

# LIVING WELL WITH DEMENTIA





**The Design Council would like to thank everyone who has been involved in the *Living well with dementia* programme for their contributions. Our thanks go to the design consultants, expert researchers and participants for their time and expertise.**

**We would especially like to thank our partners at the Department of Health and members of the Advisory Board.**

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**Lorna Walker:** Managing Director, Lorna Walker Consulting Ltd

**Dr Daphne Wallace:** Old age psychiatrist (retired)

**Sarah Waller CBE:** Programme Director, Enhancing the Healing Environment, The King's Fund

**Michael Wolff:** Designer & Creative Advisor, Michael Wolff & Company

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# Rethinking life with dementia

**One in three of us who lives to 65 will experience some form of dementia before we die. A million people in the UK are expected to be living with the condition by 2021.**

Acknowledging the scale of the issue, the Design Council and Department of Health have run *Living well with dementia*, a 12-month national design challenge bringing together designers, innovators, service providers, healthcare experts and others to create practical product and service solutions and launch them as real initiatives. The five winning ideas that have been selected, funded and supported through early development are introduced here.

Dementia is a huge issue for the UK and the world, but it is also a real opportunity for social innovation. *Living well with dementia* demonstrates design's potential to confront a truly global problem and change real lives for the better.



£23bn

ANNUAL COST OF  
DEMENTIA TO THE  
UK ECONOMY

\$604bn

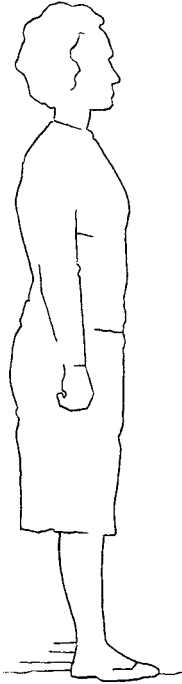
GLOBAL COST  
OF DEMENTIA,  
EQUIVALENT TO  
1 PERCENT OF  
TOTAL GDP<sup>1</sup>

800k

PEOPLE LIVING  
WITH DEMENTIA IN  
THE UK TODAY

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<sup>1</sup> Wilmo A and Prince M (2010) "World Alzheimer Report 2010", Alzheimer's Disease International  
All other statistics courtesy of Alzheimer's Society



## Dementia: the facts

Dementia is a term for a set of symptoms that can include loss of memory, mood changes and problems with communication and reasoning. There is currently no cure and, while medicines and other interventions can mitigate symptoms, the condition is terminal.

This is one of the major health and social care issues of our time. Alzheimer's bodies report over 800,000 people living with dementia in the UK, with numbers expected to double in thirty years. The cost to the UK is already around £23 billion per year, set to rise to £27 billion by 2018. Globally the estimated costs are \$604 billion – 1% of global GDP.

**'There are a lot of things that can be done. In the case of cancer and cardio-vascular disease, it's about adding years to your life. In the case of dementia, it's about adding life to your years.'**

**Professor Peter Piot**  
*Director of the London School of Hygiene and Tropical Medicine and former Under-Secretary General of the UN*

No figure, however, can reflect the human cost. Every aspect of the lives of people with dementia can be affected and it can also be devastating for their carers. Nevertheless, the loss is not immediate. People can live well and independently for quite some time after the condition's onset.

This is where the challenge lies: to create products and services that can maximise quality of life for those affected and simultaneously reduce the burden and cost of care – precisely the kind of seemingly contradictory objective that good designers are adept at resolving.



# The partnership

## **The Design Council**

The Design Council is an enterprising charity that enables people to use design to transform communities, business and the environment for the better. Our work stimulates innovation, creates value and promotes sustainability. We inspire new design thinking, encourage public debate and inform government policy to meet tomorrow's challenges and improve everyday life.

## **The Department of Health and the NDS**

In 2009 the Department of Health launched the National Dementia Strategy (NDS) for England, one of the first strategies of its kind in the world. It set out a vision for transforming services for people with dementia and their families and carers by raising awareness and understanding, extending high quality early diagnosis and improving quality of care.

