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| **DEMENTIA STRATEGY OPERATIONAL GROUP**  **(Sub group of Dementia Strategy Group)** | |
| **TERMS OF REFERENCE** | |
| **Overview**  The Dementia Operational Group is a sub-committee of the GWH Dementia Strategy Group. The primary aim of the Dementia Operational Group is to oversee the implementation of the six key dementia work streams as recommended in the GWH Dementia Strategy 2014-2017. Progress will be directly fed back to the main Dementia Strategy Group.  **Objectives of the Group**   |  |  | | --- | --- | | 1. | To implement and monitor the Trust’s Dementia Strategy, ensuring that gaps in achievements are highlighted and reported to the Dementia Strategy Group. To ensure progress is being made in all six work streams evenly across the Trust. | | 2. | To review and update the dementia training programme delivered at all levels to ensure that it is in compliance with training recommendations from Health Education England. | | 3. | To establish and implement a clear clinical pathway for people with dementia across the Trust. | | 4. | To ensure environments in which dementia care is provided are appropriate and optimised throughout the Trust. | | 5. | To oversee implementation of the recommendations from local and National clinical audits that would form part of the Trust assurance framework towards the delivery of National and Regional Standards. | | 6. | To provide advice and support to various Divisions on achieving compliance with the National Dementia CQUIN. | | 7. | To monitor for trends and themes in carer feedback and implement changes in dementia services based on robust feedback. | | 8. | To raise the awareness of Dementia across the Organisation through the development of Dementia Champions; Volunteer Services; Carers involvement; Education and Training; Celebrating good practices. | | |
| **Membership**  The Group shall consist of:   |  | | --- | | Consultant Physician and Dementia Lead (Chair) Great Western Hospital (GWH) | | Head of Safeguarding Adults at Risk and Mental Health, Matron Lead for Learning Disabilities and Dementia – (Deputy Chair - Interim Chair), GWH | | Matron Lead for Dementia, GWH | | Chief Nurse, Executive Lead for Safeguarding Adults at Risk, GWH | | Nurse representative Diagnostics & Outpatients, GWH | | Matron Lead for Dementia, Planned Care, GWH | | Chair of Carers Committee, GWH | | Matron Lead for Dementia, Unscheduled Care, GWH | | Representative Gynaecology, GWH | | Divisional Director of Nursing, Midwifery, GWH | | Sister, Emergency Department, GWH | | Ward Manager, Unscheduled Care, GWH | | Ward Manager, Planned Care, GWH | | Academy Lead for Dementia Training GWH | | Trust Wide Research, Research and Development, GWH | | Safeguarding Adults at Risk, Mental Capacity Act and Deprivation of Liberty Safeguards Lead, GWH | | Physiotherapist/Occupational Therapist, GWH | | Pain Team Representative, GWH | | Dementia Champion Representative, GWH | | Voluntary Services Manager, GWH | | End of Life Specialist Nurse, GWH | | Consultant Lead Avon & Wiltshire Mental Health Partnership (AWP) | | Mental Health Liaison Team (AWP) | | Swindon Dementia Specialist Care Home Liaison Team (AWP) | | Senior Practitioner, Victoria Centre, (AWP) | | Acute Liaison Nurse for People with Learning Disabilities SEQOL | | Person with Dementia | | Expert by experience (Carer) | | Alzheimer’s Society, Manager Swindon and BANES | | **Carer Support Manager, Swindon Carers Centre**  **Carers Support, Wiltshire** | | Prospect Hospital Based Clinical Nurse Specialist for Palliative Care | | IMCA / IMHA Team Leader Swindon Advocacy Movement | | Mental Health Act and Safeguarding Adults at Risk Administrator - Administrator for meeting, GWH |   Other members will be co-opted on an as and when basis to discuss relevant issues   * Deputy Chief Pharmacist * Carillion Services Management * Manager, Patient Advice & Liaison Service (PALS) * Clinical Audit Facilitator | |
| **Meeting requirements** | |
| (a) | **Quorum** – A quorum will be considered if at least 5 representatives are present, one of those shall be either the Chair or Deputy Chair. |
| (b) | **Attendance –** Members should make every effort to attend all meetings of the Group each year. Recommended annual attendance for the Chair and Deputy Chair is 80% and for other group members (or their designated deputies) is 60%. |
| (c) | **Substitutes/Deputies** - Each member of the Group is permitted to send a substitute / deputy to attend in their absence. Prior notification should be sent to the Chair of the Group. This attendance will count towards the quorum. |
| (d) | **Invitees** - Other persons may be invited to attend meetings of the Group as required and agreed by the Chair of the Group. |
| (e) | **Frequency of Meetings** – The Group will meet quarterly and special meetings may be convened at short notice if required. |
| (f) | **Administration of Committee** – The Mental Health Act and Safeguarding Adults at Risk Administrator shall provide appropriate administrative support, guidance and advice to the Chair and group members. |
| **Responsibility / delegated authority** | |
| 1. | The group will be accountable and responsible to the Dementia Strategy Group. |
| **Standing Agenda Items** | |
| 1. | Update on six priority work streams |
| **Accountability / reporting requirements** | |
| 1. | Minutes of the meeting shall be formally recorded, circulated to group members, and other appropriate groups or Committees. |
| 2. | The group will draw to the attention of the Dementia Strategy Group any issues which it believes requires that committee’s consideration. |
| 3. | Additional risks will be reported to the group by the representatives of the Divisions as necessary. |
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| **Lead Contact for this Meeting** | |
| Medical Consultant Lead for Dementia | |
| **Monitoring Effectiveness** | |
| The Committee should review its effectiveness at least annually   * Annual review against Dementia Work Plan * Annual review Terms of Reference | |
| **Review** | |
| 1. | These Terms of Reference were agreed by the Dementia Strategy Operational Group members. |
| 2. | The Terms of Reference of this Group should be reviewed annually (next due May 2017) |