



**PUBLIC BOARD MEETING**

**27 May 2026**

**Item 19**

**THIS PAPER IS FOR NOTING**

**DEMENTIA DELIVERY PLAN 2026-2027**

<b>Lead Director Author</b>	Emma Stirling, Director Care Quality and Professional Development Karen Thom, Dementia Lead
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<b>Action required</b>	The Board is asked to formally <b>note</b> the Dementia Delivery Plan 2026-2027 which was shared virtually with Board members on 18 February 2026, with staff, stakeholders and partners at the end of February 2026 and was implemented from 01 April 2026.
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<b>Key points</b>	<p>The initial 1 year plan lays the groundworks to develop the Scottish Ambulance Service (SAS) dementia programme infrastructure.</p> <p>It will contribute to development of the SAS medium-term dementia plan which will align with the SAS Annual Delivery Plan and national Dementia Strategy Delivery Plan cycles.</p> <ul style="list-style-type: none"> <li>• The 1-year plan focuses on commencing work in 5 areas of delivery:</li> <li>• Collaborative development and oversight to deliver the plan</li> <li>• Develop staff dementia education and training</li> <li>• Develop dementia awareness and engagement opportunities</li> <li>• Cross-organisational collaborative working developments</li> <li>• Undertake scoping of SAS dementia data to help improve understanding of demand and experiences of people living with dementia and their families.</li> </ul> <p>The Plan has been approved by the Communities and Place Portfolio Board and National Clinical Operational Governance Group. The Clinical Governance Committee was also provided with assurance of the consultation process and subsequent approval via the above routes at its meeting in February 2026.</p>
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<b>Timing</b>	Implementation from 01 April 2026
<b>Associated Corporate Risk Identification</b>	-
<b>Link to Corporate Ambitions</b>	<p>This paper relates to:</p> <ul style="list-style-type: none"> <li>• We will work collaboratively with citizens and our partners to create healthier and safer communities</li> <li>• We will innovate to continuously improve our care and enhance the resilience and sustainability of our services</li> <li>• We will improve population health and tackle the impact of inequalities</li> <li>• We will provide the people of Scotland with compassionate, safe and effective care when and where they need it</li> </ul>
<b>Link to NHS Scotland's Quality Ambitions</b>	<p>Safe Effective Person-centred</p>
<b>Benefit to Patients</b>	<p>People living with Dementia and their carers receive a dementia informed Scottish Ambulance Service.</p>
<b>Equality and Diversity</b>	<p>No adverse impact has been detected.</p>



**Scottish  
Ambulance  
Service**

Working in Partnership with Universities



# **SCOTTISH AMBULANCE SERVICE DEMENTIA DELIVERY PLAN**

## **APRIL 2026 TO MARCH 2027**

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Date: 12.03.2026	Version 1.0 final	Review Date: March 2027

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# 1. Introduction

Dementia is one of the most significant global healthcare challenges. In 2012, the World Health Organisation identified dementia as a global public health priority<sup>1</sup>. In Scotland, approximately 90,000 people are living with dementia, including around 3,000 under the age of 65. Dementia accounts for about one in four people in hospital<sup>2</sup>. Globally, the number of people over 65 with dementia is projected to increase over the next two decades, highlighting both current and future pressures on Scottish Ambulance Service (SAS) provision.

Ambulance Service staff may represent the first point of contact with people who are living with dementia and their unpaid carers through a variety of service areas – unscheduled care (urgent and emergency services including front line contact, ambulance control centres, integrated clinical hub), scheduled care (planned patient transport services) and through Advanced Practitioners.

Contact with ambulance services may not be due to a dementia specific issue but more often because of falls, frailty, delirium, another co-existing condition or palliative and end of life care associated with dementia.

Recognising the current and anticipated increase in people living with dementia, SAS appointed a Dementia Lead in May 2025 to provide strategic leadership to plan and deliver the dementia objectives outlined in the SAS 2030 Strategy<sup>3</sup> and Annual Delivery Plan. This role also supports the delivery of Scotland’s National Dementia Strategy<sup>4</sup> and National Delivery Plan<sup>5</sup>.

