Connecting People and Community for Living Well

Wellbeing Guide









Acknowledgments

The logos above represent the many partners that contributed to the development of this Wellbeing Guide. We are grateful for their willingness to contribute their time, thoughts and feedback to build and refine this resource. Their dedication and efforts have made this work possible.

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Introduction

In this Wellbeing Guide we talk about community collaboratives. This is a group of individuals from different organizations, sectors and backgrounds who come together to work on making their community the best it can be for everyone. These groups may also be called community teams or coalitions.

What is the Wellbeing guide?

What is the Wellbeing guide? The Wellbeing Guide is one of five elements of the <u>Connecting People &</u> <u>Community for Living Well model</u>. All elements are intended to be applied together, and can be adapted to the context of your community. Completion of the Wellbeing Guide will support teams, organizations and groups to recognize where their strengths are, and where they might need to focus to be most successful in helping those in their community living with dementia, and their carers. For more information on Connecting People and Community for Living Well please visit the webpage at <u>www.ahs.ca/cpclw</u>

What to know in advance.

- The Provincial Team will help to facilitate the completion of the Wellbeing Guide
- This Guide is intended to be completed with **diverse representation** from community collaborative members. This should include input from **those with lived experience**.
- The order in which the sections are completed is the **choice of the collaborative**.
- Collaboratives who are just beginning to work together may want to start with the Collaboratives section of the guide, as it can **help identify who is missing** from the discussion.
- Completing the entire Guide (all 3 sections) will take an estimated 5-6 hours. This can be done over a **series of conversations.**
- Information gathered during discussions can inform conversations on subsequent contributors in the same section, as well as contributors in other sections.
- The Wellbeing Guide is intended to be used **in combination with** the Connecting People and Community for Living Well **Work plan**. Information collected in the Guide, and the priorities identified during its completion (i.e. pre-implementation rating) are then incorporated into **work plan**.
- It is recognized that many factors affecting wellbeing are outside of the control of communities and the community collaboratives (i.e. pandemic, government priorities, funding). These factors can affect the rating even when exceptional efforts have been made.

Why Wellbeing?

Wellbeing is the ability to be and do as you value, and is seen as a general term encompassing the total universe of human life domains, including physical, mental and social aspects, that make up what can be called a "good life" (WHO, World Report on Ageing and Health, 2015)

This Wellbeing Guide considers the 'Sustainable Care Model of Wellbeing' developed by Allister McGregor (2007). He describes three areas of wellbeing:

- 1. Material wellbeing: What someone has (i.e. income, housing)
- Relational wellbeing: What someone can do through their relationships with others (i.e. family, friends, others in the community)
- 3. Subjective wellbeing: How someone feels about what they have, and what they can do with it (i.e. Do they feel they have what they need to live the life they would like to? Or to live in the place they want to?)

For individuals, when wellbeing is looked after, people have and can do the things they need to help them live the life they want to.

For groups, when their wellbeing is looked after they are able to work together and support the people living in their community.

Wellbeing Domains







Community Collaboratives

MATERIAL CONTRIBUTORS

Community Collaboratives

Contributor #1

Time and dedicated resources to actively participate in the ongoing work

Explanation

- Collaboratives have the time and resources to carry out the planned activities of the collaborative.
- Members are supported by their leadership to participate in the collaborative.

Questions and factors to inform rating

Do members have the time and dedicated resources to participate in, and contribute to collaborative activities including:

- Support by their own organizations to participate.
- Opportunity to share information with their leaders that increases awareness of the value of collaborative work, and alignment of collabortive goals with organizational goals.
- Options for how collaborative members can contribute to ongoing efforts.