The government has shown a strong commitment to implementing the strategy, most recently investing in NHS Memory Services, launching a national advertising campaign to raise awareness of the early signs and symptoms of dementia, piloting deployment of dementia advisors, and including dementia as a priority for PCTs in the 2011/12 NHS Framework.

To further deliver the strategy, innovations are urgently needed to help the increasing numbers of people affected by dementia.

On the 26 March 2012 the Prime Minister launched his challenge on dementia, an ambitious programme to deliver major improvements in care and research by 2015, building on the achievements of the existing NDS.

### **Design in healthcare**

The government's recent *Innovation, Health and Wealth* report views innovative healthcare solutions as key to the UK's internal and exporting economies. The UK's world-leading design industry will be vital to this.

In recent years, it has become widely understood that healthcare innovation need not and should not be a matter solely of technological and pharmacological development. Huge gains can be made in understanding and improving the patient experience. Design's inherent focus on the real needs and wants of users makes it ideally suited to this kind of innovation.

The Design Council and Department of Health have a track record of running design challenges that demonstrate this capability. Recent projects have worked to reduce healthcare associated infections in hospital wards, improve patient privacy and dignity, and reduce violence and aggression in A & E departments.



# The Challenge

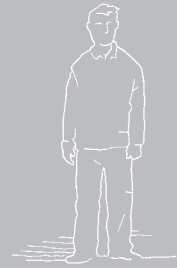
Design Council Challenges begin with research and expert engagement to identify where design can have the most impact. For *Living well with dementia*, this involved desk based research and scoping with a panel of experts from design, social care, industry and dementia.

## The Challenge in numbers:

- Over 2,000 application form downloads
- 154 entries
- 2 shortlisting stages
- 5 winning teams
- £360,000 R&D funding

The aim was to put good ideas into practice, so people with design skills and those who could implement solutions were asked to work together.

# 01



Funding, access to key user groups, expert mentoring, business guidance and market building advice were provided to get five ideas to working prototype.

# 02

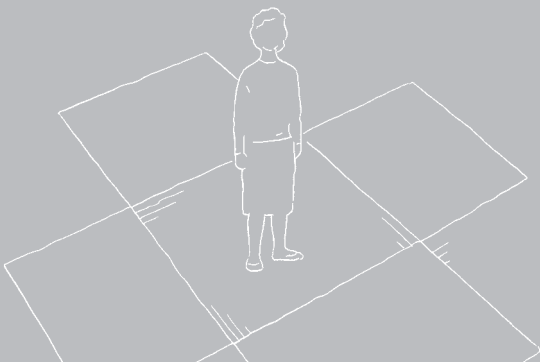
After 20 weeks of development, five solutions are ready to pilot on the ground. They demonstrate the vast potential of innovative ideas in an under-served market and show how design can play a key role in confronting a major social challenge.

# 03



The brief was open, but pointed out three areas of opportunity regarding people with dementia and their carers:

- 1. How might we make their lives easier?**
- 2. How might we help them prepare so as to maintain quality of life and deal with crises?**
- 3. How might we enable them to make the most of life?**



01

BUDDI

—

Help is on hand



## The problem

Personal alarms are a widely available product, enabling the elderly to maintain independence by ensuring that they can get help when they need it. Unfortunately, in practice, they are often not worn because they can make users feel stigmatised as vulnerable and are considered unattractive and cumbersome. Furthermore, these devices tend not to work outside the home.

People with dementia were already the main market for buddi personal alarms (95% in 2010), but it was clear that much more could be done to meet their needs.

A blue rubber boot is positioned on the right side of the page, resting on a brown cork mat. The mat has the text 'EXISTING PERSONAL ALARMS TEND NOT TO WORK OUTSIDE THE HOME' printed on it in a bold, black, sans-serif font. The boot is a classic wellington style, and the cork mat is a natural, textured material. The background is a plain, light color.

EXISTING PERSONAL  
ALARMS TEND NOT  
TO WORK OUTSIDE THE



### **Insights**

- Changing batteries and daily charging are impractical for people who have declining memories or experience disorientation.
- People want a device that intrudes on their lives as little as possible when not needed.
- Many falls and emergencies happen when bathing.
- Dementia is progressive, so needs will change.

