



THE UNIVERSITY OF
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Let's CHAT Dementia Study

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In this issue

1. An update from the Project Lead
2. Let's CHAT project resources
 - GP Management Plans
 - Let's CHAT Webinar Series
3. Dementia Awareness Breakfast, Derbarl Yerrigan
4. Dementia Action Week
5. Indigenous reference group members

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An update from the Project Lead – Dina LoGiudice

Greetings everyone,

It is hard to believe that it is already the end of the year, and unfortunately, COVID restrictions provided ongoing challenges with the Let's CHAT study. Despite this, our collaborating teams have continued strong engagement with the participating ACCHS, and audit cycles and workshops have continued using a mixture of communication methods. We have all become very adept at providing workshops via zoom!

An aim of the study was to develop useful resources for those working in primary care and supported by Dementia Training Australia we have delivered 4 of 6 webinars on best practice care for older Aboriginal and Torres Strait Islander People. These webinars were developed particularly for Aboriginal Health Workers and Practitioners and will be made available for free for ongoing use. In addition, we have developed a suite of videos on how to approach discussing cognitive concerns with a patient and going on to conduct a cognitive assessment (the Kimberley Indigenous Cognitive Assessment or KICA) that will be released soon.

We have also been working with the Elders raising awareness of optimising brain health at community meetings in several of our partnering ACCHS sites.

We look forward to continuing our work with our partnering health services and their communities in 2022. I wish you all a restful, safe, and peaceful Christmas, New Year and holiday season, and hope you all enjoy some well-earned rest.

New Let's CHAT Dementia Project Resources

In the next few newsletters, we will continue to include information about Let's CHAT resources developed with and for our ACCHSs, Aboriginal and Torres Strait Islander patients and their communities.

GP Management Plans

We now have three GP Management Plan (GPMP) recommendation documents. These resources are intended to function as a checklist of sorts that health services can use when creating or reviewing GPMPs for patients with chronic diseases.

The first outlines common care needs and recommended treatments and services for patients with mild cognitive impairment or dementia in general practice, while the second covers the current recommendations

for optimising brain health and preventing cognitive impairment for patients attending primary care. Essentially, they outline everything that should be being checked for/monitored/ reviewed in terms of brain health care. Many of the items listed will already be part of existing GPMPs, since many things that need to be addressed in the context of chronic disease (diabetes etc.) also have an impact on brain health.

The third GPMP is for carers and considers the needs and health vulnerabilities that a carer for a person with cognitive impairment or dementia might have, as well as signs to look out for.

Health services might like to print out copies of these GPMP recommendations and put them on pinboards in clinic rooms or store them within their health service software as PDFs that they can reference while they are putting together care plans for their patients.

[Click here](#) to access these resources from our website.

DTA Webinars

In collaboration with Dementia Training Australia, the Let's CHAT Dementia team has created a six-part webinar series, which provides an overview of cognitive impairment and dementia care. The series follows the story of Aunty Molly who presents with memory and thinking problems and is diagnosed with dementia. We follow her story as she is supported by her son Frank and health service professionals through her diagnosis of dementia to the last stages of her life.

These webinars target primary health care teams including Aboriginal and Torres Strait Islander health workers and practitioners, nurses, allied health professionals, general practitioners and others who work in primary care with Aboriginal and Torres Strait Islander peoples.

Each webinar discusses a key aspect of primary care in relation to cognitive impairment and dementia in Aboriginal and Torres Strait Islander peoples:

1. Best practice cognitive impairment and dementia care – Presented by Drs Mary Belfrage and Dimity Pond
2. Detection of cognitive impairment and dementia – Presented by Adj Prof Mark Wenitong and Prof Edward Strivens
3. Health care for people living with cognitive impairment and dementia – Presented by Harold Douglas and A/Prof Dina LoGiudice
4. Health prevention and promotion for cognitive impairment and dementia – Presented by Lauren Poulos and A/Prof Sarah Russell
5. Health and wellbeing of carers for people with cognitive impairment and dementia – To be presented by Dr Wendy Allan and Roslyn Malay
6. Planning, decision making and end-of-life care for people with dementia – To be presented by Diane Cadet-James and Christine Howard

Four webinars have been presented to date, each very well attended. Thank you to all of the Let's CHAT Investigators, project staff and consultants who did a marvellous job of sharing their expertise on best-practice care for cognitive impairment and dementia. Recordings and slide decks of the first four webinars are available for download from [our website](#).

Webinars 5 and 6 are scheduled for February 9th and March 9th 2022 respectively. Please visit the [Dementia Training Australia website](#) for further information and to register to attend these sessions, which promise to be just as informative and engaging as the first four.

CHRONIC DISEASE MANAGEMENT - Optimising brain health and preventing cognitive impairment: Recommended elements for a GP Management Plan



These plans can commence at age 50, or earlier for those at higher risk.

Recommended screening questions for 715:
 a) Do you have any worries about your memory or thinking?
 b) Does anyone in your family have any worries about your memory or thinking?
 If any concerns are raised and/or high risk for cognitive impairment identified offer further cognitive screening (eg KICA-Cog, MMSE, clock test, GPQOG).

