Dementia Connector Role CTM wide

**PROVIDER BRIEF**

**Background to the All Wales Dementia Care Pathway of Standards**

The All Wales Dementia Care Pathway of Standards was published in 2021 following extensive engagement with 1800 individuals living with dementia, carers, voluntary organisations and health and care professionals. The work has been led by Improvement Cymru as part of the Dementia Care Programme, and directed by the requirements of the Dementia Action Plan for Wales, overseen by the Welsh Government Dementia Oversight Implementation and Impact group (DOIIG). The pathway includes twenty standards that represent what people believe will make a positive difference to dementia care in Wales. The twenty standards sit within four themes: Accessible, Responsive, Journey, Partnerships & Relationships, underpinned by kindness and understanding.

Standard 12 specifically relates to the role of the Dementia Connector and states:

***‘People living with dementia and their carers will have a named contact (connector) to offer support, advice and signposting, throughout their journey from diagnosis to end of life.’***

More information can be found [here](https://phw.nhs.wales/services-and-teams/improvement-cymru/news-and-blog/publications/dementia-standards/)

**About Regional Partnership Boards (RPB)**

Regional Partnership Boards have been established as part of the Social Services and Wellbeing (Wales) Act to improve health and social care. There are seven RPBs across Wales, and they bring together partners working in health, social care, the third sector, education, housing, the independent sector and people with lived experiences. Each RPB is responsible for developing a Population Needs Assessment, a Market Stability Report and a Regional Area Plan, to ensure partners are effectively working together with communities to meet their needs

**Purpose of the pilot**

Across CTM we are seeking to pilot the dementia connector role in our current three locality areas of Merthyr Cynon, Rhondda Taf Ely and Bridgend. These three roles will be funded from the Regional Integration Fund (RIF) for a period of 18 months to end on the 31st of March 2025.

The Service provider will be expected to vigorously evaluate the role and adhere to the Regional Commissioning Unit’s (RCU) RIF performance framework a copy of which is available on request.

Further information on the requirements of the project can be found in the specification detailed in Appendix A.

**Next steps**

Please share your expression of interest, including information about your organisation, a brief outline on how you will deliver the role, and what resources and services you can offer to deliver on the outcomes outlined within the specification in Appendix A.

We will need to receive this by 25th August 2023.

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**Appendix A: Specification**

**SPECIFICATION OF REQUIREMENTS:**

**Dementia Connector**

1. **Introduction**
   1. We are looking to enter an arrangement with a provider to deliver the dementia connector role.
   2. The agreement will be for a period of 18 months.
2. **Scope of the Requirement**

3.1 To support implementation of Standard 12 of the All Wales Dementia Care Pathway the service provider must ensure delivery of the dementia connector role across the CTM region.

3.2 The dementia connector role will work proactively with Memory Assessment Services, primary and secondary care, the third sector and people with lived experience to deliver on a set of outcomes for individuals newly diagnosed with dementia during this pilot period

3.3 The service provider will be expected to identify and evaluate success of the project. This must include strengths, weaknesses opportunities and pitfalls in the model for consideration

1. **The Requirement**

The service will be required to deliver the role of the dementia connector across three areas for a pilot period of 18 months in line with the Job description included in Appendix A.

Alongside this delivery the provider will also have to evidence consideration of the following when applying for this funding opportunity:

1. If an organisation is already delivering support roles they must be clear in their specification how the Dementia Connector will be delivered alongside these existing roles not as a replacement to them
2. The organisation must also clarify how staff working with different role expectations will support the same client group without causing confusion to the person living with dementia
3. The Dementia Connector role must be neutral and not provide information and advice on a wide range of services and support available, not just those provided by the host organisation.
4. The interested organisation must identify plans to keep staff turnover to a minimum in support of the ethos of the role
5. Training provided to the dementia connector must align with the good work framework
6. There will need to be a consistent approach across the three connectors to ensure parity of outcomes for individuals in the pilot areas
7. Consideration must be given as to how the individuals supported should the pilot not continue
8. The bidding organisation must clarify how they will manage active and inactive caseloads
9. When bidding, organisations must outline plans for cover for leave and budget for training
10. **Outcomes and Deliverables**

