Higher Education in Dementia Network (HEDN) Meeting
Wednesday 8th October 2014
University of Surrey

Present
Andrea Mayrhofer – University of Hertfordshire
Angela Richardson – Kingston University
Anne Johnston – University Campus Suffolk
Hannah Arnold – University of South Wales
Julia Wood – Kingston and St George’s Universities
Julie Longson – Keele University
Julie Udell – University of Portsmouth
Khim Horton – University of Surrey
Laura Maio – Dementia UK
Lesley Baillie – London Southbank University
Michal Herz – University of Worcester
Pat Chung – Christchurch Canterbury
Rachel Thompson – Dementia UK
Wendy Grosvenor – University of Surrey

1. Apologies were received from the following people
Amanda Clarke – Northumbria University
Amy Drahota – University of Portsmouth
Anna Waugh – University of the West of Scotland
Chris Knifton – De Montfort University
Chris Russell – University of Worcester
Clair Merriman – Oxford Brookes University
Claire Surr – University of Bradford
Colin Johnson – Canterbury Christ Church University
Danny Walsh – University of Lincoln
David Howard – University of Lincoln
David I Reid - Sheffield Hallam University
Elizabeth Collier – University of Salford
Elizabeth Williams – University Campus Suffolk
Gill Maidens – Wolverhampton University
Ian Sherriff – University of Plymouth
James Ridley – Edge Hill University
Jo Alexjuk – University of Edinburgh
Liz Westcott – Oxford Brookes University
Michele Board– Bournemouth University
Peter Zaagman – Oxford Brookes University
Rick Fisher – Bournemouth University
Simon Burrow – University of Manchester
2. Minutes of last meeting held on 6\textsuperscript{th} July 2014
The minutes of the last meeting were accepted

3. Matters Arising
- Rachel Thompson (RT) has now left RCN and has taken on a post in Dementia UK as Practice Development Lead. She will continue chairing HEDN as part of her new role.
- Chris Knifton, Liz Collier and Claire Surr have just submitted an article at Nurse Education Today – it is a commentary on next steps for the CfDE. Waiting to hear from the journal if it has been accepted.
  \textbf{Action/Open call}: future papers - if anyone would be interested in writing other papers, please contact RT (Rachel.thompson@dementiauk.org)

4. Presentation from University of Surrey – “Time for Dementia”
University of Surrey has just begun a new project in partnership with Brighton and Sussex Medical School and the Alzheimer’s Society, funded by the Health Education Kent, Surrey and Sussex.

Student nurses will be paired with medical students and, as part of their curriculum, will visit a person with dementia and their family at least four times a year for the duration of their course. If the people visited will be admitted in to acute hospital or care, there will be an expectation on students to follow them in the new setting.

For more information visit the page \url{http://kss.hee.nhs.uk/2014/05/21/improving-lives-for-patients-with-dementia/}.
Video on the project: \url{https://www.youtube.com/watch?v=Ae2aGv9H3EY}

5. Update on HEE Developments in dementia education
- HEE’s remit is exclusively health care but are beginning to recognise the relevance of their message for social care. They have a target for 10k people to receive dementia awareness training and are confident to be able to do so. CQUIN has been also helpful in terms of highlighting dementia and the need to have trained staff.

  They will be now moving on to Tier 2 and Tier 3 – which are more relevant for the CfDE.

  There has been a Delphi consultation which has been circulated to the network – it is noted that ‘competencies’ and ‘learning outcomes’ were blurred in the language of the consultation.

  \textbf{Action}: Any comment for HEE, please forward it to RT.

- A tender for the evaluation of the impact of education and training has been commissioned by HEE’. Await to hear who has been given the tender

- Core Skills and Knowledge Framework – this piece of work is funded by HEE and is being carried out by Skills for Health. It’s a mapping exercise against Tiers 1-3 of existing competences and skills. Preliminary findings from desktop research
indicates no common guidance for competencies, and little effective evaluation of what makes people reach the desired competencies.

- Examples of resources:
  - Norfolk and Suffolk DAA have developed a framework of competencies that can be used by HEI to map delivery of education.
  - NHS London Education Resource – Lesley Baillie suggested these could be used as a resource, and shared as long as the access is password-protected. However there might be limitations (see excerpt from RCN’s website below). For more information please contact Caroline Kilby caroline.kilby@nhs.net.