Resources and Gaps

Comments

- When identifying areas of greatest need
- Following implementation of new support or resource to reflect impact made
- **1** Red: Highlights an area of great need. May need to gather more information
- 2 Yellow: Needs attention. Some attempts have been made but needs further development to have more impact
- 3 Green: Not in need of attention within our community at this time

Pre-implementation Rating		g Cyc	Cycle 1- Chosen activity		Post-implementation Rating		
12	3				1	2 –	3
Pre-implemen	tation Ratir	g Cyc	le 2- Chosen activity		Post-implem	entatio	on Rating
12	3				1	2	3

Community Collaboratives

Contributor #1

Dynamics between members

Explanation

• Members contribute equally to the decision making processes.

Questions and factors to inform rating

- Do all members of the collaborative have opportunity to contribute to decisions being made by:
- Seeking input from each participating member.
- Sharing tasks.
- Developing process to address conflicts.
- Making the most of knowledge and experience of members to support successful teamwork.
- Acknowledging the political or economic factors that impact the members' ability to participate.

Resources and Gaps Comments

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Pre-implementation Rating		ion Rating	Cycle 1- Chosen activity	Cycle 1- Chosen activity		Post-implementation Rating	
1	2	3			1	2	3
Pre-impl	ementat	ion Rating	Cycle 2- Chosen activity		Post-imple	mentat	ion Rating
1	2	3			1	2	3

SUBJECTIVE CONTRIBUTORS

Community Collaboratives

Contributor #1

Shared vision and purpose

Explanation

- Each member understands the purpose of the collaborative.
- The collaborative has processes to help them achieve their goals.

Questions and factors to inform rating

Has a common vision and understanding of the collaborative's purpose been discussed and documented? This includes:

- Regular reflection on the vision and purpose.
- An ability for each member to contribute to the direction of the collaborative.

How do members:

- Identify gaps.
- Share what they see is working well.

Resources and Gaps Comments

Rating Scale to be used:

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1	2	3			1	2	3
Pre-imple	ementati	on Rating	Cycle 2- Chosen activity		Post-imple	ementat	tion Rating
1	2	3			1	2	3

SUBJECTIVE CONTRIBUTORS

Community Collaboratives

Contributor #2

Outcome focused work.

Explanation

Collaborative members:

- Are action oriented.
- Want to impact community in a meaningful way.
- See progress through acheiving goals.
- Have ways to illustrate the work they are doing and results they are achieving.

Questions and factors to inform rating

How does the collaborative ensure members can contribute to activities and priorities ? How are collaboratives keeping track of their priorities, activities and results?

• How is the work of the collaborative being shared between members, locally, provincially, and nationally?



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1	2	3		1 2 3 	
Pre-imple	ementati	on Rating	Cycle 2- Chosen activity	Post-implementation Rating	
1	2	3		1 2 3 	

Community Collaboratives

Contributor #1

Teamwork and Relationships are foundational to achieving collaborative goals.

Explanation

 Partnerships and relationships in the collaborative and in the community are key to identifying goals and making progress.

Questions and factors to inform rating

What is in place to help members learn about:

- The background and skills that each member has to contribute to the work?
- The role, strengths and limitations of each organization involved?
- How those not in the collaborative can contribute to the work?
- What is in place to support building relationships with the community?

Resources and Gaps

Comments

Rating Scale to be used:

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Pre-imple	ementati	on Rating	Cycle 1- Chosen activity	Post-implementation Rating	
1	2	3		123	
Pre-imple	ementati	on Rating	Cycle 2- Chosen activity	Post-implementation Rating	
1	2	3		1 2 3	

SUBJECTIVE/MATERIAL CONTRIBUTORS

Community Collaboratives

Contributor #1

Policy Priority

Explanation

• Local and provincial governments see collaborative work as important.

Questions and factors to inform rating

How do members share collaborative related activities and successes with their local leadership?

• How do collaboratives share their activities and results across their community (i.e. with town or municipal councils)?

Resources and Gaps	Comments

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Pre-imple	mentation Rating	Cycle 1- Chosen activity	Post-implementation Rating
1	23		1 2 3
Pre-imple	mentation Rating	Cycle 2- Chosen activity	Post-implementation Rating
1	23		123

SUBJECTIVE/MATERIAL CONTRIBUTORS

Community Collaboratives

Contributor #2

Communication

Explanation

• There are formal ways for collaborative members to share information with fellow members.

