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**POSTER ABSTRACT****Learning from the development of two Integrated Care Pathways for  
dementia**18<sup>th</sup> International Conference on Integrated Care, Utrecht, 23-25 May 2018Anne-Marie Brady<sup>1</sup>, Mairead Bracken-Scally<sup>1</sup>, Louise Daly<sup>1</sup>, GERALYN HYNES<sup>1</sup>, Brian  
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**Introduction:** There is an increasing emphasis on the use of Integrated Care Pathways for dementia in the hospital environment. Despite this, the Irish National Audit of Dementia Care in Acute Hospitals De Siún et al. 2014 found that 94% of acute hospitals did not have a dementia care pathway in operation. The Health Service Executive HSE and Genio provided funding to three hospitals in Ireland to develop an ICP for dementia care. An independent evaluation was conducted to uncover the strengths and challenges of the ICPs developed, as well as to collate learning from the sites to further develop ICPs for those living with dementia.

**Methods:** Mixed methods were used to evaluate two of the ICPs developed to date. This included analysis of service provider and service user data, as well as audit and Hospital Inpatient Enquiry HIPE data. Ethical approval was secured from the Faculty of Health Sciences Research Ethics Committees in Trinity College Dublin and relevant hospital Ethics Committees.

**Results:** The complexity involved in developing and rolling out an ICP for dementia was highlighted. Findings demonstrated a number of facilitators and challenges in the development of ICPs. Facilitators included: project leadership; organisational support; dedicated project personnel; project responsiveness; and dovetailing with other clinical, educational or organisational developments. Challenges identified included: competing initiatives and acuity of care demands; absence of standardisation; deficits in communication; and pressure on resources.

**Discussion and conclusions:** The person with dementia and their individualised needs should be central to any innovations in integrated dementia care. A dementia-friendly orientation needs to be embedded in the strategic objectives and operational planning of an organisation in order for meaningful impact to be achieved. Innovation in the development of ICPs needs well-defined governance and visionary leadership. Dedicated resources are required by such leaders to support dementia care development. Findings demonstrated that a consortium approach is beneficial for projects to design, test and implement innovations to develop integrated dementia care. ICP development and dementia-friendly environmental design are protracted

and require extensive planning to include process mapping of the care journey, evidence review and multi stakeholder consultation. Therefore, such projects should make consideration of sufficient lead-in time to devise related interventions. Such planning activities should be viewed as sub-components of the overall intervention. In cases where dementia-specific roles are shown to have positively influence project impact, commitment and resources are required to maintain these roles in order to maximise and further develop gains.

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**Keywords:** dementia; integrated care; service development; hospital

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