



Welcome to our Webinar

The console will show audio levels of the speaker; your mic will remain muted.



Type questions, thoughts or comments and press 'send'. They will only be visible to the host of the webinar.

Our Vision...

is to be a supportive community in which everyone has the chance to live their life to the full.

We offer...

a range of services and support online and offline, both from ourselves and in partnership with a range of other specialist organisations.

Key Facts

- ▶ All serving, former or retired civil servants (and their dependants) can seek the Charity's help at any time
- ▶ There is no need to donate to be eligible for our help, (but it's great if you do and there are many ways you can)
- ▶ We are **NOT** a membership organisation

In 2019...

People came to us for help nearly **80,000** times



Nearly **£2 million**
was given out
to support
people in need



1,000 Carers'
Passports and
Statements
were issued



569 referrals
were made for
our Wellbeing
Conversations

Linda Eades

Head of Caring & Health
Services

3 D's Carers Taster

Dementia, Delirium & Depression



This Webinar will
start at
11:30

Katey Twyford - Trustee, tide

Micheál McLaughlin - Training & Development Manager



www.lifestorynetwork.org.uk

[@LifeStoryNetwrk](https://twitter.com/LifeStoryNetwrk)



Micheál McLaughlin



Carer for Grandfather who lived with dementia for 5 years.
Learning & Development Manager,
Qualified as an Occupational Therapist.
Worked 10+ years within dementia services.



Dr Katey Twyford



tide trustee

Primary carer for father who is living with dementia

National dementia co-lead – Housing Learning and Improvement Network.

Worked 30+ years within social care, working closely with health and housing organisations



Dementia, Delirium & Depression

What we hope to achieve in the next hour:

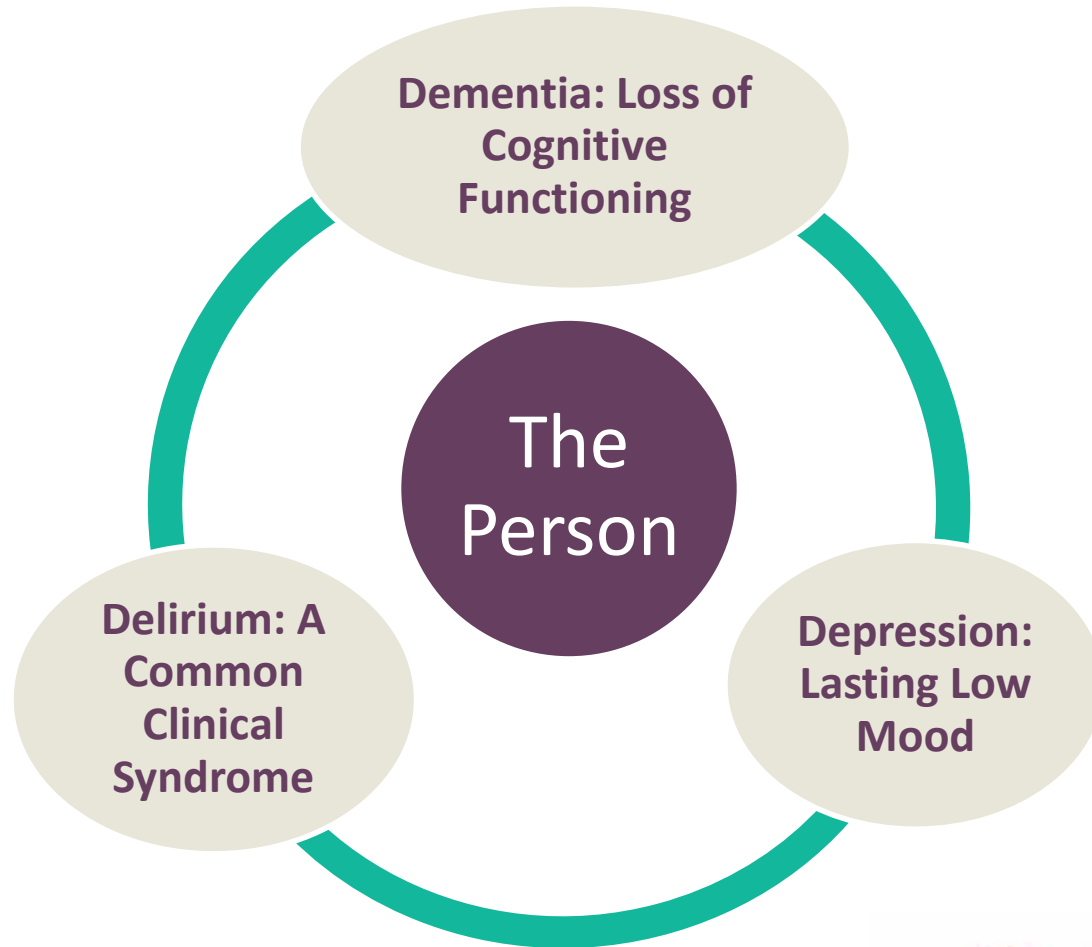
- Help Carers gain basic knowledge and identification of delirium and depression in people living with dementia.
- How carers can support people living with dementia using Life Story.
- Empower carers and increase quality of life for people living with dementia