Given the existence of the National Dementia Strategy, the SAS 2030 Strategy and associated delivery plans, the focus has been on developing this SAS Dementia Delivery Plan (the Plan), rather than an additional strategy. The Plan supports the alignment and delivery of both SAS and national priorities, building on previous dementia initiatives within SAS.

This initial 1-year plan will lay the groundworks to develop our programme infrastructure and will contribute to the development of our medium-term dementia plan, which will align with and be responsive to the SAS Annual Delivery Plan and national Dementia Strategy Delivery Plan cycles. It is designed to support quality of care, improve access to services and raise awareness to ultimately enhance the quality of life for people with dementia and those who are providing care.

The vision is that people in Scotland living with dementia and their unpaid carers receive a dementia informed Scottish Ambulance Service.

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<sup>1</sup> World Health Organisation, Alzheimer’s Disease International (2012) [Dementia: A Public Health Priority](#). WHO.

<sup>2</sup> [Scottish Government \(2023\) Dementia in Scotland - Everyone’s Story](#)

<sup>3</sup> [Scottish Ambulance Service, NHS Scotland \(2022\) Our 2030 Strategy](#)

<sup>4</sup> [Scottish Government \(2023\) Dementia in Scotland - Everyone’s Story](#) - National Dementia Strategy

<sup>5</sup> [Scottish Government \(2024\) Dementia in Scotland - Everyone’s Story. Dementia strategy: initial 2-year delivery plan - 2024 to 2026](#)

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## 2. Background

### What is dementia?

In shaping the Plan, it is vital to understand what dementia is, why it is a priority and its implications in the context of the everyday work for ambulance services.

Dementia is a collective term for a range of neuro-progressive brain diseases. The most common types of dementia are Alzheimer's disease, vascular dementia, Lewy Body dementia and frontotemporal dementia.

Dementia is not an inevitable part of aging however the risk of dementia increases with age. It is a long-term terminal condition with profound effects on those diagnosed, their unpaid carers and families. For many people living with a dementia diagnosis, unpaid carers are their core support.

Dementia also affects people under the age of 65 years where there are often added complexities to the illness, differences in social, family, employment, and financial circumstances.

People may live for many years after the onset of dementia. In the earlier stages, with appropriate support, many people can live well with dementia and continue daily activities and interests, stay socially connected, and maintain a good quality of life. As dementia progresses, physical and cognitive challenges increase.

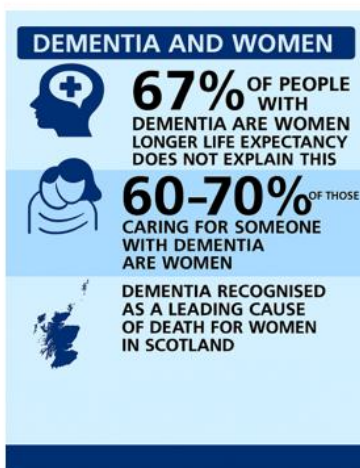
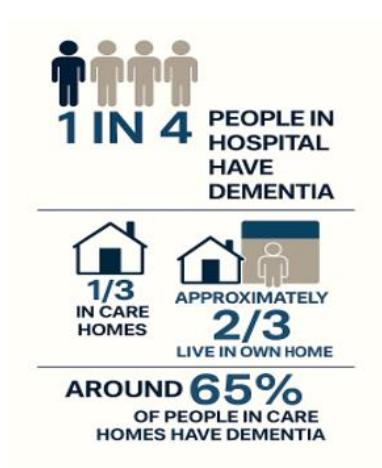
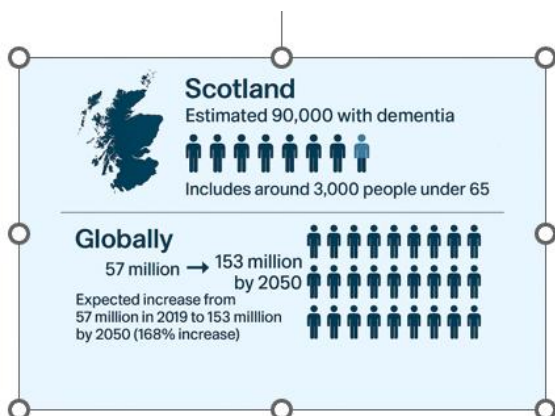
The most common features of dementia are progressive and include memory loss, problems with language and understanding, needing support with everyday tasks and changes in behaviour. In addition, people often experience increased social isolation, effects of stigma, increased stress, depression and their rights as citizens can be adversely affected.

