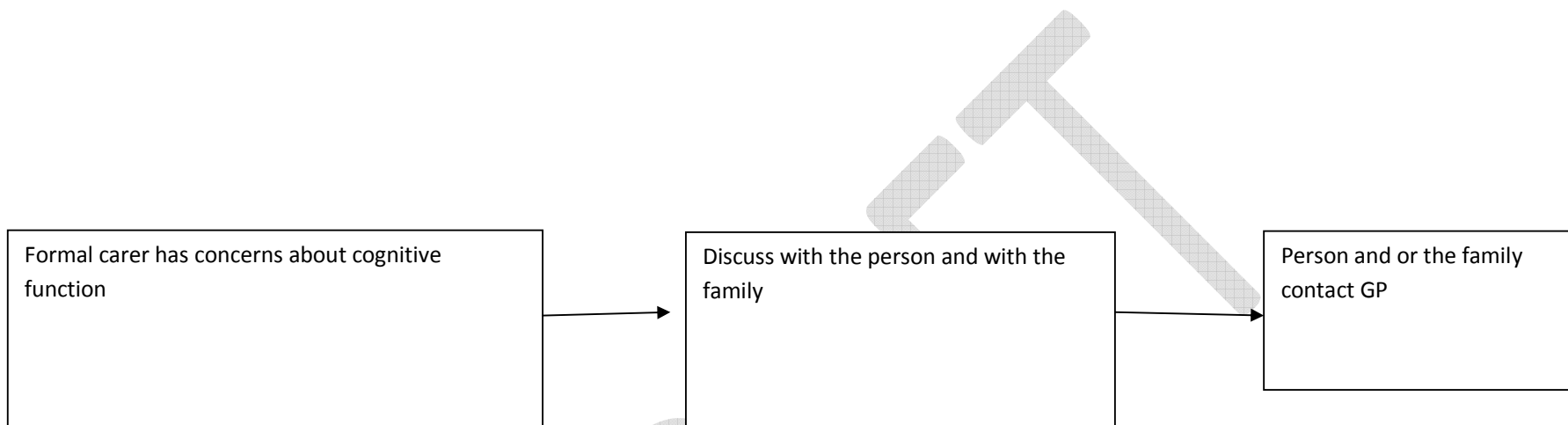
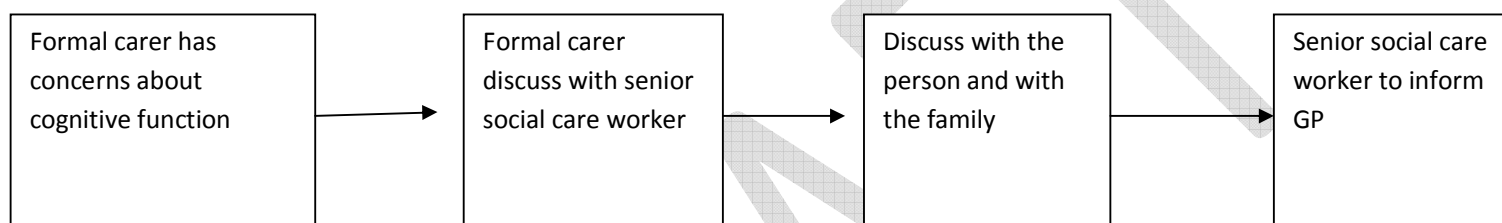


