

DEMENTIA FRIENDLY KEYNSHAM

Keynsham Dementia Action Alliance

Strategic Plan

A. Strategic Aim

The strategic aim of the Keynsham and Keynsham Dementia Action Alliance (KDAA) is to make the community of Keynsham and Saltford significantly more aware and more supportive of the challenges faced by those affected by dementia. The KDAA has been registered with the Alzheimer's Society.

The rationale for this is twofold:

1. It is estimated that there are currently upward of 2500 people affected by dementia in Keynsham and Saltford. Expectations, on a national scale, are for numbers to increase by some 50% by 2030; this is also likely to be the case for Keynsham & Saltford.
2. There is a significant range of actions and best practice that can be adopted by the community at large as laid out in the 2009 National Dementia Strategy together with best practice initiatives undertaken by successful "dementia friendly towns/communities" individual companies and organisations throughout the UK.

B. Modus Operandi

DKAA will operate on two levels.

1. A Steering Group will set the strategy plan and will review this annually. It will also be set an annual plan, guidelines for all activities and any printed/promotional material required. Members of the steering group will undertake education activities and influencing (see 1&3 below).
2. An Action Group will undertake the direct action activities (see 2 below). This group will consist of selected steering group members plus volunteers and appropriate personnel from alliance organisations (eg Alzheimer's Society or B&NES). All Direct Action activities will be as

identified in the annual plan and will comply with the guidelines/timings set by the steering group.

C. Strategic approach

The DKAA plans to realise its strategic aim on three fronts:

1. **Education:** The group will provide a programme of presentations and print materials to inform the local community (including businesses and organisations) as to the challenges faced by those affected by dementia and the actions/solutions that can lead to a more “dementia friendly environment”. This programme will follow the guidelines of the Alzheimer’s Society “Dementia Champion” programme. It will be undertaken in such a manner as to promote measurable action and change within the community.
2. **Direct Action:** The group will undertake a range of activities within the community to aid local people affected by dementia. These will be informed by best practice undertaken by other groups within the Dementia Action Alliance (eg. memory café, singing therapy, carers support group).
3. **Influence:** The group will research and identify key issues within the community that require action/change to enable a more “dementia friendly environment”. The group will then campaign to facilitate such change (eg “dementia friendly supermarket checkouts”).

D. Strategic Plan – Actions

From a standing start, there is a great deal to be undertaken to deliver the strategic aim in the next 3/5 years. It would be prudent, therefore, to both identify and prioritise key actions in order to bring about the greatest effect on the community in the shortest time. The plan will be more effective and sustainable if the steering group can execute these actions in the right order.

This section identifies a list of actions to be undertaken.

1. Research: A range of leaflets, web sites, presentations to be collected and analysed with a view to identifying and logging relevant best practice for creating a more “dementia friendly community”.
2. Steering Group Training: There are a number of dementia training seminars and courses run by the Alzheimer’s Society in the UK. A programme of relevant training is to be identified and attended by relevant group members. Following attendance key findings are to be disseminated across the group with a view to collating relevant best practice. Lessons learned are to be logged for reference as appropriate to supporting the strategic approach.
3. Visits: Group members are to identify and make agreed planned visits to organisations and/or events related to dementia friendly best practice. Objectives are to be set for such visits and key findings shared/logged.
4. Target audience: A matrix of various target audiences is to be formulated (including business, organisations, schools/colleges, town councils, emergency services etc). This will segment the different audiences and will identify objectives, key messages, best communication channels and a “call to action”.
5. Evaluation: For certain audiences (eg sole traders) the message will be need to be developed and tested. It may be that several visits are required before the best “approach solution” is found. (Existing best practice may inform such planning/testing).
6. Education delivery: The education role of DKAA will follow Alzheimer’s Society guidelines, messages and materials. Local organisations will be identified (Rotary, Round Table, Chamber of Commerce, NHS, surgeries, schools) and a programme of education presentations planned and executed. A range of suitable materials will be ordered and kept in a central store for use by the steering group.
7. Media Relations: A media plan will be established to include publications and other media channels to be briefed, key messages and timings. There will be a specific objective behind each media release and a clear message against each target audience.
There will be **one** identified spokesperson for quotes and references (the DKAA Chairperson) with a view to raising the

profile of that representative and, through him/her, the KDAA itself. Where possible there will be a human interest slant to the press releases with appropriate photography attached.