WELCOME  
TO  
THE HOME



## The solution

**A wristband personal alarm that people will be happy to wear and can send alerts from anywhere to buddi's support services.**

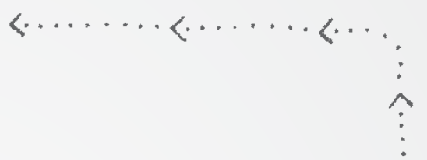
The buddiband is comfortable, discreet and waterproof. To avoid battery replacement and daily charging, it is fitted with the most powerful possible rechargeable battery\* and designed to be as power-efficient as can be.

While wearability is its greatest innovation, the device also offers more functionality than any other on the market:

- **Manual emergency alert:** Responses handled by buddi's 24/7 emergency response centre.
- **Automatic fall alert:** If a user has a fall the wristband detects it and calls for assistance.
- **Lifestyle monitoring:** Detecting shifts in typical activity levels. If a user's activity levels significantly diminish, contact is made with the user or carer.
- **Online monitoring:** Allowing carers to keep an eye on activity levels without being present.
- A host of further features in the pipeline.

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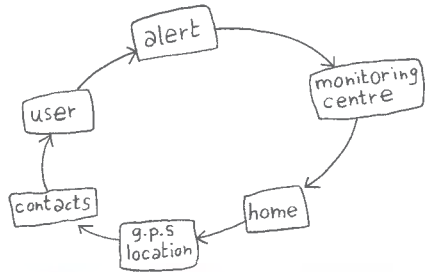
\*The buddiband provides at least two months of battery life.



In line with the progressive nature of dementia, the system is flexible. Its core functionality is as an emergency alert, keeping it simple for users at purchase. Further alerts and functions can be turned on as needed through options on a website.

Outside the home the wristband works with the current buddi product, providing the user's location wherever they go.

At home the device communicates via a base-station that is also the charging dock and displays the power level. In an emergency, the user can communicate with the monitoring centre staff through two-way audio on the base station.



## Benefits

Whilst wearing buddiband, people with dementia can get out and about with confidence and will likely be able to remain independent for longer.

## The opportunity

**'We've done research that shows that if buddi were used for only a thousand people in each Local Authority across the UK, we could save nearly £2 billion pounds a year in costs to the taxpayer.'**

Sara Murray, Founder and CEO of buddi

## Next steps

buddi believe their new device represents the future of home care for the elderly. The company is now embarking on a programme of engineering and testing to fine-tune the product for launch.

## The team

buddi is an existing mobile personal alarm system. For buddiband, the company teamed up with Sebastian Conran Associates (SCA) to refine aesthetics and user focus.

**Sara Murray**, Project Lead and Founder and CEO of buddi Ltd, is an experienced entrepreneur whose many achievements include founding confused.com and Ninah Consulting, which advises clients including Diageo and Coca-Cola. She was also non-executive director of Schering Health Care.

**Chris Starey** is buddi Ltd's Design Engineer and an experienced product developer who has worked with the Science Museum, McDonalds, Barnardo's, Save the Children, Nikon and the NHS. As a student, he won the University of Wolverhampton's Bizcom prize for innovation with products for the elderly and home automation.

**Sebastian Conran**, Head of SCA, is a world-renowned product designer, a trustee of the Design Museum and a former Trustee of the Design Council.

[buddi.co.uk](http://buddi.co.uk)

02

# DEMENTIA DOG

—

Assistance dogs  
for the mind




## The problem

The disruptions dementia causes can have a spiralling effect: forgetting to eat, drink or sleep can increase disorientation, medication can be forgotten and confusion can heighten anxiety about the outside world, increasing isolation. All of this puts a huge burden on carers too.

### Insights

- The purpose of sound alerts reminding people to drink water or take medicine are often forgotten.
- Evidence shows that a crisis within an individual's caring network is one of the most common causes of people being placed in residential care.
- A sense of routine can often disintegrate for people with dementia. Dogs can be trained to live to a consistent routine.
- Dogs can bring huge fulfilment to people at every stage of dementia's progression.