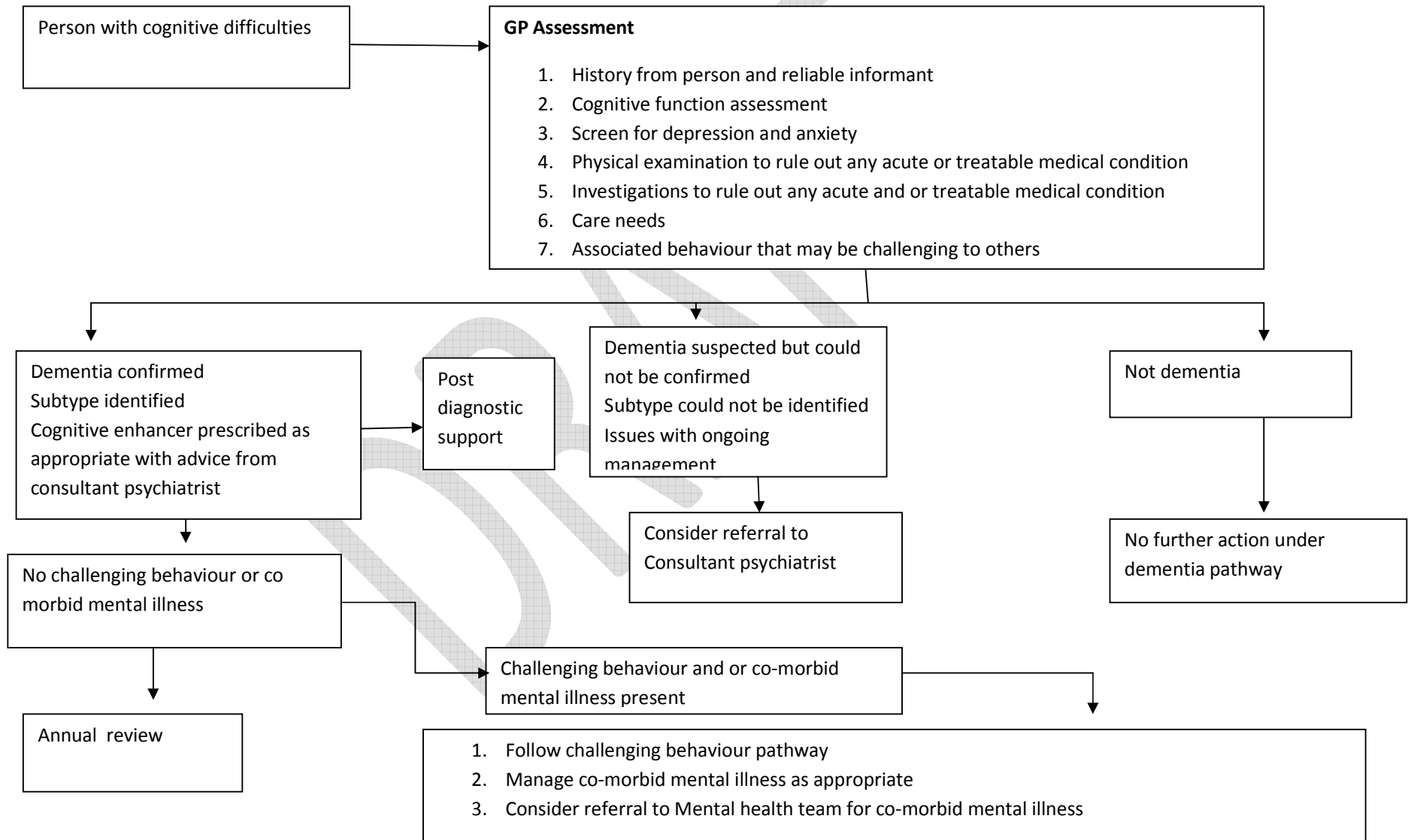
Initial Screening for a person in the community and not in a care setting



Initial Screening for a person in the community and in a care setting



GP Assessment for Dementia



Investigations

Bloods

Full blood count

Urea, Creatinine, Electrolytes

Liver function tests

Thyroid function tests

Vitamin B12 and Folate

Urine

Dipstick/culture

Structural Neuro-imaging (CT Brain)