Older people living with dementia often have other diagnosed conditions (co-morbidities), which require coordinated assessment and support across community, hospital, hospital discharge, and bed-based care. For SAS staff, as a front-line response, key touchpoints include increased risk of falls, transitions between home and hospital, and the complexity of managing multiple health conditions alongside dementia.

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# Population in Context

The projected increase in people living with dementia will drive greater demand for ambulance services.



refs<sup>6</sup>

<sup>6</sup> Statistics references: 1 - [Scottish Government \(2023\) Dementia in Scotland - Everyone's Story](#); 2 - (2023) [Scottish Intercollegiate Guidelines Network SIGN 168 - Assessment, diagnosis, care and support for people with dementia and their carers](#), National Clinical Guideline; 3 - [Burgon C et al \(2019\) Perspectives of healthcare professionals in England on falls interventions for people with dementia: a qualitative interview study](#) BMJ Open Access; 4 - [National Records of Scotland Monthly Mortality Analysis Sept 2023](#)

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## National and Local Strategic Influencers

National commitment to dementia policy continues with the publication of Scottish Government's fourth National Dementia Strategy, *Dementia in Scotland: Everyone's Story*<sup>7</sup>. This ten-year strategy, along with its accompanying two-year Delivery Plan for 2024–2026, outlines expectations at both national and local levels. The thematic priorities include developing a skilled workforce, challenging stigma, brain health, diagnosis, post-diagnostic support, resilient communities, the hospital experience, self-directed support access and short breaks/respite availability for care partners/unpaid carers, digital developments and inclusion. National campaigns to promote brain health and challenge stigma are in progress.

The Plan aligns to the dementia actions detailed in SAS 2030 Strategy specifically on developing staff dementia education and training packages, supporting local delivery of dementia care through building staff networks and promoting more collaborative multi-agency working.

The Plan also supports the following SAS 2030 ambitions:

- We will be a great place to work, focusing on staff experience, health and wellbeing – includes education
- We will provide the people of Scotland with compassionate, safe and effective care where and when they need it
- We will work collaboratively with citizens and our partners to create healthier and safer communities
- We will innovate to continually improve our care and enhance the resilience and sustainability of our services.
- We will improve population health and tackle the impact of inequalities

Both the National Dementia Strategy and SAS 2030 Strategy work on the basis of strategy implementation through delivery plans.

The Association of Ambulance Chief Executives' *Dementia Best Practice Guidance for Ambulance Services*<sup>8</sup> also supports the Plan, advocating for compassionate, person-centred care, a skilled workforce, improved communication, dementia-friendly environments, and collaborative working with local agencies.

From an educational perspective, NHS Education for Scotland's *Promoting Excellence Framework*<sup>9</sup> is the benchmark for workforce dementia education, including a range of core educational resources and developing leaders to support implementation. This Framework supports delivery of the National Dementia Strategy and will be used in development of education and training for SAS staff.