Test yourself!

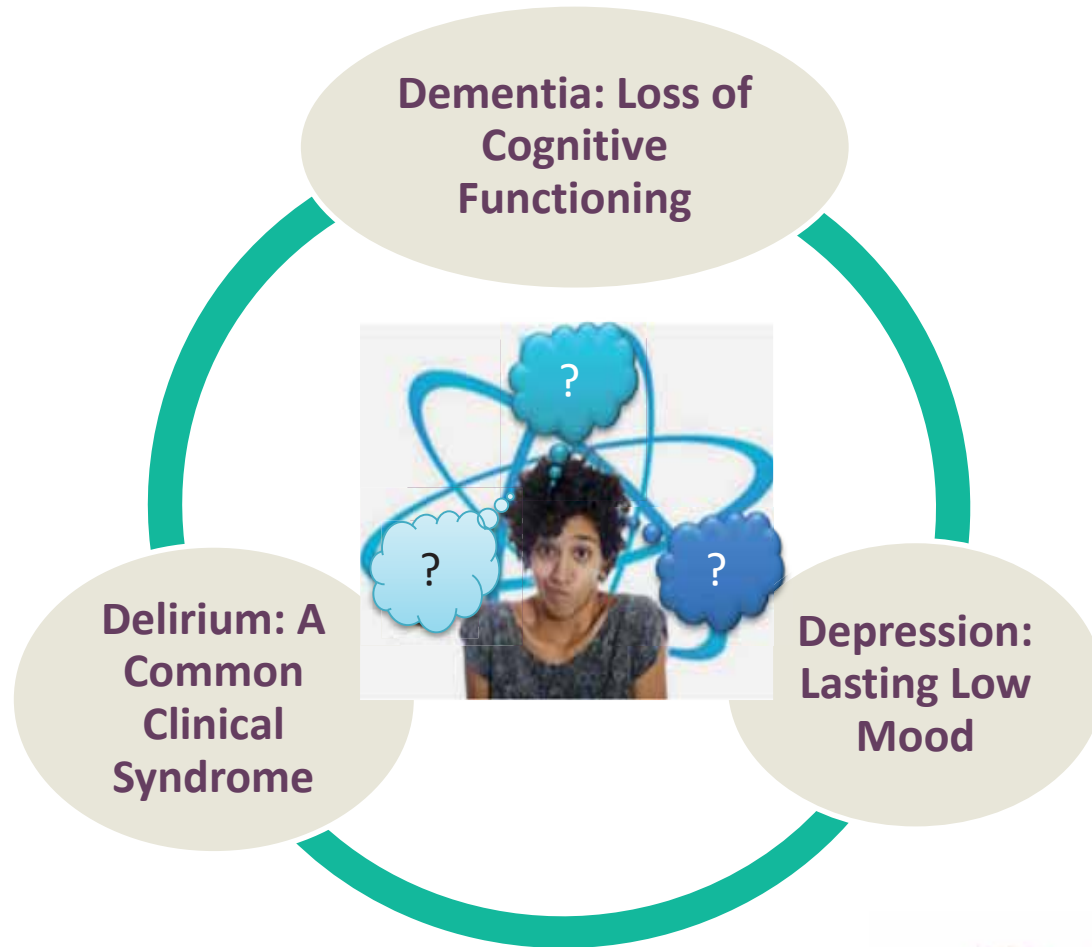
- (1) How many people over the age of 65 in the uk have dementia? (eg one in xx people)
- (2) There were 850,000 people living with dementia in the UK in 2014, how many informal carers were there?
- (3) Forty % of people over 65 in long term care were receiving specialist dementia care in 2019. What percentage had experienced delirium?
- (4) What percentage of the population over 65 are affected by depression?
- (5) What percentage of people living with dementia also have another health condition?