To exclude potentially reversible/ other causes such as space occupying lesion

To be requested if there is a history of

Sudden onset/deterioration

Presence of focal neurological signs

Seizures early on in the course of illness

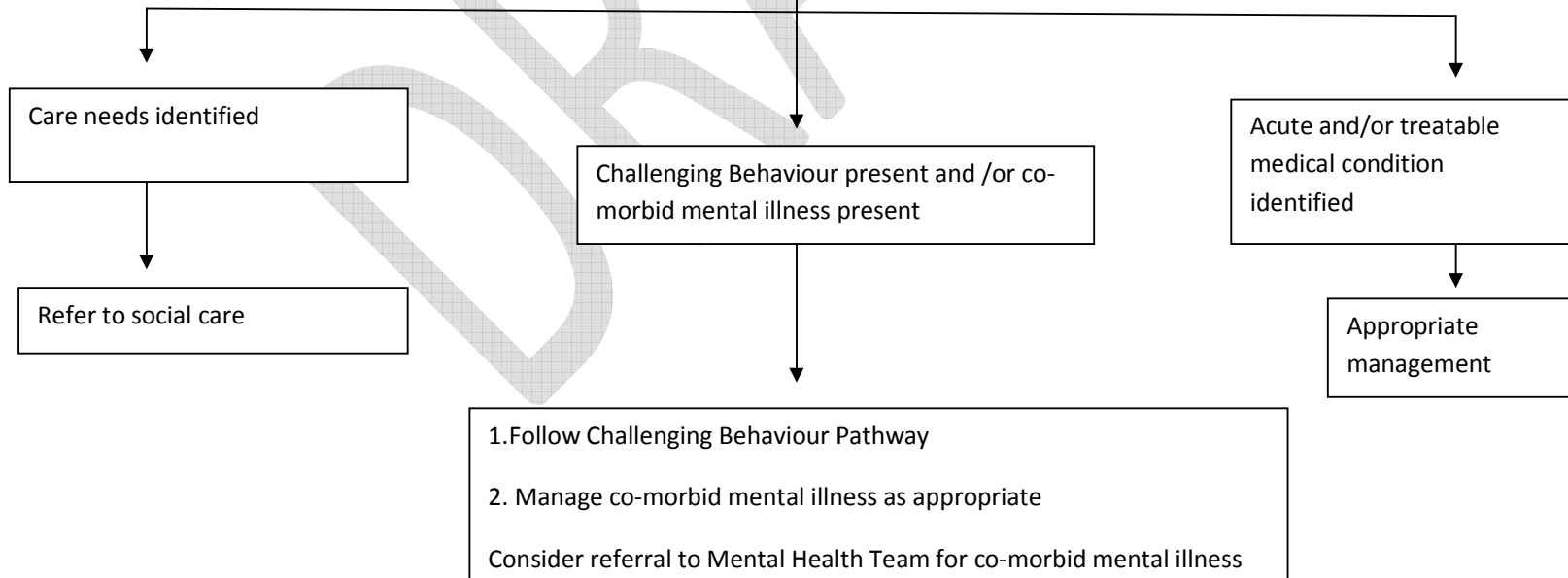
Lack of reliable information

GP Annual Review

Annual Review

GP Assessment

History from person and reliable informant
Cognitive function assessment
Screen for depression and anxiety
Physical examination to rule out any acute and or treatable medical condition
Investigations to rule out any acute and or treatable medical conditions
Care needs
Associated behaviour that may be challenging to others