Questions and factors to inform rating

What are the ways collaboratives ensure there is good communication within its membership?

• This includes sharing information from their organizations/role, and taking information back to their organization/ role from the collaborative.

What are the ways collaboratives ensure there is good communication with their community including:

- Regular updates shared with the team and community.
- Clear expectations on what needs to be communicated.

Resources and Gaps

Comments

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Pre-implementation Rating		5	Cycle 1- Chosen activity		Post-implementation Rating		
1	2	3				1 2 3 	
Pre-impl	ementa	tion Rating	3	Cycle 2- Chosen activity		Post-implementation Ratin	g
1	2	3				1 2 3	

MATERIAL/SUBJECTIVE/RELATIONAL CONTRIBUTORS

Community Collaboratives

Contributor #1 Membership

Explanation

- Membership is diverse.
- · Members are clear on what their role is.

Questions and factors to inform rating

How does the collaborative know if they have the membership that is needed to achieve its goals?

Considerations include:

- Who is missing?
- · Are there too many representatives from one organization or sector?
- Are there other community connections that would help move the work forward?
- How do those not in the collaborative contribute to the work?

Resources and Gaps

Comments

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Rating Scale to be used:

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1 2 3 		1 2 3 	
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating	
1 2 3		1 2 3	

MATERIAL/SUBJECTIVE/RELATIONAL CONTRIBUTORS Community Collaboratives

19

Contributor #2

Identifying and meeting learning needs

Explanation

• Collaboratives identify where education can support them, and look for ways to receive that education.

Questions and factors to inform rating

- How do collaboratives identify and track the learning needs of individual members and of the group?
- How do collaboratives identify sources of education or learning opportunities?

Resources and Gaps	Comments	
)

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1	2	3		1 2 3 		
Pre-implementation Rating		on Rating	Cycle 2- Chosen activity	Post-implementation Rating		
1	2	3		1 2 3 		

MATERIAL/SUBJECTIVE/RELATIONAL CONTRIBUTORS 20

Community Collaboratives

Contributor #3

Actively seek input from those with lived experience (persons living with dementia, carers)

Explanation

• Collaboratives use a number of ways to involve those with lived experience.

Questions and factors to inform rating

Are their members in the collaborative with lived experience?

• Are there options for ways those with lived experience can contribute?

Resources and Gaps	Comments	

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Pre-implementation Rating	Cycle 1- Chosen activity	Post-implementation Rating
123		1 2 3
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating
123		123

Persons living with dementia

MATERIAL CONTRIBUTORS

Persons living with dementia

Contributor #1

Housing, food, care, clothing needs

Explanation

Persons living with dementia have services and resources that help them to:

- be as independent as possible with tasks of everyday life (ex. medication blister packages, phone reminders).
- Feel safe in their community (this includes housing, shelter, food, clothing, etc.).

Questions and factors to inform rating

Do collaborative members know how persons living with dementia can access local services and supports that help them with day to day needs (i.e. blister packing of medications, phone reminders, personal care, etc.)?

- · How are local supports/resources promoted?
- How do collaborative members keep up to date on changes to existing resources and/or their availability?

Resources and Gaps	Comments

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123		1 2 3
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating
1 2 3		1 2 3

Persons living with dementia

Contributor #1

Care partner and/or family help

Explanation

• People living with dementia are supported to maintain their independence through their relationships with others.

Questions and factors to inform rating

How do collaborative members learn about the help/support family and/or friends are able to provide to persons living with dementia?

• What other options (people, resources) are available for the person living with dementia?



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1 2 3 		1 2 3 	
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating	
1 2 3		123	

SUBJECTIVE CONTRIBUTORS

Persons living with dementia

Contributor #1

Confidence in their ability to adapt to the changes related to dementia

Explanation

• Persons living with dementia demonstrate strength, and are able to adapt to the changes and uncertainties that come with the life changing diagnosis of dementia.