3 D's - Dementia, Delirium, Depression



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Dementia, Delirium, Depression

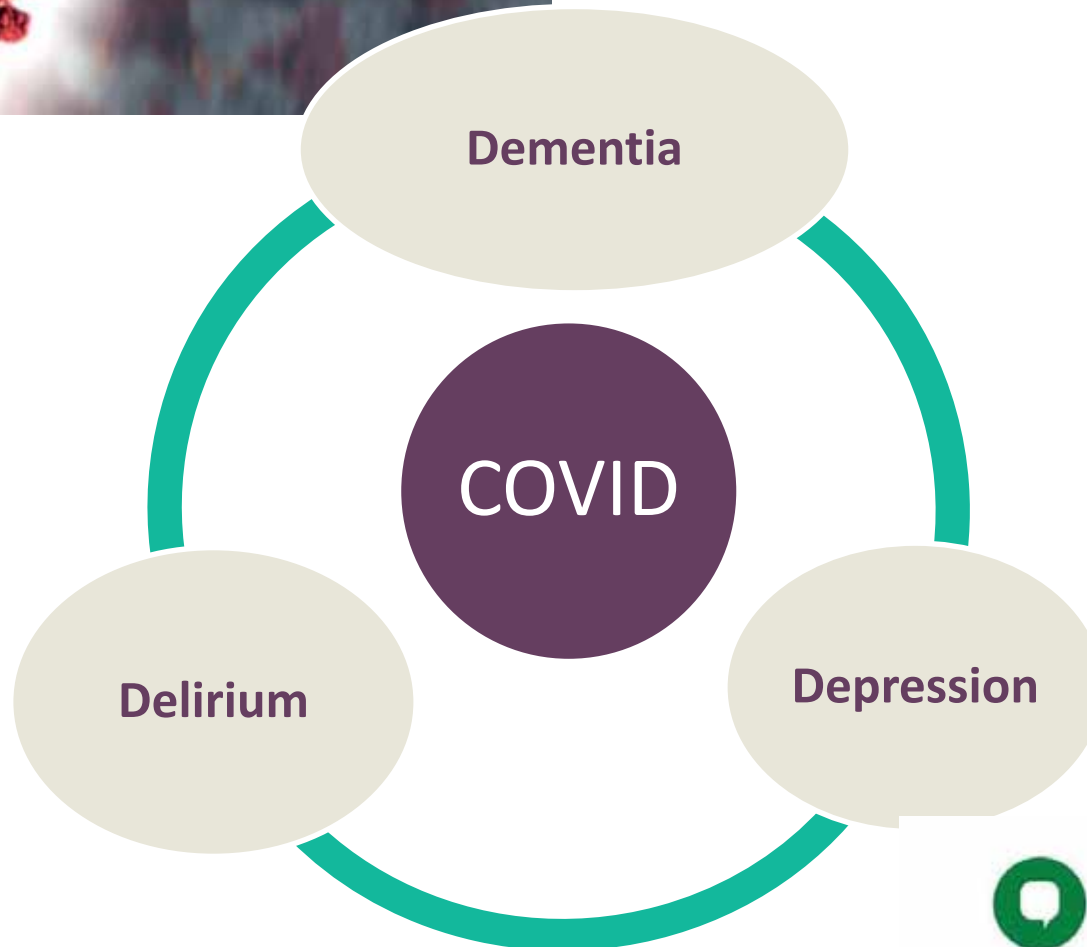


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Janis and Richard Cottee



Janis had previously experienced delirium with Richard. She knew best but as a carer, was not listened to.