Referral Criteria

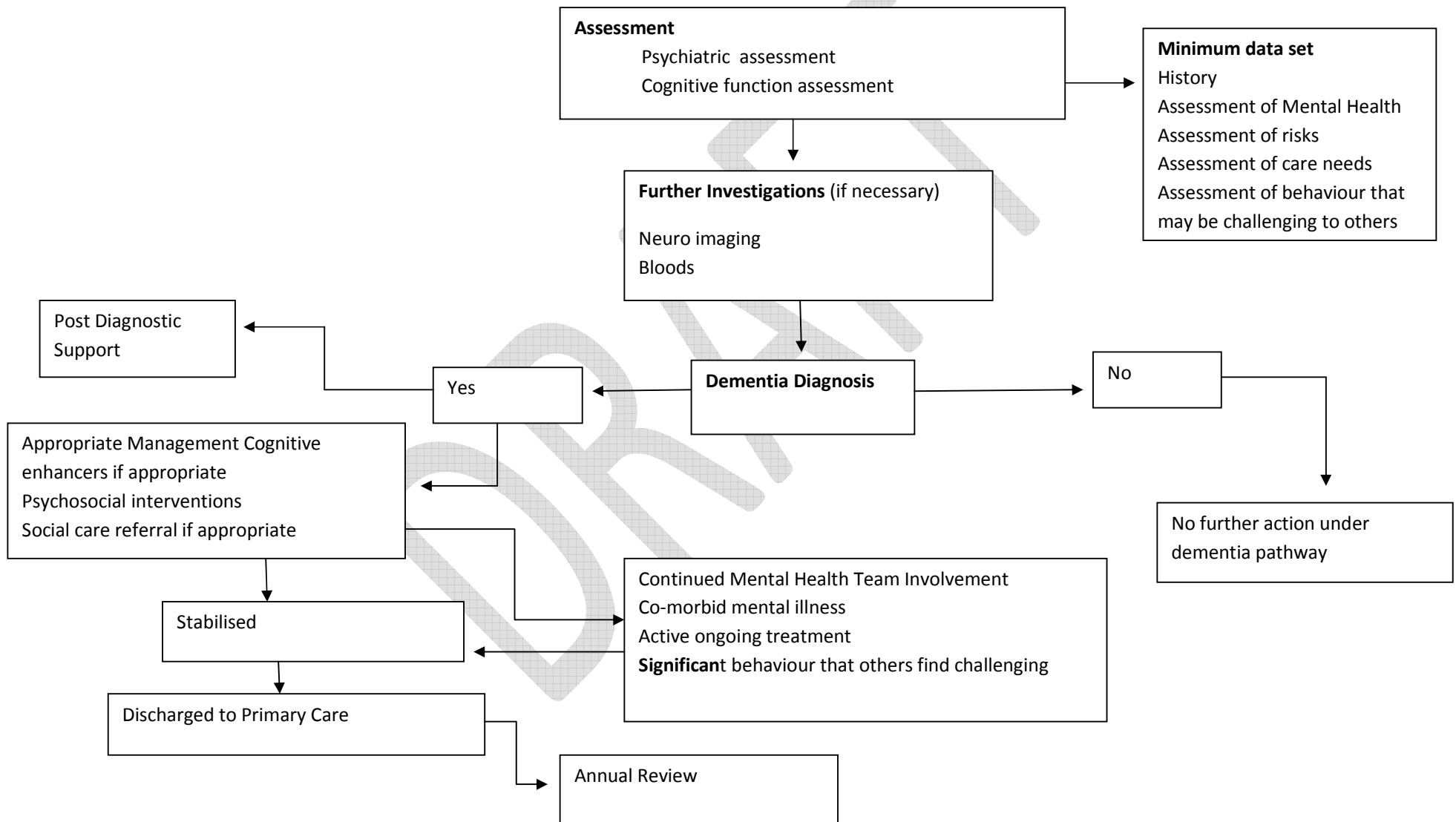
For Diagnosis

Contact details for next of kin
Onset and duration of symptoms
Current support and care needs
Physical examination and investigations to rule out other acute/treatable conditions
Cognitive function assessment
Screen for depression and anxiety
Associated behaviour that may be challenging for others

For Management of Challenging Behaviour

Have firstly followed challenging behaviour pathway

Diagnosis



Post diagnostic Support

Post diagnostic support to be delivered by multi-agency partnership consisting of CPN service, Social care, Primary care and Alzheimer Scotland.
The dementia steering group will implement and monitor the delivery of Post Diagnostic Support

Diagnosis given to the person with dementia and/or carer with an offer to opt-in to the Post Diagnostic Support Service