A white tote bag hangs from a wooden coat rack. The bag has a printed message in blue, bold, sans-serif capital letters. To the right of the bag, a green jacket is hanging on the same rack. The background is plain white.

PEOPLE  
WITH  
DEMENTIA  
OFTEN  
LOSE THEIR  
SENSE OF  
ROUTINE



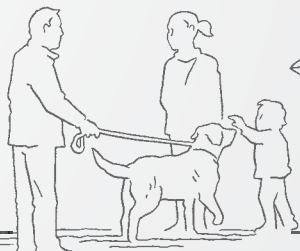
## The solution

# A service providing assistance dogs to people with dementia, helping them lead more fulfilled, independent and stress-free lives.

People with dementia can have widely differing needs, depending both on their symptoms and their individual lifestyles. The service takes account of this, employing service design user research methods to build a detailed picture of each individual's needs so the dog can be trained appropriately. Ultimately, each dog will be trained with the person with dementia and their carer so all three can operate as a team.

The dogs will be taught to support existing patterns of waking, sleeping and eating for people with dementia. Through responding to sound alerts they can also help with regular hydration, medication and toilet use. In the early stages, reminders may not be necessary, but if they begin immediately it will mean the routine is established when the need arises. Dogs can also be trained to provide orientation outside the home.

Exercise  
and social  
interaction





Customised alarm clock

Dog MOT-  
veterinary  
check ups



Daily tasks

Independence

Loyal companion  
for emotional  
support



Feeding  
routines



## Benefits

The social and emotional benefits are potentially huge. Dogs are naturally loving, therapeutic presences and extensive anecdotal evidence suggests they can have a transformative effect on people with dementia's alertness and mood. Outside the home, dogs can be great ice-breakers, initiating conversations in which memory need not be a factor. Just by being able to get out more, the person with dementia can widen his or her circle of support.

If the person does reach a point where he or she is rarely going out of the house, the dog provides much needed companionship.

The burden on the carer can also be hugely relieved, with immediate benefit both to him or her and to the quality of care. The dog can provide an anchor for the person with dementia while out with the carer, leaving the carer free to get on with tasks such as shopping.



### Dog welfare



Dog Trainer



Vet



Dog MOT

### Regular monitoring system



Link Worker

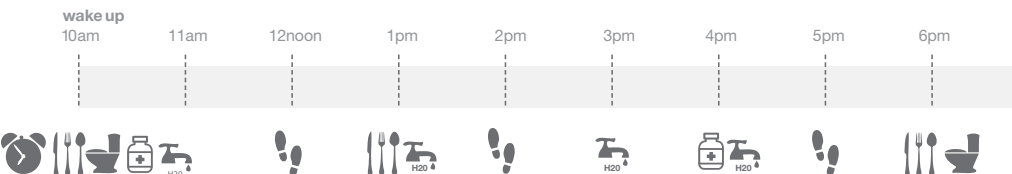


Participants



Dog Trainer

### Support routine



## The opportunity

The training and support service is a core capability that can be developed and adapted for other contexts, eventually providing dogs for use in care homes.

## Next steps

Dogs for the Disabled in partnership with Guide Dogs will put five of their existing assistance dog puppies in a pilot programme. Alzheimer Scotland will identify couples where one partner has early stage dementia who could benefit.

The team are seeking £40k (to supplement £25k from the Scottish Executive) to start the assistance dog pilot.

**'My mum-in-law often shows little or no reaction to what is going on around her but when the dog appears her face lights up and she talks to her and laughs.'**

**Mary Ohara, research subject**



## The team

**Joyce Gray** is Deputy Director – Development at Alzheimer Scotland and has over 30 years' experience in the health and social care sector.

**Peter Gorbing** is Chief Executive of Dogs for the Disabled, with which he has worked for over 15 years. The organisation has done pioneering work training dogs for children with disabilities and people with autism.

**Helen McCain** is Director of Training and Development at Dogs for the Disabled and has over 20 years' experience working with assistance dogs.

**Jeni Lennox** is an experienced project manager who has worked with Clarks Shoes, Electrolux, Boots and Bayer, among others. She is currently a visiting tutor at Glasgow School of Art, a consulting innovation designer on bringing design thinking to Scotland's SMEs, and a consultant for Alzheimer Scotland on using design to maintain independence for people with dementia.