5.1 The service will adhere to the regional commissioning unit’s outcomes framework for all RIF funded services. They will also be expected to complete qualitative evaluations with people with dementia and the connectors themselves such as those described below:

People living with dementia

* I felt comfortable talking to the connector
* I felt listened to
* I felt I got the help that mattered to me
* I felt the person was easy to contact
* I found the information and advice easy to understand
* I was given help to find the right  health / social care / community groups I needed
* I felt confident about the information and advice I was given
* I was treated well

Connector Staff

* I was able to listen to people and identify what mattered to them
* I was able to manage the level of demand
* I had the skills/experience/training  to provide the information and advice people needed
* I was able to access the right  health / social care / community groups people needed for further help
* I felt confident about the information and advice I was giving
* I felt supported in my role and had access to regular and good supervision

1. **Timescales**

6.1 The initial funding for this role will be for 18 months.

1. **Working arrangements**

7.1 The successful applicant will provide performance updates on a regular basis to the Dementia Connector Work stream.

7.2 The dementia connector will be embedded within Memory Assessment Services and will support delivery against other standards as outlined within the job description and evaluation criteria or at other referral points within organisations where people with a new diagnosis of dementia may be identified

1. **Service Levels and Performance**

8.1 The successful applicant will be expected to report to the Dementia Connector work stream no less that on a six monthly basis. These updates will include:

* Numbers referred
* Numbers met
* Numbers contacted 48hrs after diagnosis for WMC / Number of action plans created, completed and closed
* Numbers contacted at 12 weeks /Number of action plans created, completed and closed
* Numbers provided with Healthy lifestyle advice
* Numbers provided with future planning support (LPA, Living Will, Will etc.)
* Numbers in contacts after 12 weeks /Number of action plans created, completed and closed
* Numbers on caseload open
* Numbers on caseload closed
* Numbers on waiting list  (MC, 48hr, 12 weeks)
* Unit cost (cost/service users supported) In BCBC/ RCT and MT

8.2 CTM is committed to coproduction with people with a lived experience on equal footing to paid professionals. We expect this role to engage, involve and coproduce support with people with a dementia and their loved ones offering voice choice and control to its referees

1. **Pricing**

10.1 Provider to submit total cost to deliver the contract.

1. **Payment**
   1. The Provider will be paid quarterly in arrears via a PO. The Provider must invoice after a PO is raised. The PO must be stated on every invoice due to the new NO PO NO PAY policy. Invoices must be sent to the regional commissioning team. A contact will be provided to the successful applicant.

1. **Location**

12.1 The connector role will be delivered in Merthyr Cynon (MC), Rhondda Taff Ely (RTE) and Bridgend to ensure the support is available across the region as a whole.

12.2 Due to current operational differences across the region the dementia connector will receive referrals directly from Memory Assessment Services (MC and RTE) or at other referral points within organisations where people with a new diagnosis of dementia may be identified (Bridgend).

**Appendix A: Dementia Connector Job Description**

**The Purpose of the Dementia Connector role**

As set out in the ‘All Wales dementia care pathway of standards’ people living with dementia and their carers will have a named contact (connector) to offer support, advice and signposting throughout their journey from diagnosis to end of life.

This named contact will ensure that

* people are connected to available local support networks, which may including peer support options,
* people are enabled to access practical advice and information including financial to support with the adjustments to their lifestyle or environment that will help them remain as fit and healthy as possible

The dementia connector as defined nationally will help people living with dementia coordinate care alongside the statutory duties of Health and Social Care.

**Duties and key responsibilities**

The duties and responsibilities are informed by what matters to people living with a dementia in the Cwm Morgannwg region

