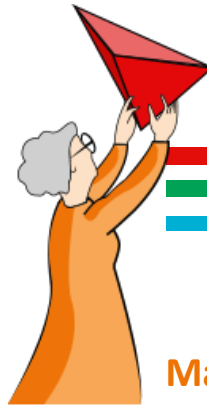


# THE D-CARE PROJECT

## what is the need & what will it deliver



By 2050, it is estimated there will be almost 20m Europeans living with some form of dementia; people live longer but also suffer ageing diseases. There is currently no cure for dementia, but there is a need to improve their wellbeing and also improving the skills of their caregivers, many of whom are friends and family rather than professionals; they are not trained or prepared.

### Main Objectives-----

The project aims to deliver training to caregivers in CST, Cognitive Stimulation Therapy. This is an evidence-based methodology, proven to help people who have mild to medium dementia, developed by the University of Central London (UCL) and now utilised by many countries. There will also be training to help the family and friends who take on the caring role, to aid their understanding and assist them: for example, creating a dementia friendly home.



### The project so far-----



The first transnational meeting was held in Umbria at the start of the project, November 2019. Partners come from a mixture of organisations: VET colleges, charities who work with older people and professional organisations. Other than ensuring all partners understand the project and the management requirements, the additional research (IO1) and the joint staff training (IO2) were discussed. Dates set for the JST – but then we discovered a problem, **Covid-19**.

## How does Coronavirus affect the project?

IO1 was completed with some interesting results, which gave us a good basis for planning IO2. Dates were set and flights booked. And cancelled. New decisions made. The JST has been replaced by e-learning, which is now available on our website, available to anyone who registers. We are proud of this course, which should take 6-8 hours (not on the same day !!)

We have also been considering how older people are affected by COVID-19; one aspect is loneliness. Physical distancing is crucial in the way we all have to live with this virus, and that is hard for older people, people living with dementia – and their carers. Self-isolation or inability to visit someone in a care home – how is that understood by the person with dementia? In addition, of course it can be difficult to explain to a person with dementia why they should wash their hands more frequently. Equally difficult, is explaining why you are avoiding touching them.



## Coronavirus: advice for families looking after someone with dementia-----

The D-Care project team are well aware this is a worrying time for families, particularly for anyone looking after someone with dementia. The past months and the time ahead are challenging and the carer must consider how to look after themselves as well as the person with dementia.

A carer needs respite and support to enable them to support the person with dementia better. The D-Care project aims to train and support caregivers with some respite.

It is imperative that the carer finds ways to get some respite, to stay entertained and distracted. If it is at all possible, they could set up different areas around the home to enable moving from activity to activity: watch favourite films and musicals in the living room. Listen to the radio in the kitchen. Do jigsaw puzzles at the table. If possible, take walks around the garden. Alternatively, plan a walk around the balcony.

Organise the day as much as possible to give a schedule and make a discipline and order for each days.



----- And take our course as soon as it is available.

## Results from IO1

This seems like a long time ago now, but it was very useful to conduct this in-depth research and discover the country and cultural differences.

- **Many similarities in Italy, Greece, Spain and UK**
- **Denmark stood out regarding delivery and facilities, recognising the growing numbers**
- **Facilities cannot cope with the growing numbers**
- **All countries relied on family and friends to provide some care, although in Denmark, it is unusual for the person with dementia to be cared for at home**
- **In general, poor integration between health and social care; not enough staff**
- **Many countries employ immigrants on low wages to provide the social care**
- **Lack of training for the carers; again Denmark is different, it has good training**

