Contribute to the care of a deceased person	2 Provide support for therapy sessions	2 Contribute to supporting group care activities	3 Support individuals at the end of life	3 Facilitate person centred assessment, planning, implementation and review	2 Support person-centred thinking and planning	2 Introductory awareness of models of disability	2 Contribute to supporting individuals in the use of assistive technology	3 Understand mental well-being and mental health promotion	3 Purpose and principles of independent advocacy	4 Independent Mental Capacity advocacy	Level 3 Award in Awareness of Dementia	I Unit title	3 Understand the process and experience of Dementia	3 Understand the administration of medication to individuals with dementia using a person	centred approach 🖉 🚽 🔷	3 Understand the role of communication and interactions with individuals who have dementia	3 Understand the diversity of individuals with dementia and the importance of inclusion		entia Care		I Unit title	3 Understand the process and experience of Dementia	3 Enable rights and choices of individuals with dementia whilst minimising risks	3 Understand and enable interaction and communication with individuals who have dementia	B Equality, diversity and inclusion in dementia care practice	
				ence	ence		dge	ence	lge	ence		n Awarene	Level		lge					te in Deme		Level					
	HSC 2022	HSC 2001	HSC2023	HSC 3048	HSC3020	LD 202	SSOP.2.1	SSOP 2.4	CMH301	ADV 301	305	Title: Level 3	NDAQ no	DEM 301	DEM 305		DEM 308	DEM 310		<b>Title: Level 3 Certificate in Dementia</b>	Mandatory units:	NDAQ no	DEM 301	DEM 304	DEM 312	DEM 313	

Optional units: (at least 6 credits must be achieved)
NDAQ no
Level Unit title

3 Understand and meet the nutritional requirements of individuals with dementia	3 Understand the administration of medication to individuals with dementia using a person centred approach	3 Support the use of medication in social care settings	2 Contribute to support of positive risk-taking for individuals	2 Contribute to the care of a deceased person	3 Provide support to continue recommended therapies	3 Implement therapeutic group activities	3 Support individuals who are bereaved	3 Support individuals at the end of life	3 Interact with and support individuals using telecommunications	3 Support positive risk taking for individuals	3 Facilitate person centred assessment, planning, implementation and review	3 Support person-centred thinking and planning	4 Support individuals in the use of assistive technology	3 Understand models of disability	3 Understand mental well-being and mental health promotion	3 Purpose and principles of independent advocacy	4 Independent Mental Capacity advocacy	
Competence	Knowledge	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Competence	Knowledge	Knowledge	Competence	Competence	
Com	Kno	Com	Com	Com	Com	Com	Com	Com	Com	Com	Com	Com	Com	Kno	Kno	Com	Com	
DEM 302	DEM 305	HSC 3047	HSC 2031	HSC 2022	HSC 3002	HSC 3008	HSC 3035	HSC 3048	HSC 3062	HSC 3066	HSC 3020	LD302	SSOP 3.4	<b>SSOP 3.1</b>	CMH301	ADV 301	305	

The following hyperlink is to the full suite of dementia standards which provides more details about the units above: 'skills for care /dementia qualifications