Questions and factors to inform rating

How do persons living with dementia find out about resources/supports that will increase their knowledge about dementia (i.e. Alzheimer's Society)?

- Are collaborative members familiar with what the Alzheimer's Society offers?
- Are referrals to FirstLink® made by members of the collaborative, and/or other organizations they work with?
- Are there resources and supports available that recognize and build on the strengths/abilities of the individual (ex. maintaining physical health)?

Resources and Gaps	Comments	
		J

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1	2	3		123
Pre-implementation Rating		on Rating	Cycle 2- Chosen activity	Post-implementation Rating
1	2	3		1 2 3

Persons living with dementia

Contributor #1

Community education about living well with dementia

Explanation

Community education and awareness encourages:

- Advocacy to combat stigma and to be dementia-friendly.
- An increased understanding of dementia, those living with it and their abilities.
- A sense of belonging.

Questions and factors to inform rating

Do communities have dementia awareness and education activities?

- · How do collaborative members keep up to date on education opportunities?
- · How can the collaborative and its members help create new education opportunities, or promote existing ones?

Resources and Gaps Comments

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1 2 3 		1 2 3 	
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating	
1 2 3 		1 2 3 	

Persons living with dementia

Contributor #2

Community Involvement

Explanation

- Skills and abilities of persons living with dementia are recognized and valued.
- Persons living with dementia have opportunities to participate in and contribute to their community (i.e. volunteer, help others, community planning).

Questions and factors to inform rating

What opportunities are there in the community for persons living with dementia to use their skills and abilities (such as volunteering , helping others)?

- What services are available to support people living with dementia's participation in community activities (i.e. transportation, flexible hours/time frames, in-person support)?
- Are there opportunities for people living with dementia to be included in community planning and/or participate in community organizations (i.e. committees, boards, etc.)?
- · Can they co-lead or lead activities they are involved in?
- Can they contribute to how activities are run?
- · Do collaborative members know about changes to existing opportunities?

Resources and Gaps

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Pre-implementation Rating			Cycle 1- Chosen activity	Post-implementation Rating		
1	2	3		1 2 3 		
Pre-implementation Rating		on Rating	Cycle 2- Chosen activity	Post-implementation Rating		
1	2	3		1 2 3 		

Persons living with dementia

Contributor #3

Relationships help maintain purpose and meaning

Explanation

- Persons living with dementia:
 - feel valued and respected by others.
- maintain their identity as a person outside of their diagnosis.
- Relationships help fill the gaps that exist because of dementia.
- Spending time with other generations (i.e. children, teenagers, young adults, etc.) are especially important and valued.

Questions and factors to inform rating

Do existing and new resources support those living with dementia to create or build relationships with others? Do community programs:

- Promote independence and choice for those living with dementia?
- Have activities based on what people with dementia want to do?
- Support those with dementia to continue to participate in activities they enjoyed before their diagnosis?
- Remove barriers that negatively affect the relationships of with family and friends?

How do those running programs and organizations know about what resources are available in the community, and how to connect persons living with dementia to them?

Resources and Gaps Comments

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Pre-implementation Rating			Cycle 1- Chosen activity	Post-implementation Rating
1	2	3		123
Pre-implementation Rating		ion Rating	Cycle 2- Chosen activity	Post-implementation Rating
1	2	3		123

SUBJECTIVE/MATERIAL CONTRIBUTORS

Persons living with dementia

Contributor #1

Whole person support - physical, emotional, spiritual and cognitive

Explanation

The need to support each individual as a whole person and not just focus on the diagnosis by:

- Acknowledging/addressing other health concerns.
- Recognition of multiple life transitions (i.e. career/retirement, living arrangements) that have emotional/cognitive impacts.
- Support in maintaining a sense of who you are now, in the past and into the future.