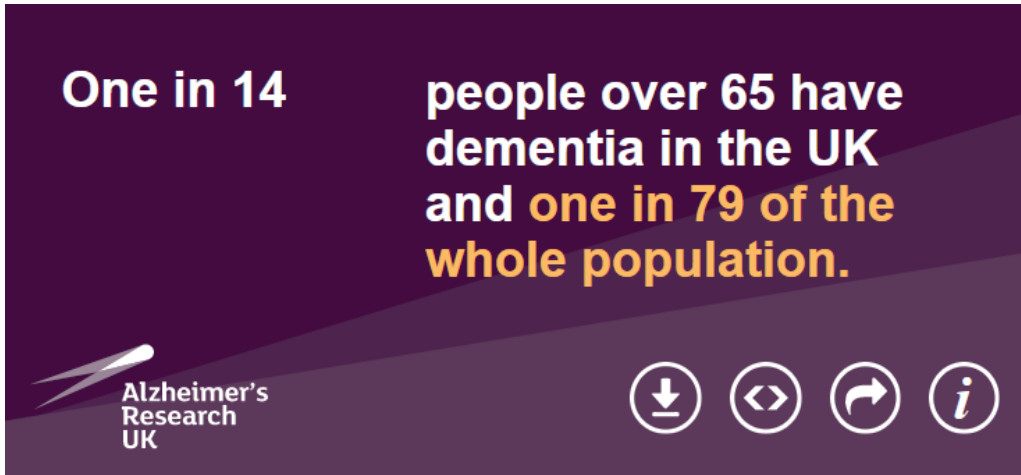
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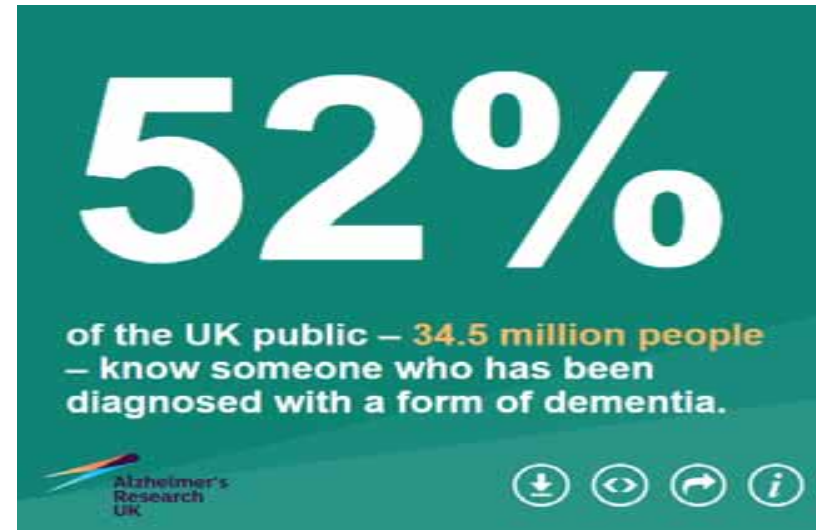
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Test me facts

Prevalence of dementia in UK



Source: Prince, M et al (2014) Dementia UK: Update Second Edition report produced by King's College London and the London School of Economics for the Alzheimer's Society

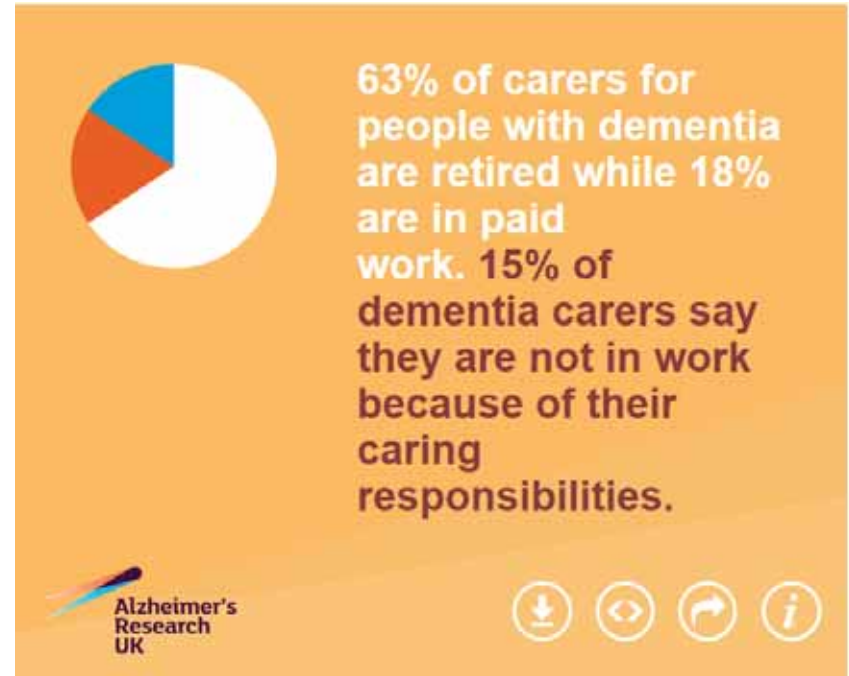


Source: Dementia Attitudes Monitor (2019) and ONS 2018 population estimates

Carers of people with dementia



Source: Lewis et al (2014). Trajectory of Dementia in the UK – Making a Difference, report produced the Office of Health Economics for Alzheimer's Research UK



Source: Personal Social Services Survey of Adult Carers in England, 2016-17; NHS Digital; Questions 9 – 12

Dementia and delirium in hospital

In Acute hospitals, people with dementia and delirium account for between 32% - 89% (NICE 2017).