Information

Diagnosis

Medication

Driving

Other information as appropriate given at time of diagnosis

Psychosocial Interventions for cognitive impairment in dementia

Further information and support as per the 5 pillar model

Understanding the illness and managing symptoms

Planning for future decision making

Supporting community connections

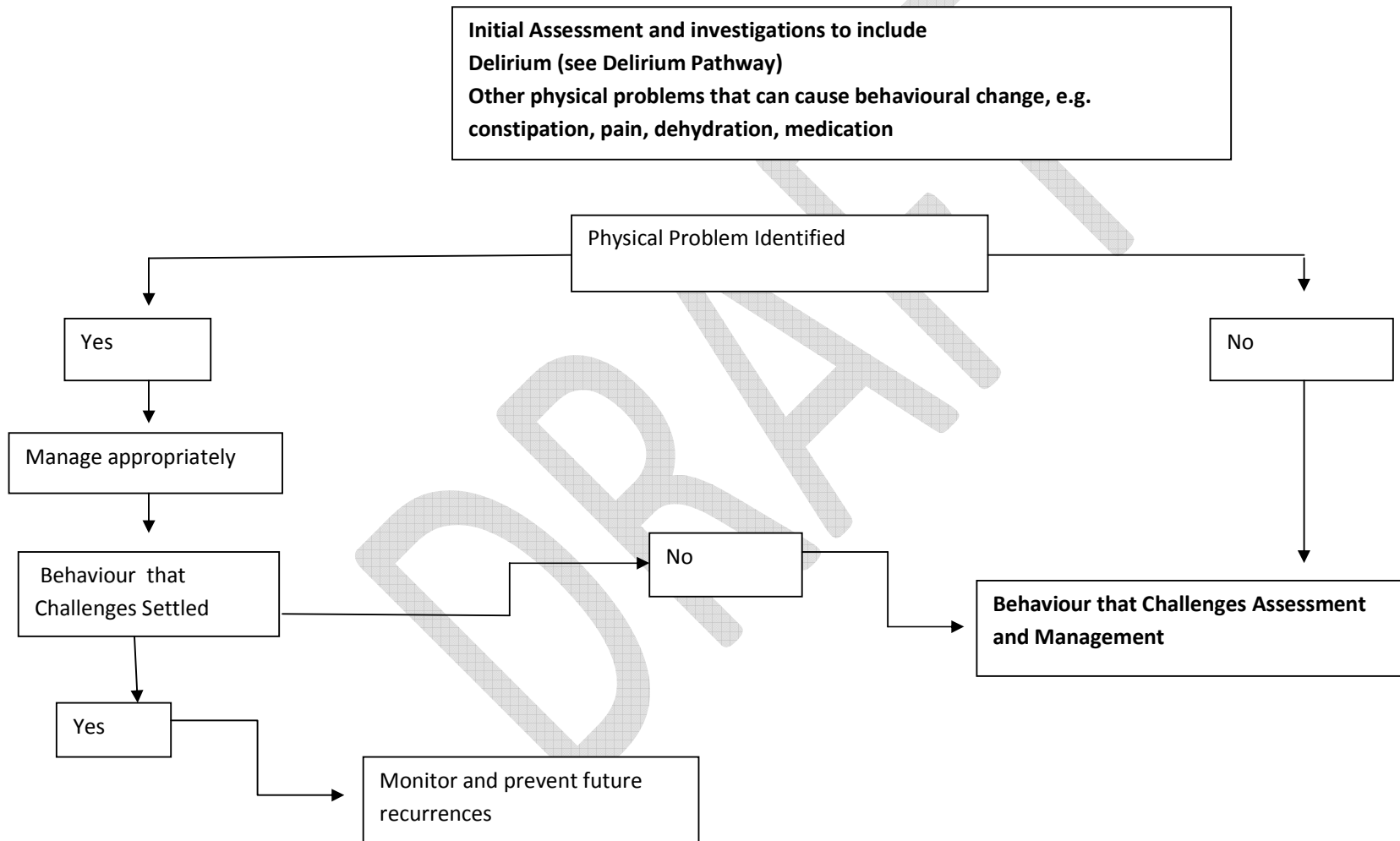
Peer support

Planning for future care

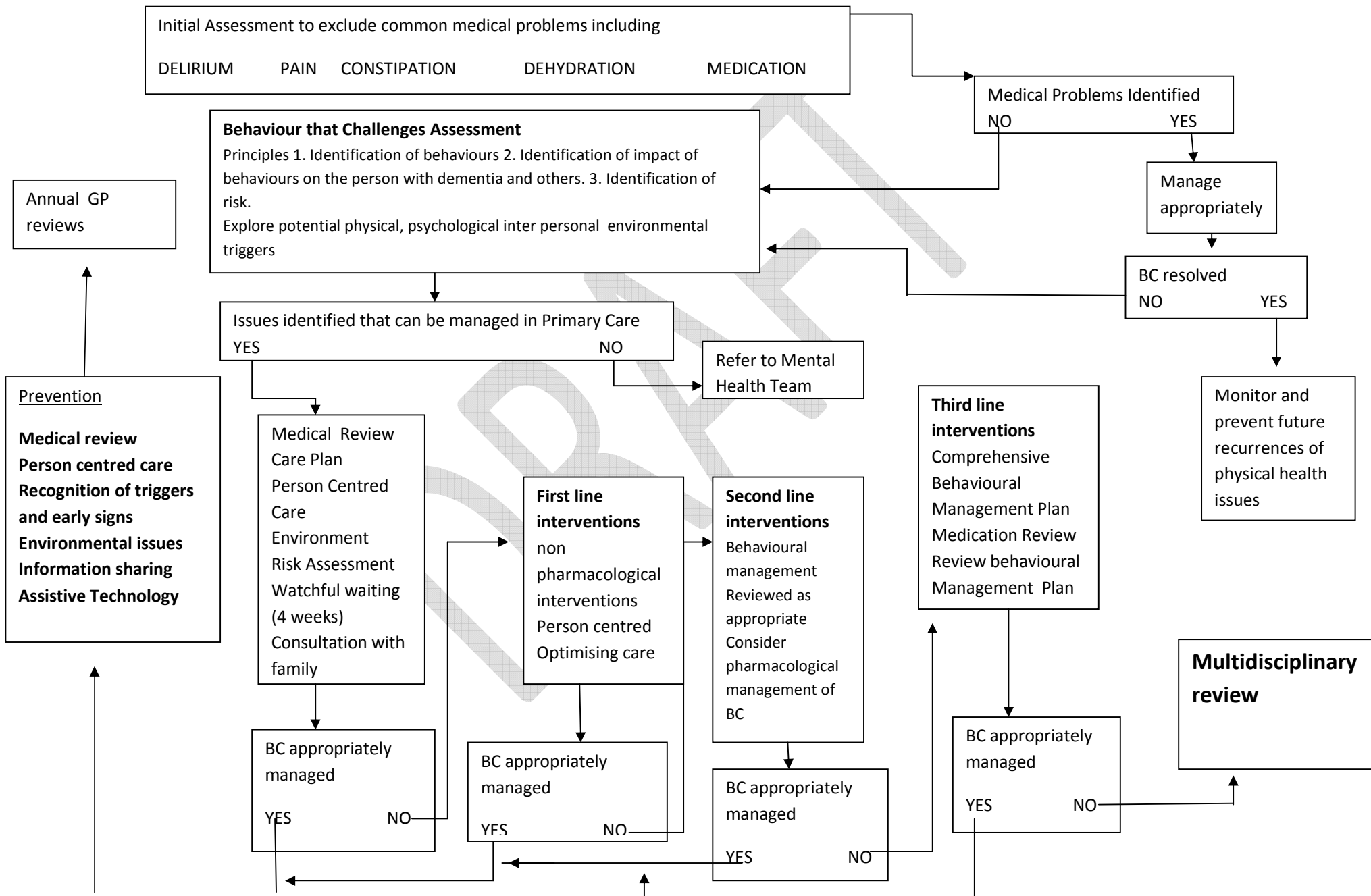
Information

Information for Patients	Facing Dementia Handbook Alzheimer Scotland Website Alzheimer Scotland Helpline 0808 808 3000
Information for Carers	Coping with Dementia Alzheimer Scotland Website Alzheimer Scotland Helpline 0808 808 3000 Benefit Agency website Dementia Making Decisions
Clinical Information	Quick reference to SIGN 86 Guidance to NICE 42
Legal Information	Mental Health (Care and Treatment) Scotland Act Adults with Incapacity (Scotland) Act 2000 Protection and Support of Vulnerable Adults
Services	Alzheimer Scotland, Crossroads ??????????????????

Behaviour that Challenges Pathway



Behaviour that Challenges Assessment and Management



MEDICAL REVIEW

To detect any general health problems

- **Delirium**
- **Pain**
- **Infections**
- **Dehydration**
- **Constipation**
- **Malnourishment**
- **Medication review**
- **Depression/Anxiety**

PERSON CENTRED CARE

- Is the person treated with dignity and respect?
- Do you know about their history, lifestyle, culture and preferences?
- Do the carers try to see the situation from the perspective of the person with dementia?
- Does the person have the opportunity for relationships with others
- Does the person have the opportunity for stimulation and enjoyment?
- Has the person's family or carer been consulted?

- Does the persons care plan reflect their communication needs and abilities?

ENVIRONMENT

- If the person is being cared for in a bed or chair, are they comfortable and free of pressure sores?
- Is the TV or radio playing something that the person can relate to and enjoy?
- If the person is mobile, can they move around freely and have access to outside space?
- Does the person recognise the environment as home? Does it contain things to help them feel at home?
- Could assistive technology be used to improve freedom or safety?
- Does the person have the correct spectacles, and are they clean?
- Is their hearing aid turned on and working?