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<sup>7</sup> [Scottish Government \(2023\) \*Dementia in Scotland - Everyone's Story\*](#)

<sup>8</sup> [Association of Ambulance Chief Executives\(2017\) \*Dementia- Best Practice Guidance for Ambulance Services\*](#)

<sup>9</sup> [NHS Education for Scotland \(2021\) \*Promoting Excellence 2021: A framework for all health and social services staff working with people with dementia, their families and carers\*](#)

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### 3. Developing the Delivery Plan

Development of the Plan has been informed by a review of SAS 2030 Strategy dementia commitments, informal discussions with SAS staff, policy makers and other stakeholders.

Initial scoping work was also commissioned by SAS in March 2025 that mapped the SAS 2030 Strategy across Everyone's Story: Scotland's 10-year Dementia Strategy<sup>10</sup> which identified shared high-level values and principles that are the basis for the Plan. These include:

- A human rights approach
- Addressing inequalities
- Evidence based practice
- The value of data in designing and evidencing quality services
- Investing in a skilled and knowledgeable workforce
- Recognising the value of lived experience

As a result, commencing work in five areas has been identified:

1	Collaborative development and oversight to deliver the plan
2	Develop staff dementia education and training
3	Develop dementia awareness and engagement opportunities
4	Cross-organisational collaborative working developments
5	Undertake scoping of SAS dementia data to help improve understanding of demand and experiences of people living with dementia and their families.

Section 6 provides further details of how these areas will be delivered.

It will enable building organisational capacity to take forward innovative changes.

Implementation will adhere to principles of best-practice in dementia assessment, care and support including following human-rights based<sup>11</sup> person-centred, strengths based and trauma informed approaches.

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<sup>10</sup> Beattie, Jan (March 2025) *Mapping SAS 2030 Across Everyone's Story: Scotland's Dementia Strategy*. Unpublished. Internal SAS report.

<sup>11</sup> [Charter of Rights for People with Dementia and Their Carers 2010](#)

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## 4. Engagement and Involvement

Engagement and involvement planning will be embedded within the life cycle of the Plan to gather further information from a range of stakeholders and promote dementia events to enable delivery. This will inform development of the future medium-term SAS dementia delivery plan.

It will include creating opportunities to explore more collaborative working, learning and networking at local and national levels, and raise the profile of SAS contribution to supporting people living with dementia and their unpaid carers.

There is a commitment to engaging and involving people living with dementia, unpaid carers, front-line SAS staff and external partners to inform ongoing developments.

## 5. Governance

Collaborative development and oversight are recognised as an important aspect in delivering this Plan. As outlined in Deliverable 1 - we will establish a SAS Dementia Steering Group, pro-actively connect and contribute to national dementia leadership and have clearly defined internal reporting lines. This will include facilitating learning and feedback from SAS perspective to be channelled through national dementia leadership routes.

Good practice is supported by the National Scottish Intercollegiate Guidelines Network (SIGN) Clinical Guidelines on Assessment, Diagnosis, Care and Support for People with Dementia and Their Carers<sup>12</sup>. This evidence-based guidance covers health and social care services from diagnosis to end of life. It is an enabler at operational level to support safe, effective, person-centred dementia service provision and benchmark for professional and clinical care governance requirements.

The Standards of Care for Dementia in Scotland<sup>13</sup> outlines expected standards of care for everyone with a diagnosis of dementia.

The National Health and Wellbeing Outcomes<sup>14</sup>, which underpin the integration of health and social care, also influence The Plan, focusing on supporting people with long-term conditions, positive service experiences, supporting staff, and effective resource use.

As the work progresses, outcome and impact measures will be developed.

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<sup>12</sup> SIGN (2023)SIGN 168 - [Assessment, diagnosis, care and support for people with dementia and their carers. National Clinical Guideline](#)

<sup>13</sup> [Scottish Government \(2011\) Standards of Care for Dementia in Scotland: Action to support the change programme, Scotland's National Dementia Strategy](#)

<sup>14</sup> [National health and wellbeing outcomes framework - gov.scot](#)

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## 6. The SAS 1 year Dementia Delivery Plan

The Plan represents the first step in a longer-term process. Through delivery of this, we will continue to learn and develop our longer term aims, gathering the necessary information to inform development of the medium-term plan.