Depression

Depression affects around 50% of the population over 65,



Yet it is estimated that 85% of older people with depression receive no help at all from the NHS (Age UK 2016).

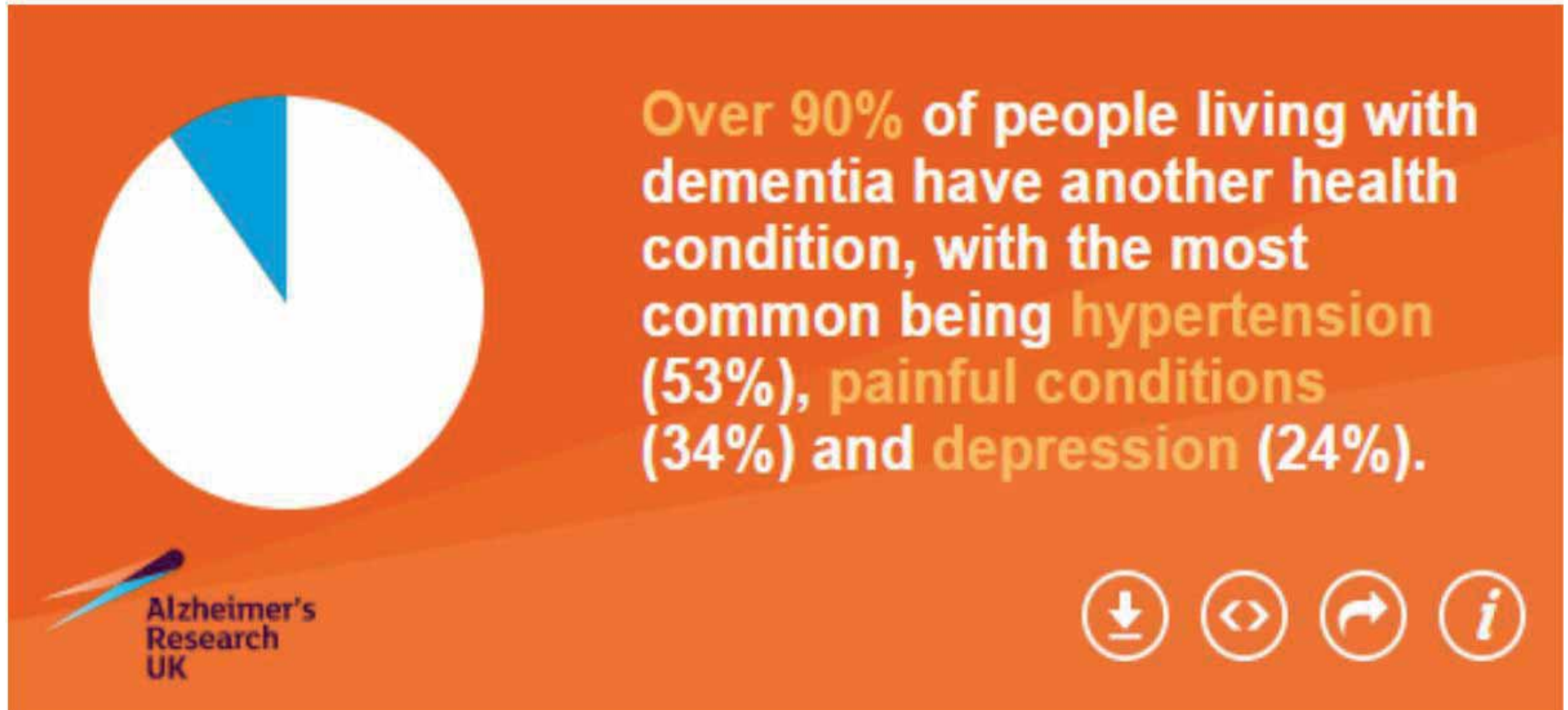
Depression in care homes

Around 40 – 60% of people living in care homes have depression, often remaining undetected and untreated