Questions and factors to inform rating

Are there opportunities for persons living with dementia to talk about what matters most to them, their personal wishes and life goals?

- What exists to support persons with dementia to have medical needs or concerns addressed? For example physical therapy, specialist, hearing aids.
- What is available to help them navigatie life transitions?
- · How are the concerns of people living with dementia being sought out, listened to and addressed?

Resources and Gaps

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Pre-implementation Rating			Cycle 1- Chosen activity	Cycle 1- Chosen activity		Post-implementation Rating	
1	2	3			123	3	
Pre-impl	ementat	ion Rating	Cycle 2- Chosen activity		Post-implementation	Rating	
1	2	3			123	5	

SUBJECTIVE/MATERIAL/RELATIONAL CONTRIBUTORS

Persons living with dementia

Contributor #1

Built and natural environments foster inclusion and a sense of safety

Explanation

Supportive environments include:

- Environments are inclusive as a result of increased dementia friendly education and awareness.
- Persons with dementia feel safe to be themselves, and express their thoughts and feelings without being worried that they will be judged, or left out.
- Indoor and outdoor spaces are easy to access.
- Information and resources can be obtained in many different ways (e.g. on a webpage, in the newspapers, bulletin boards, etc.)

Built Environments: areas that have been created by people (e.g. housing, restaurants, recreation facilities, stores, etc.). This includes the atmoshpere created in services and supports offered.

Natural Environments: outdoor and/or naturally occurring spaces (e.g. lakes, trails, gardens).

Questions and factors to inform rating

Do the built and natural environments in your community support the needs of persons living with dementia?

- Are indoor and outdoor spaces easy to access, and well maintained to ensure people with different abilities are able to use them?
- Are there opportunities to promote education about dementia, and increase its awareness in order to create a more dementia friendly environment?
- Are programs and supports providing a safe and inclusive environment for those with dementia to participate even as their disease progresses?
- Do those running the programs need education on how to create and support an inclusive environment?

What housing and home supports options are available locally for persons living with dementia?

Do they promote positive living arrangements such as:

- Having enough space for them to live comfortably and be as independent as possible.
- Close to family, friends and other support persons.
- · Close to community resources (ex. doctor's office, recreation facility, faith community).

Resources and Gaps	Comments	

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1	2	3		1	2	3	
Pre-imple	ementatio	n Rating	Cycle 2- Chosen activity	Post-im	plementati	on Rating	
1	2	3		1	2	3	

SUBJECTIVE/MATERIAL/RELATIONAL CONTRIBUTORS

Persons living with dementia

Contributor #2 The role of technology

Explanation

Technology (e.g. iPad, internet, smart phone) helps persons living with dementia to: 31

- Connect with others.
- Improve social engagement/decrease isolation.

Questions and factors to inform rating

Do persons living with dementia have access to technology, and support to use it?

- How do persons with dementia become aware of technology resources and support to use them?
- Are collaborative members familiar with what technology is available to support those with dementia and how they can be linked with it?

Resources and Gaps Comments

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Pre-implementation Rating	Cycle 1- Chosen activity	Post-implementation Rating
123		1 2 3
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating
1 2 3		1 2 3



MATERIAL CONTRIBUTORS

Carers

Contributor #1

Housing, food, care, clothing needs

Explanation

• Carers have, or have access to housing, food, care and clothes.

Questions and factors to inform rating

How do collaborative members know what community supports exist to meet carer's housing, personal care, social, and mental health needs?

- · Is it easy for carers to access services?
- What services do carers need enhanced, changed or added?
- How do collaborative members learn from carers about what services they need locally?

Resources and Gaps	Comments	
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1	2	3		123
Pre-imple	mentati	on Rating	Cycle 2- Chosen activity	Post-implementation Rating
1	2	3		123

MATERIAL CONTRIBUTORS

Carers

Contributor #2

Education needs of carers and their community

Explanation

• Carers recognize what types of dementia education they and their communities need.

