

## Intellectual Disabilities Service

**Dementia assessments for people with  
intellectual disabilities (learning disabilities)**  
Information for Carers

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Su richiesta, questo documento è disponibile in altre lingue e in altri formati.

Sur demande, ce document peut être fourni en d'autres langues et formats.

Na życzenie, dokument ten można uzyskać w innych językach i formatach.

यह दस्तावेज़ अनुरोध किए जाने पर अन्य भाषाओं और प्रारूपों में उपलब्ध है।

ਇਹ ਦਸਤਾਵੇਜ਼ ਬੇਨਤੀ ਕੀਤੇ ਜਾਣ ਤੇ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਅਤੇ ਰੂਪਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

در صورت درخواست این سند به زبانها و شکلهای مختلف در اختیار شما قرار می گیرد.

یہ دستاویز دیگر زبانوں اور مطلوبہ شکلوں (فارمیٹ) میں بھی دستیاب ہے

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Someone you look after has been referred for an assessment of possible dementia. What should you expect?

A dementia assessment does not mean the person has dementia. More than half those assessed do not get a diagnosis of dementia. The symptoms of possible dementia can also be due to other things.

### **The assessment**

Three different professionals will assess the person: a psychiatrist, a psychologist, and an occupational therapist.

**The psychiatrist** will check their overall physical and mental health, and may recommend some blood tests etc.

**The psychologist** will want to talk to people who know the person in two different settings, for example home and day care. They will go through a questionnaire about possible dementia symptoms. They will also assess the person directly, using some puzzles and pictures. If the person is unable to engage with some parts of the test, those will just be skipped.

**The occupational therapist** will speak to people who look after the person and the person themselves, if appropriate, to get an idea of the person's functioning. They will then also observe the person doing certain tasks or activities to see directly how they are functioning.

If the person has had some of these assessments before, the professionals will compare the results this time to the previous results.

### **Meeting**

When all assessments are completed, there will be a meeting of all involved to discuss the results. The outcome of the meeting can be:

The person definitely has dementia

They definitely do not have dementia

Or the assessments are inconclusive: it could be dementia or it could be something else, often physical illness or psychological issues.

Whatever the diagnostic outcome, the meeting will also discuss the person's needs and how everybody can help. Other actions might also be discussed.

If the assessments are inconclusive, future reassessments will be discussed.

### **NOTES**