Health issues / care needs / relevant conditions	How often	Treatment and services, including actions to be taken by the patient	Arrangements for providing treatment/services (eg, who, contact details, etc)
Healthy lifestyle advice: <ul style="list-style-type: none"> • physical activity • healthy diet • healthy weight • smoking cessation • safe alcohol • cognitive activity 	Opportunistic	Provide advice including patient information resources for prevention of cognitive impairment/dementia, such as diet, exercise, cognitive activities, social activities, support groups, advocacy.	GP/Nurse/AHW
SEWB including quality of life, anxiety and depression	6-12 months	Questions about depression/ anxiety Consider K10 measurement/GDS/ PHQ or equivalent	GP/Nurse/AHW Mental Health Geriatrician/ Psychiatrist
Medication review	6-12 months	Identify anticholinergic load, including antipsychotics, antidepressants, anticonvulsants, hypnotics.	GP Pharmacist
Vision	Annual	Eye check	GP/Nurse/AHW Optometrist
Hearing	Annual	Hearing check Refer to audiology annually if hearing impairment identified. Otherwise, 5-yearly.	GP/Nurse/AHW Audiologist
Planning	6-12 months	Clarify who is involved in decision-making, formalise medical decision-making process, consider need for power of attorney for financial and other affairs, consider advanced care plan.	Consider case conference Consider family meeting
Social factors	6-12 months	Social isolation, housing, supports	GP/Nurse/AHW Social worker
Optimal management of relevant chronic diseases	3-6 months dependent on disease & severity	Cardiovascular/ cerebrovascular disease Diabetes Renal disease	Refer to practice protocols for chronic disease management
Checking for cognitive impairment if positive response to cognitive screening questions in 715 (above)	As required & repeated 6-12 months	Questions about cognition (if concerns, go to 2) Administer clock test (if abnormal, go to 3) or Administer cognitive screening (MMSE or MoCA or KICA)	AHW/Nurse/GP Consider referral to geriatrician/ physician if concerns

Figure 1. An example of one of the Let's CHAT GP Management Plan Recommendations

Dementia Awareness Breakfasts at Derbarl Yerrigan Health Service and Broome Regional Aboriginal Medical Service



On the 12th of September, our Perth Let's CHAT Dementia team members, Kate Fulford and Sadia Rind, held a Dementia Awareness Breakfast at Derbarl Yerrigan Health Service (DYHS), in partnership with the DAMPAA team from the University of WA. There was a strong turn out of community Elders, who were keen to learn more about dementia and voice their concerns.



Yarning Circle at the Derbarl Yerrigan Dementia Awareness Breakfast

Sadia, local Let's CHAT Dementia Champion and coordinator of the Elders' Connect program at DYHS and Kate, the Perth Let's CHAT Dementia Research Officer, organised the successful event. The educational content was presented by Dr Kate Smith, Chief Investigator on the Let's CHAT Project and Lead Investigator on DAMPAA, with the DAMPAA team and one of the DYHS doctors. One of the activities of the morning was a 'yarning circle', which allowed everyone to chat frankly about dementia. Feedback from attendees was that session was very informative and they thoroughly enjoyed it.

On 30th November, our Broome Let's CHAT Research Officer, Roslyn Malay, with the assistance of UWA Aboriginal Ageing Well Team member, Christianne White, co-hosted a dementia awareness breakfast for Community Elders with Broome Regional Aboriginal Medical Services (BRAMS).

The event was well attended, and the audience asked lots of questions on brain health and dementia. In fact, they enjoyed it so much they requested ongoing sessions! They also requested guest speakers, such as people living with dementia, and health experts. They would also like to know more about prevention strategies for dementia. BRAMS and the Let's CHAT team are keen to do more sessions like this one, involving other services and at other venues.



Raising Awareness about Dementia

September is Dementia Awareness month, right around the world. It is an important time to bring this challenging disease to the front and centre of people's minds and fight discrimination towards people diagnosed with dementia. It was a busy month for the Let's CHAT Dementia project! COVID restrictions and lockdowns made it difficult (or impossible) to organise face-to-face events, so we went online instead! During Dementia Action Week, from the 20th-26th of September, we engaged in a social media outreach and promotion blitz across all our social media platforms, as well as creating content that we could share with our health services. We wanted to take this opportunity to really build awareness about this important health issue for Aboriginal and Torres Strait Islander peoples.

We created a series of 'Brain Health' tiles, to be released daily over the course of the week. These tiles encourage Community members to look after their brain health, to seek help from their local health service if they have any concerns about their memory or thinking, and also to keep an eye out and encourage family and

Do you have concerns about your thinking or memory?



Speak to your doctor, nurse, or Aboriginal health worker.



Dementia Action Week 'Brain Health' tile

We hope to continue to create meaningful and educational content that not only highlights the importance of the Let's CHAT mission but that hopefully reaches someone in need.



To find out more, connect with us on social media!

Facebook: <https://www.facebook.com/LetsCHATDementia>

Instagram: <https://www.instagram.com/letschatdementia/>

Let's CHAT Dementia Partners