Questions and factors to inform rating

How does the collaborative know what carers want to learn about? Do they know how carers can access this education? How does the local community get education about dementia?

Examples of topics for education may include:

- · How does stigma affect carers and people living with dementia?
- · What are local options for housing and care?
- What does care cost?
- How to help with the day to day needs that a person living with dementia might have? For example - personal care, changes in communication, helping with getting from wheelchair to bed or toilet.
- · How to help the person living with dementia stay as independent as possible?

Resources and Gaps Comments

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- 3 Green: Not in need of attention within our community at this time

Pre-implementation Rating			Cycle 1- Chosen activity	Post-implementation Rating		
1	2	3		1 2 3 		
Pre-imple	ementat	ion Rating	Cycle 2- Chosen activity	Post-implementation Rating		
1	2	3		1 2 3		

Carers

Contributor #1

Supportive relationships

Explanation

Relationships are key in carer support. Carers need:

- To be able to identify relationships that are helpful, and which ones are stressful.
- Opportunities to be involved in activites where relationships are positive and supportive.

Questions and factors to inform rating

Do carers have the chance to connect regularly with individuals or groups who are a support to them? For example - with friends, their faith group, work or other interests. Consider

- Are existing programs and supports designed to help those attending build relationships?
- Are carers' friends and family aware of how important it is to maintain relationships with the carers and person living with dementia?

Resources and Gaps	Comments

- When identifying areas of greatest need
- Following implementation of new support or resource to reflect impact made
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Pre-implementation Rating		B	Cycle 1- Chosen activity		Post-implementation Rating		
1	2	3				1 :	-
Pre-imple	ementa	tion Rating	3	Cycle 2- Chosen activity		Post-impleme	ntation Rating
1	2	3				1	2 3

Carers

Contributor #2

Positive relationships with healthcare

Explanation

- Carers are seen as a key part in determining what and how care is provided to the person living with dementia.
- Healthcare providers treat the carer with respect and involve them in all aspects of care.

Questions and factors to inform rating

How are healthcare providers involving carers in discussions?

- Do carers have the chance to share what is important to them?
- How do carers know if there are changes to services or supports?

Resources and Gaps Comments

- When identifying areas of greatest need
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Pre-implementation Rating		B	Cycle 1- Chosen activity		Post-implementation Rating			3	
1	2	3				1	2	3	
Pre-imple	ementa	tion Rating	5	Cycle 2- Chosen activity		Post-imple	ementa	tion Rating	3
1	2	3				1	2	3	

Carers

Contributor #3

Technology supporting connections

Explanation

• Having and knowing how to use technology can help carers keep existing relationships, and build new ones.

Questions and factors to inform rating

Do carers have access to buying or borrowing technology? *This includes :*

- How do carers learn what technology is available for them to access?
- What or who is available to support carers in learning to use technology?

Resources and Gaps	Comments	

Rating Scale to be used:

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Pre-implementation Rating	Cycle 1- Chosen activity	Post-implementation Rating
1 2 3		1 2 3
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating
1 2 3		1 2 3

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SUBJECTIVE CONTRIBUTORS

Carers

Contributor #1

Maintaining a sense of who you are through purpose and meaning

Explanation

Carers find purpose and meaning from:

- Being a primary caregiver.
- Their personal interests.
- Roles within their community.
- Continuing activities unrelated to caring in their community and family.

Questions and factors to inform rating

Are programs and supports designed so carer's goals, wishes and priorities can be shared?

- How does this information become part of how the carer is involved and is supported?
- Are those running programs comfortable asking what carers need?

How are carers supported to maintain the important roles in their lives (i.e. work, recreation, volunteering)?

This includes:

- Opportunities to participate in activities with their loved one with dementia.
- · Having access to support/resources for caring.
- Having a carer's strengths and knowledge recognized when building and running programs.

