

Good Morning,

Can I begin by asking for a show of hands. How many of you here today have this little badge – a Dementia Friend's badge?

Can I suggest those of you who do not have this little badge - make the effort to become a Dementia Friend- soon!

I have no medical background. My experience with the NHS started as a non-executive Vice Chairman with the South West Durham Health Authority. I mention this to explain my commitment to Dementia Friending at all levels, as during that time we, as an authority were compelled to implement the then chosen alternatives to institutional care, that of care in the community. I was tasked again as a non-medical, non-executive to oversee the rundown and subsequent 'relocation programme' of our institutionalised patients including many, many with various types of this condition. It was an eye-opening experience and one that has remained with me almost three decades on. On that basis, I would like it to be understood any errors in this brief presentation are mine alone

I've been asked to explain why the North Beverley Medical Centre's patient group's suggestion that all staff within the practice should be Dementia Friendly was so eagerly accepted and the programme quickly entered into.

I should stress at this point however, Dementia Friending is not restricted to those in the profession or with any clinical expertise and/or experience. Being a Dementia Friend is simply a way to become more personally aware of the condition and the effects it has on those affected, those who care for those affected and how it affects our perception of this very debilitating and distressing condition.

Neither am I here this morning to run a Dementia Friend course but again, I would urge you all to attend one – it's only an hour – and well worth the effort.

So – back to North Beverley Medical Centre and what we are doing about Dementia awareness.

Before deciding 'if and when' we would commence Dementia Friend awareness for all staff, we had to determine what the overall benefit would be for (a) the staff involved and (b) patient interface at all levels.

Regarding the benefits for staff that was relatively easy. Being aware of dementia in others, is almost as important as the clinical care of the disease itself. Actually, dementia is not a disease is it - rather a term used to describe a group of symptoms – for example the loss of memory, a decline in the ability to think clearly and reason everyday issues – and of course problems with communication.

It's also possible to have more than one form of dementia and older members of our society may have Alzheimer's disease and Vascular dementia – sometimes referred to as 'mixed dementia'.

The causes of these conditions is really the unknown factor in the equation. Many suggest Alzheimer's and/or Dementia is a combination of genetic and environmental influences on the brain.

Whether you are medical staff, administrative or support personnel, or simply a member of the greater public, it is important to remember Dementia is not a natural part of our aging process. It is caused by diseases of the brain which singularly or cumulatively cause someone to behave and think differently – but what is important is to remember, people with dementia can and do live well with – and not in spite of dementia.

As far as patient interface is concerned a great example of how dementia can affect someone and how it can possibly be demonstrated was the story we were told of an everyday occurrence – and I'm sure we've all had a similar experience – where in a busy shopping centre, an old woman or man entering or leaving a shop through a busy doorway, seems unable to make up their mind on what they are doing?

He or she may go side to side, back and fro or as we say north of the border, seem a bit fey? One of the effects of dementia is the effect it has on everyday judgement processes and coupled with age can confuse,

make uncertain or in worse case scenarios – panic. Identifying this and helping someone cope with their uncertainty or distress is what dementia friending is all about – and this doesn't just happen in the shopping centre – it can happen in any doctor's surgery waiting room or immediate vicinity. So what can non-medical and caring staff do if they see an instance of this behaviour?

Well the first thing of course is being able to recognise where there 'might' be a problem and I do stress 'might' as everyone of us can have 'off-days' and appear a bit strange.

I had an off-moment myself last week. We were driving into Goole to meet old friends for lunch – a thing we have done many times each year and I had a complete mental block as to where I was going and how to get there. So have I got dementia – I hope not - or I may actually be addressing the wrong audience at this convention for accountants – but seriously, a kind of panic sets in for those few moments until my ever-critical wife, the present Mrs Dewar put me back on course.

But imagine if that were a permanent state of mind. Confusion, distress and possibly no one who recognises that you might have a problem and be able to reassure, give friendly advice, share a chat with, have a cuppa with or just talk to...?

That's why it's important all staff at our medical centres become dementia friends.

So please, at your next patient Group meeting, discuss the benefits of having all staff 'accredited' as dementia friends and encourage your friends to do the same. A valuable hour out of their – and your busy day – could and will make such a difference to someone, somewhere and more often than you think!