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<td>NHS England (London) has led a project to develop, through consultation with clinicians, a series of dementia training modules targeted at acute inpatient and community settings. The modules cover a range of topics including resources which focus on attitudes and behaviour. They can be delivered as short training sessions which people can work through progressively, or linked together to form half or whole day training courses to provide flexibility. If you work for the NHS and would like to gain access to the modules, get in touch with Caroline Kilby – Senior Project Manager, Strategic Clinical Networks at <a href="mailto:caroline.kilby@nhs.net">caroline.kilby@nhs.net</a>.</td>
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- Wales – All Wales e-learning Dementia Awareness Module – available online, has been launched recently.
- Scotland – has a more coordinated approach. For example all dementia champions in hospitals have received a dementia module delivered by University of ‘West Scotland. See:
- “Dementia Champions” is not an unequivocal term. Andrea Mayrhofer (AM) has just completed the Phase 1 of an evaluation on dementia champions, funded by HEE.
  → The label generates different expectations – some would see training as part of being carrying the title, for others everyone should be a champion (hence no training needed). If sought, training is at level 2-3, never at Master’s level (because of time investment required). Social workers refuse carrying the label, as they perceive themselves as having higher education and standards (‘dementia champion’ perceived as risk to professionalism).
  → Lots of ongoing work, but it goes in organizational literature, rather than dementia education.
  → Leadership locally makes all the difference. A recent article has been published on the Journal of Dementia Care – will forward to LM for circulation.

6. Position paper on delivering quality in dementia education
The paper is based on the results of the work done at the HEDN meeting in Bradford.
Comments on the wording are made – see version.2 in appendix.

**Action:** LM to share the spiral approach sent by Anna Waugh.

Other comments:
- **Involvement of pwd/carers:**
  - How to involve a range of people? (not just articulated, white British)
  - Use of groups of carers and videos of pwd produced by local involvement groups – it is a good approach but the outcome is very question driven
  - Being able to ask questions on peer level to family carers and pwd is still an invaluable experience for students (cannot be fully substituted by videos)
- Paper on collaborative work with pwd, written by Andrea Capstick and David Pulsford from HEDN – perhaps needs revisiting.
  **Action:** RT to look at the paper.
- Spiralling – it might become an issue, as all subjects are important. How to make it more accessible?
- Cross faculty involvement would be beneficial.

Survey of existing approaches to involvement of family carers and pwd – to become a discreet piece of work. Wendy Grosvenor, Khim Horton and Michal Herz have expressed interest in bringing this forward.

7. **Sharing resources for dementia education**  
The aim would be sharing the resources without duplicating efforts

Agreed to link at least one example to each section of the CfDE.

Existing resources:
- IDEA website  
  **Action:** RT to contact Nottingham University to ascertain who is maintaining the website now.
- Coventry County Council – will be collecting resources soon.  
  **Action:** Michal Herz to share, when it'll be available.
- Suffolk – has created a repository as well  
  **Action:** to check the resource
- ‘Barbara’s story’ – a series of 6 films + teaching pack for each film. It can be requested from Guy’s and St Thomas’s Hospital NHS Foundation Trust  
  (**a summary of the initiative and an edited version of all the films has now been made available on youtube** [http://www.youtube.com/watch?v=DtA2sMAjU_Y](http://www.youtube.com/watch?v=DtA2sMAjU_Y))
- SCIE Dementia Gateway, dementia films - new, ‘Living well with dementia’, offers insights from people with advanced dementia  
- Research papers
AM suggested the following examples:

- Mayrhofer et al., 2014, Establishing a community of practice for dementia champions (innovative practice), in *Dementia* July 14, 2014

For any query regarding the papers, please contact AM at a.mayrhofer@herts.ac.uk

8. Any other business

- #demPhD - is a discussion platform on Twitter for PhD students in dementia care. Could perhaps ask them to join a future meeting and present.

- **Local Updates**

  **Julia Wood – Kingston and St George’s Universities** - The ‘Communication And Respect for people with Dementia: Student learning’ (CARDS) programme has been evaluated with physiotherapy and learning disability nursing students. Results show a significant improvement in knowledge scores, and confidence and perceived competence in working with PWD.

  **Angela Richardson – Kingston University** – currently working on Continuing Professional Development (CPD) programme and pre-reg students.

  **Julie Longson – Keele University** – currently working with both undergraduate and postgraduate students

  **Andrea Mayrhofer – University of Hertfordshire** – running an audit, on behalf of HEE, of the current state of education in the dementia field in England. Also, Cheryl Holman has just developed a dementia module at level 6 and 7.

  **Lesley Baillie – London South Bank University** - have created an interprofessional group with an interest in dementia. All health and social care students (nurses, social workers etc) have received a Dementia Friends session within their university induction. Over 1,000 students have taken part in the programme, which is currently undergoing evaluation. Early comments encouraging.

  **Anne Johnston – University Campus Suffolk** – the University Campus is a structure that works across Norfolk and Suffolk bringing together two validating universities (University of East Anglia and University of Essex), Great Yarmouth
College, Lowestoft College, Otley College, Suffolk New College and West Suffolk College. UCS run a range of modules Levels 5-7. Currently threading dementia across pre-reg modules.