Resources and Gaps

Comments

Rating Scale to be used:

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Pre-implementation Rating			Cycle 1- Chosen activity	Post-implementation Rating		
1	2	3			1 2 3 	
Pre-impl	lementati	on Rating	Cycle 2- Chosen activity		Post-implementation Rating	
1	2	3			1 2 3	

Carers

Contributor #1 Emotional and psychological needs

Explanation

Carers need to:

- Have people and places where they feel safe to share their feelings.
- Talk about how they are managing.
- Be treated with respect, and have their independence supported.

A key aspect of addressing emotional needs is the timely diagnosis

of dementia for their loved one. A timely diagnosis supports carers in:

Understanding relationship and personal changes decreasing their frustration. Having the opportunity to plan, share feelings and find support with the person with dementia.

Questions and factors to inform rating

How do programs encourage carers to share how they are feeling?

• Do those running the programs feel comfortable providing participants with the opportunity to share their feelings? How are carers supported in the process of understanding a reason for changes in their loved one? This can include receiving a diagnosis of dementia, as well as having other medical needs addressed once the diagnosis of dementia is received.

Resources	and	Gaps
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2

3

Resources and Gaps	Comm	ents
Rating Scale to be used:		
- When identifying areas of greatest need		
- Following implementation of new support or resource to	reflect impact made	
 Red: Highlights an area of great need. May need Yellow: Needs attention. Some attempts have b Green: Not in need of attention within our com 	een made but needs further developm	nent to have more impact
Pre-implementation Rating	Cycle 1- Chosen activity	Post-implementation Rating

123		123
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating

3 2

SUBJECTIVE/MATERIAL CONTRIBUTORS

Carers

Contributor #1

Carers recognize and believe in their own abilities

Explanation

• Carers feel confident in their ability to provide ongoing support to their person living with dementia.

Questions and factors to inform rating

Do carers know how to access information on dementia and caring?

This includes:

- How caring can impact their health.
- Where to go for support when the needs of their person living with dementia, or their own needs change.
- How to get help and support when they are preparing for and making difficult decisions.

Resources and Gaps	Comments	

Rating Scale to be used:

- When identifying areas of greatest need

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Pre-implementation Rating		on Rating	Cycle 1- Chosen activity	Post-implementation Rating			
1	2	3		1	2 -	3	
Pre-imple	mentati	on Rating	Cycle 2- Chosen activity	Post-impler	nentatio	on Rating	
1	2	3		1	2	3	

MATERIAL/RELATIONAL CONTRIBUTORS

Carers

Contributor #1

Choice in supports/services and how they are delivered

Explanation

• Carers have choices when it comes to supports. They are part of determining the kind of service and how/when it is delivered.

Questions and factors to inform rating

Do carers have a say in what services are available, how to get the services, and how they would like to use services?

Key services include:

- Household repairs/maintenance.
- Home Care services.
- Services to help a person living with dementia to stay in their home.
- Respite for carers to go to their own activities.
- Activities that both the carer and person with dementia can go to together.

Resources and Gaps

Comments

Rating Scale to be used:

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Pre-implementation Rating Cycle 1- Chosen activity Post-implementation Rating 1 2 3 Pre-implementation Rating Cycle 2- Chosen activity Post-implementation Rating



3

MATERIAL/SUBJECTIVE/RELATIONAL CONTRIBUTORS

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Carers

Contributor #1

Safe space

Explanation

• Opportunity and time to be able to share experiences, seek advice and feel supported.

Questions and factors to inform rating

Are carers able to share their experiences and feelings in a safe space?

Especially regarding:

- How they have adjusted to new roles?
- How they provide care and how they learned new skills?
- What they see as their limit in being able to provide care?

Do those running the programs feel comfortable to give those participating the opportunity to share their feelings?

nments

Rating Scale to be used:

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Pre-implementation Rating	Cycle 1- Chosen activity	Post-implementation Rating		
123		123		
Pre-implementation Rating	Cycle 2- Chosen activity	Post-implementation Rating		
4 2 2		4 2 2		

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