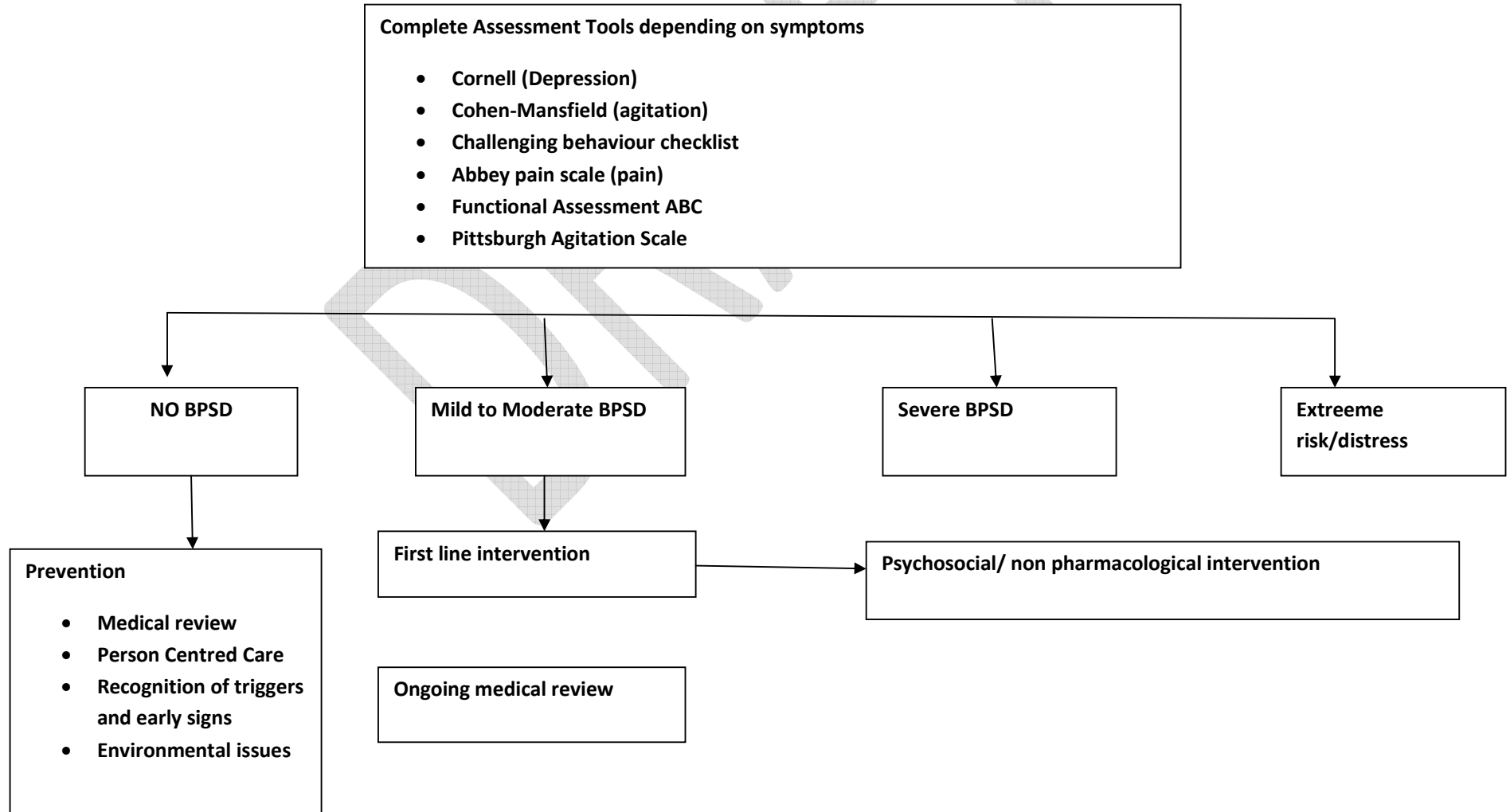
- Is it too hot or too cold?
- Is the person hungry? People may forget to eat

Non-Pharmacological Interventions

- **Soothing and creative therapies**
 - Aromatherapy
 - Massage
 - Warm towels
 - Smells of cooking
 - Having hair brushed
 - A manicure
 - Music to the persons preference
 - Singing and dancing
- **Simple non drug treatments**
 - Developing a life story book
 - Frequent short conversations

- Using personal care as an opportunity for positive social interaction
- **Sleep hygiene**
 - Reduce daytime napping
 - Increasing activity during the day
 - Agreeing realistic expectations for sleep duration

Challenging Behaviour Assessment



Pharmacological Treatments of Challenging Behaviour