**Hannah Arnold – University of South Wales** – there is lots of interest expressed in level 4 modules and distance learning. Recently developed a level 4 module for care homes. Looking also at interprofessional work.

**Michal Herz – University of Worcester** – the university has launched a foundation course this year. Many of the students already have a degree but want specific training in dementia. Also started a module for Admiral Nurses.

**Wendy Grosvenor – University of Surrey** – developed CPD modules at level 4-7 this year; online learning at level 4 is being developed. Also working on the Time for Dementia project.

9. **Dates of 2015 meetings**

17th March 2015 – University of Worcester, Worcester

6th August 2015 – University of Salford, Salford

October 2015 (date tbc) – University of the West of Scotland
Appendix

HEDN Position paper for delivering high quality education in dementia

October 2014

The objective for developing an informed and effective workforce identified in each of the national dementia strategies, presents health and social care educators across the UK with a significant challenge. For dementia education to be effective, educators need to be able to help students understand its value to them in their current and future practice. Curricula content therefore needs to address the full range of appropriate knowledge, skills and competencies that the future health, social care and medical workforce need to deliver high quality dementia care.

In support of ensuring a consistent and inclusive approach to dementia education, the Higher Education for Dementia Network (HEDN) developed a UK wide Curriculum for Dementia Education (CfDE): [http://www.dementiauk.org/what-we-do/networks/hedn/curriculum-for-dementia-education-cfde/](http://www.dementiauk.org/what-we-do/networks/hedn/curriculum-for-dementia-education-cfde/)

The curriculum is designed in two parts: a 'Full Curriculum' for dementia specific programmes at undergraduate or postgraduate level and a 'Core Curriculum' for generic/professional undergraduate and pre-registration courses. It sets out academic outcomes from levels 4 to 7 and is designed to be a guide, rather than a prescriptive document.

The HEDN recommend that dementia education is best embedded across a curriculum rather than existing as a separate entity, so it is available in a generalist context. For undergraduate programmes the use of a spiral curriculum is suggested as a useful approach, where themes are developed across programmes and subsequently revisited as students refine their skills and knowledge.

However if dementia is to be embedded across a curriculum or programme, it is recognised that a number of staff will need to have dementia expertise to support this and deliver necessary teaching. Whilst there are a small but growing number of HEI’s who have developed expertise and extra resources to support increased availability of dementia education, this is not widespread. Without the right expertise there is a risk that dementia education becomes a ‘tick-box’ exercise; becoming an add-on or ad hoc approach with lectures not linked to other learning or assessment. This would have little meaning or value attached to it, nor any real impact on student’s skills, attitudes and competency in caring effectively for people with dementia.

In response the HEDN has recently turned its attention to the challenge of how best to deliver high quality education in dementia. This paper offers a summary of the key points developed by the network to help develop and inform future planning.
Considerations for supporting delivery of high quality dementia education

1. The CfDE provides a valuable and useful guide in informing a comprehensive approach to dementia education across all health and social care programmes.

2. A creative approach is required to embed sufficient content across generic programmes. The use of a spiral curriculum and cross faculty approach is recommended. Other practical approaches may include:
   - Use of dementia specific case scenarios within other teaching such as safeguarding, mental capacity, communication etc.
   - Inclusion of dementia specific content in practice placement workbooks
   - Practice mentor updates to include content about dementia specific knowledge and skills

3. The voices and perspectives of people living with dementia and family carers, should be involved in the delivery and planning of education.

4. Investment in dementia education leads is required across all HEI’s to offer advice and support to other colleagues, in ensuring appropriate content across all programmes.

5. CFDE content should be considered for inclusion by professional and educational regulatory bodies as a quality standard.

6. Those leading on and delivering dementia education in HEI’s should have:
   - An in-depth up to date knowledge of dementia care and develop links with practice experts.
   - A qualification in dementia, or be working towards one, or have equivalent professional experience.
   - Direct experience and contact with people living with dementia and families.
   - A clear rights based theoretical underpinning to their educational practice which acknowledges their role in challenging stigma and discrimination at each opportunity.
   - A commitment and passion to ensuring quality in dementia education.

Further options will be considered by HEDN to support this agenda:

1. Expansion of CfDE to include guidance on developing teaching materials and how it can be delivered in practice
2. Consideration of how the CfDE might inform a range of programmes such as dementia champion training.
3. Cascading knowledge, attitudes and responsibilities via networks e.g. NES, to share knowledge and skills between practitioners and educators
4. Sharing resources and signposting people to useful teaching/learning materials across HEIs via HEDN web-site
5. Development of a manual for the CfDE – add content on “how to deliver"
6. Disseminate good practice via existing platforms/groups e.g.
   - IDEA website (http://idea.nottingham.ac.uk/)
   - Higher Education Academy (http://www.heacademy.ac.uk/)
   - Mental Health Nurse Academics (http://mhnauk.com)