(Mental Health.org 2016)



Comorbidity: Dementia and depression

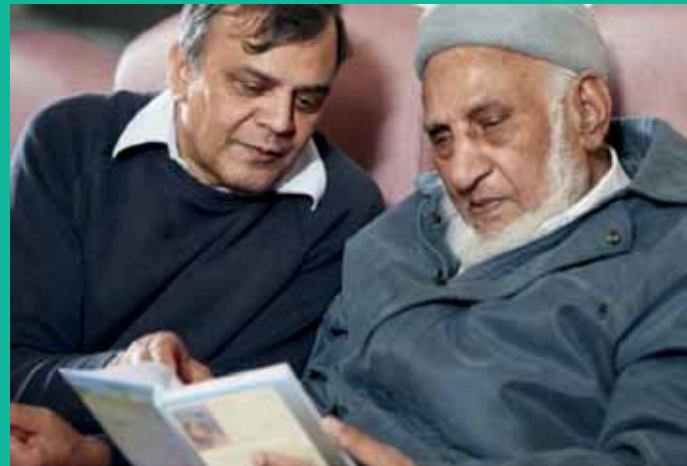


Source: Browne J et al Association of comorbidity and health service usage among patients with dementia in the UK; a population-based study (2017)

Knowing the person

Life story work – a process not a document

Life story work helps people in all settings, whether at home in their communities, in care homes, supported living, or in hospital, to regain their sense of self by capturing their story. Family carers and paid staff can then appreciate the person's life; their strengths, interests and hopes more fully and understand how to support them better now and in the future.



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This is Me – A support tool to enable person-centred care

This is me[®]

This leaflet will help you support me in an unfamiliar place.

My full name is

Please attach a favourite photo of yourself here.

You can also attach a recent photo of yourself on the next page.

- See the notes on page 4 to help you complete **This is me**, including examples of the kind of information to include.
- Keep this leaflet with you and put it in a suitable place so that all the people caring for you can see and refer to it easily.


In partnership with

Royal College of Nursing

Alzheimer's Society
United Kingdom
Dementia

Knowing the person

Herbert Protocol

THE
HERBERT
PROTOCOL 
Safe & Found

What are the risk factors?

Dementia	Delirium	Depression
Ageing	Ageing	Ageing
Depression	Dementia	Dementia
Lifestyle	Lifestyle	Lifestyle
Medical conditions	One of more health conditions, sensory impairment	Health conditions Chronic pain
Alcohol	Consumption of alcohol Poor eating and drinking	Alcohol
	In hospital/post surgery	Transitions
	Infection	
Family history; gender, ethnicity		Family history; gender



Differentiating between Dementia, Depression, Delirium

	Dementia	Depression	Delirium
Onset and duration	Progressive, develops over several years; can last from years to decades	Rapid or slow; can last for months or be chronic	Rapid (Hours to days); usually less than one month but can last up to a year
Alertness/mood / attention	Fluctuates, more stable in early stages	Lacking motivation and concentration, may appear uninterested or have difficulty concentrating	Usually changed or fluctuating; can be hypoactive (sleep/withdrawn), normal, or hyperactive (agitated and with energy; difficulty concentrating and easily distracted)
Sleep / waking	Normal for age; cycle disrupted as the disease progresses	May be disturbed through ruminating and becoming distressed.	Usually disrupted (often more confused at night) e.g. fever, hallucinations etc.
Thinking	Problems with thinking and memory recollection, such as finding the right words. Can be supported	Thinking can become irrational, sometimes paranoid with negative thoughts	Can be disorganised, jumping from one thought to another
Course	Not reversible, ultimately fatal	Usually recover within months; can be relapsing	Reversible, cause can usually be identified

Adapted from Eliopoulos, 2010



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- Join our ever growing network of carers from across the UK
- Share your own unique experiences
- Join multiple carer support groups
- Gain access to a host of other carer webinars
- Gain peer support from other carers
- work with us to create positive change both locally and nationally.



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Thank you for your time!

For support or further information
Contact Us:

Join **tide** (together in dementia everyday) for free!

https://www.tide.uk.net/join_tide/

Phone: 0151 237 2669

Website: <https://www.tide.uk.net/>

email: carers@tide.uk.net

Twitter: @tide_carers

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Find out more at:

foryoubyyou.org.uk

t: 0800 056 2424

e: help@foryoubyyou.org.uk



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Thank you