* To be an accessible presence at the memory clinic to ensure people (including carers) have an initial connection made at the point of diagnosis.
* Within 48 hours of diagnosis, to facilitate a ‘what matters to me’ conversation to consider the person and their carer’s or family’s needs for ongoing support and facilitate through the provision of information and advice or signpost as necessary
* To be responsible for recording the ‘what matters to me ‘conversation and the information and action plan agreed as a result.
* To establish the Dementia Connector role as a point of access for information and advice to people living with a dementia throughout their journey and confirm the frequency of check in conversations they require
* Within 12 weeks of diagnosis to connect with the person and their carer or family to facilitate a further ‘what matters to me’ conversation, in addition issue information regarding the importance of physical health activities to support and promote health.
* To always use the ‘what matters to me’ conversation when contacted by people living with dementia to fully understand their situation and what they need and to be responsible for recording the conversation and the information and action plan agreed as a result
* To maintain an effective understanding of the rights and entitlements of people living with a dementia in order to provide the right information, advice and assistance - including signposting to others
* To maintain strong relationships with all appropriate local health and social care partners, including adult social care, primary care, OPMH services, third sector and community-based groups and services to facilitate connections and referrals for people living with a dementia where appropriate to do so
* To maintain an effective understanding of dementia relevant training available for people living with a dementia and support access as appropriate
* To maintain an understanding of the talking therapies available in the community and through primary care for people living with a dementia and support signposting or facilitate referrals as appropriate
* Facilitate a responsive point of access response for people living with dementia

**Organisational responsibilities**

There would be subject to the relevant organisation employing the DC and would include their contribution/adherence to:

* Supervision/appraisal probation and reference to HR policies
* Safeguarding
* Health and safety
* Training and development
* Complaints process

**PERSON SPECIFICATION**

The knowledge to be measured is the minimum needed to carry out the full duties of the job to the required standards. Qualifications should be used to provide an indicator of the level of knowledge required. Training and experience is also a means of acquiring the knowledge required for a job such as on-the-job training, short courses and experience to an equivalent level of knowledge which should be specified.

NOTE: Please do not use the number of years’ experience as this is potentially discriminatory and these will be returned. It is essential that managers concentrate on the sorts of skills and qualities needed to fulfil the duties of the post.

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| **ATTRIBUTES** | **ESSENTIAL** | **DESIRABLE** | **METHOD OF**  **ASSESSMENT** |
| **Qualifications**  **and/or Knowledge** | Excellent underpinning knowledge of dementia including an understanding of common illnesses associated with dementia and different stages of a dementia journey  Excellent underpinning knowledge of carers, their recognition, rights and entitlement for a life alongside caring  Clear understanding of the social services and wellbeing (Wales) Act  the Mental Capacity Act, Mental Health Act and the Mental Health Measure in Wales  Clear understanding of the Welsh safeguarding principles and a willingness to develop early understanding of the CTM Safeguarding Board processes and procedures  Knowledge of rights and entitlements particularly with regards to statutory health, housing and social care, pensions and benefits,  Willingness and ability to develop knowledge of the services and support available across the  region for health, social care and the third sector  Recognised health or social care qualification in order to adhere to the good work framework  Recognised dementia qualifications or relevant experience |  | Application Form  Pre-employment checks  Interview  References |
| **Experience** | Direct experience of working with people living with dementia  Experience of completing and maintaining confidential and sensitive case records  Experience of prioritising work and delivering a good quality service within challenging deadlines.  Experience of resolving challenging situations and positive risk taking / management | Lived experience of living with dementia | Application Form Interview  References |
| **Aptitude and**  **Abilities** | Excellent organisational skills and an ability to prioritise workload effectively.  Excellent, interpersonal, influencing and negotiating skills – proven ability to establish and enhance effective working relationships at all levels.  Ability to make use of IT to facilitate e-working, proficiency in the use of Microsoft Office software including Outlook, Word, Excel and PowerPoint.  Excellent communication skills, both written and oral.  Proven ability to meet deadlines and work under pressure in a proactive way.  Ability to problem solve and apply lateral thinking being flexible in the support they offer.  The ability to manage relationships with people living with dementia using empathy and sound judgement (emotional intelligence) | Ability to speak Welsh. | Application form Interview  References |
| **Values (informed by people living with dementia in the Cwm Taf Morgannwg Region** | Compassionate and empathetic being self-aware and understanding different approaches to working with people with a dementia  Non-judgemental and approachable – being a good listener to individuals with a dementia and their families  Well-mannered and patient with a calm approach and ability to work with people with complex behaviour  Friendly, trustworthy and reliable providing consistency of support to individuals  Passionate and enthusiastic about good dementia care |  | Application Form  Interview  References |