With only weeks until the UK general election, any politicians’ pledges must be considered in the light of their timing. On 21 February the prime minister announced that by 2020 all NHS England staff will have “training” in dementia “appropriate to their role”. I don’t see any mention of cost, or any extra resources.

Almost 700,000 people in England have dementia right now, and thousands more will be affected by 2020. Patients are already aware that considerable numbers of NHS staff currently don’t know about dementia or do not behave in ways that would demonstrate knowledge “appropriate to their role”. The promise is that five years from now your doctor or nurse will know enough to care for you properly. Who knows whether the current government will still be in a position to deliver that? Even if it is, what are you supposed to do in the mean time?

The population is ageing and inflation and cutbacks in public spending mean there will not be a lot of money available to support the increasing numbers of frail older people in the future. Citizens need to understand now that they will in future have to look after themselves and their families. Politicians and the media see it as an attack, or an opportunity for them to attack the NHS if anyone points out all the things that can go wrong for a person with dementia in hospital. Families already shoulder much of the burden of caring for patients with dementia. In future, especially in hospital, they may need to do more, so nurses can concentrate on aspects of care only they can do.

“Awareness” of dementia will not be enough in five years’ time. Nurses are already aware of dementia - their problem is being able to do something about it. They have little control over staffing levels, building design and the actions of doctors. In reality, pre-registration training and awareness doesn’t tell you what to do when staffing is so tight you don’t have time to help people eat, or wait with them to take their medication. It is shocking to read of GPs who refuse to diagnose “because there is nothing that can be done”. It’s even difficult to speak out about it.

Regulators will ensure that dementia is taught in undergraduate training. How helpful this will be depends on whether they introduce the right skills, not just awareness. Nurses need to know how to respond when managers and doctors appear to be unaware how people with dementia are affected by factors such as light, heat, dehydration, medication, noise, change, bed moves, separation from family through strict visiting hours, and enforced idleness in hospital wards.

There are brilliant examples of good practice in the NHS, but the story is not good enough for many patients and carers. The prime minister’s aim might be met if he proposed training for nurses and others in how to get the most out of supportive families and friends, because we won’t survive without it. NT

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