8. Direct Action (sessions): A programme of relevant activities sessions are to be planned based on best practice. A full brief, together with appropriate materials will be provided for each action/session.
9. Identity: A logo is available via the Alzheimer's Society and can be tailored to Keynsham. The phrase "We will not change *the* world but we might change *someone's* world", will support the logo thereby increasing awareness of "what the group represents".
10. Fund raising. A Fund Raising plan is to be produced. Funding sources will be identified and approached. This is a primary task as funds will be required to set up the DKAA programme.

Donations will be encouraged in a number of ways (including via the DKAA web site. "Gift Aid" will apply to all donations as far as possible.

DKAA plans to make a number of funding applications to a range of organisations including Town Councils, Methodist Church, Quartet, David Medlock Trust, Lottery, St John's Hospital.
11. Budget Setting. The budget will follow fundraising activity and will require a steady source of income. DKAA will need a stable financial basis.
12. Alliances: Other local or regional groups who are either undertaking dementia related work or might support the work of KDAA are to be identified (eg. other Dementia Friendly Groups or such as Round Table). A plan will be written for building such partnerships and alliances.

E. Strategic Plan – Priorities

Given the considerable amount of work identified above it is essential that priorities are set. Agreed (desk research) responsibilities and an outline activity timetable will be required to ensure the priority tasks are undertaken in timely fashion. To this end two appendices are attached outlining (for agreement) short term research that the steering group could address (to inform and flesh out this plan) and a possible timetable for key activities in the first year.

Note: These could be produced ahead of discussion and agreement at the next day meeting on the 6th February.

F. Strategic Plan – Evaluation

If the strategic aim of KDAA is to be achieved then it is essential that there is action taken within the community. Words will mean very little if improvements in the community are not delivered to the benefit of those affected by Dementia.

The following are therefore important:

1. Realistic expectations are set as to what can be achieved. The objectives that are set must be measurable.
2. KDAA tactics and communication are evaluated on the basis that “if only we knew what we were doing well we would do more of it”. Equally what does not work should be “binned”.
3. Formal reviews of each part of the plan should be regularly undertaken, written up and shared with the team.

Note: frequency to be agreed.. maybe 6 monthly.

Alan Hale - Chairman
Keynsham Dementia Action Alliance.
February 2017.

APPENDIX 1

Desk Research subject matter

Before the KDAA steering group can start an activity plan and present to possible partners and supporters there is a great deal of desk research that is required. The better the preparation, the greater will be the effectiveness and the sustainability of the programme.

It is suggested that steering group members take individual responsibilities and tackle (where possible) areas of the plan in which they are interested. Although not exhaustive, here is a list of research required:

- Best practice defining a Dementia Friendly Community
- Activities proven to support those affected by dementia
- Processes for involving those affected by dementia
- Local organisations “supporting dementia” (contact details)
- Local organisations already “dementia friendly” (eg Banks) with details, materials and contact information
- Local organisations we should involve (contact details)
- Target Audience matrix
- Collection of useful leaflets, brochures, newsletters,
- A list of funding sources (contact details/application process)
- Possible sponsors
- Possible partners (eg designers, suppliers who will supply FOC or at a special rate)

APPENDIX 2

Possible early activity plan (in priority order)

1. Desk research identifying best practice, initiatives & activities that work, (local) organisations that might become involved together with contact details.
2. Write a strategic document and a 2 year horizon
3. Agree detailed timetable of activities/actions/initiatives with responsibilities
4. Utilise the Dementia Champion presentation (flexible for different target audiences eg. Town Council, local school)
5. Brief the local media editors and request support & coverage over 2/3 years
6. Plan the first 2/3 activities which run consecutively and "kick off" our project
7. Select/recruit local organisations as partners, including a school (Broadlands school?), to (help) run these first activities. We will provide media coverage
8. Provide Town Council with initial brief (after the first activity hits the media). To request backing over time.
9. Develop a web site

nb. From an evaluation of the City of York “Dementia Friendly programme the following quote recognises the method of approach...there seems to be a recognition that young people can play an important part in the plan;

“The dementia grants programme JRF began funding small dementia projects within its wider York committee in 2013, and has awarded 28 grants worth in total more than £92,000. Projects funded have ranged from music, art, gardening, cycling and croquet groups, to the Harmony Café run by University of York students, the Yorkshire Film Archive, Tang Hall Community Centre and Inspired Youth.”