The overall focus for these deliverables are:

- Improved experiences for people living with dementia; receiving care that is personalised, respectful, and responsive to their needs.
- Increased confidence and experience for staff supporting people living with dementia and their unpaid carers.
- Progress towards a dementia informed workforce.

Deliverable 1
Collaborative development and oversight to deliver the plan
<ul style="list-style-type: none"> <li>➤ We will establish a SAS Dementia Steering Group to oversee work supporting key deliverables and co-develop a medium-term dementia delivery plan. This group will provide governance and oversight, including guide developments, track progress, provide assurance and inform future planning.</li> <li>➤ Internally, we will report to the Communities and Place Portfolio Board and through the SAS 2030 Strategy Annual Delivery Plan routes.</li> <li>➤ We will ensure we are connected and pro-actively contribute SAS perspective to national dementia policy and leadership, working with a range of partners in statutory and third sector organisations.</li> </ul>

Deliverable 2
Developing staff dementia education and training to meet the specific needs of people living with dementia and their unpaid carers who come into contact with SAS services.
<ul style="list-style-type: none"> <li>➤ We will establish a Dementia Training Working Group with remit to scope, promote and co-develop with focus on role-relevant dementia education and training across our diverse workforce aligned to the national Dementia <a href="#">Promoting Excellence Framework</a>. This group will report to the SAS Dementia Steering Group.</li> <li>➤ We will contribute to the national review of NHS Education for Scotland's Promoting Excellence Informed Level dementia education resources to influence future developments that meet the needs of our workforce.</li> <li>➤ We will collaborate with external partners to plan and deliver introductory dementia awareness sessions available to all staff.</li> </ul>

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### Deliverable 3

#### Develop dementia awareness and engagement opportunities

- We will develop ways for SAS staff with a professional interest in dementia to connect and network which will enable knowledge sharing and build capacity across the organisation.
- We will develop stakeholder engagement opportunities to capture feedback from staff, people with lived experience of dementia and unpaid care partners. This will inform SAS service delivery and development of our medium-term dementia plan.
- We will support the Scottish Government's Re-Think Dementia campaign which aims to challenge stigma and promote greater understanding of dementia. By sharing this message, we aim to foster respect and more positive attitudes towards people living with a dementia diagnosis.
- We will develop and implement a Communications and Engagement Plan to outline how we will communicate and engage with people over the next year, to raise awareness of dementia within SAS and promote the work we do to others.

### Deliverable 4

#### Cross-organisational collaborative working developments

- We will collaborate with Police Scotland and Scottish Fire and Rescue Service to review our shared commitment to our Tri-services Dementia Pledge and scope potential for future knowledge sharing and collaboration on dementia-related initiatives.
- We will work with Police Scotland to pro-actively raise awareness of the Herbert Protocol for people living with dementia who may be at risk of going missing, and other associated local and national initiatives such as the Safe Connect Scheme, Glasgow Herbert Protocol promotional key fobs distribution.
- We will create opportunities to enable collaborative multi-agency working at local and national levels with a range of partners from NHS, health and social care partnerships, national agencies, third and independent sector, people with lived experience.

## Deliverable 5

Undertake scoping of SAS dementia data to help improve understanding of demand and experiences of people living with dementia and their families. Insights gained will help to inform future service developments.

- Initial scoping work on current SAS data available from unscheduled and scheduled care data recording systems.
- Identify opportunities to improve quantitative and qualitative data.
- Explore ways to capture feedback from people living with dementia and unpaid carers.
- Use insights to support service planning, national strategy, and local partnership work which will support deeper understanding of demand and experience of people living with dementia and unpaid care partners who come into contact with our services.

## 7. Conclusion

This one-year Delivery Plan forms the basis of work from 1 April 2026 to 31 March 2027. We will update on progress and use learning to inform the future medium to longer term dementia delivery plan.

### Contact for further information:

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