**Phoebe Batham** is a designer, currently on a gap year prior to completion of her BDes Product Design at Glasgow School of Art.

**[dementiadog.org](http://dementiadog.org)**

03

# GROUPLE

—  
Collaborative caring



## The problem

When someone is diagnosed with dementia, a single relative generally takes on the lion's share of care. This is life-changing as dependency can increase quickly. Primary carers are often elderly with their own health concerns or, if younger, have to juggle work and care. Caring is stressful and isolating and both carers and people being cared for can benefit from extra help.

### Insights

- Leading disparate lives, sometimes widely separated geographically, families can have difficulty collaborating on care.
- Communication among those involved in care is vital, but the phone is often a poor solution as calls can come at the wrong time and typically only allow two parties to communicate at once.
- Often, different family members want to help, but they may be unaware of each other's plans or do not keep each other up to date.



670k

PEOPLE ACT AS  
PRIMARY CARERS  
FOR FAMILY AND  
FRIENDS WITH  
DEMENTIA<sup>1</sup>



## The solution

# A secure, private online social network helping people share the responsibilities of caring for someone with dementia.

Many carers are uncomfortable with computers, so Groupele has been designed to be as simple, attractive and intuitive as possible.

Members of a care network easily post their schedules, ideas and experiences of caring, dividing responsibilities and coordinating efforts to provide consistent and regular care without one single person being overburdened.

At the centre of each Groupele hub is a timeline. Members can post items such as visits, appointments, observations and questions, quickly seeing and filling in gaps in the schedule. Care decisions can easily be discussed and informed by everyone's observations.

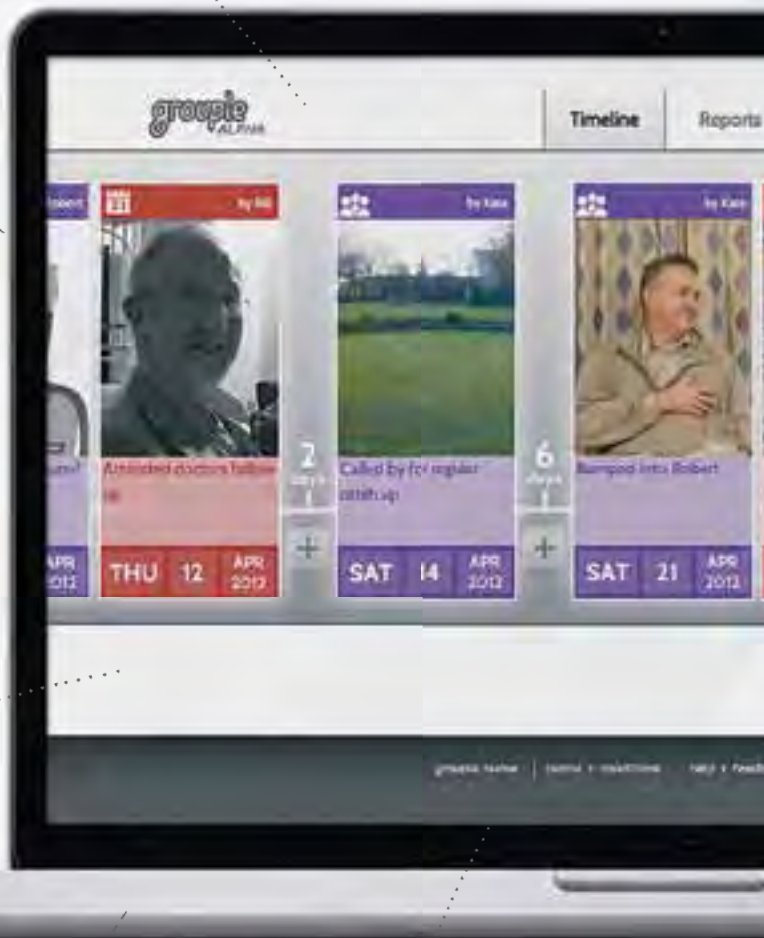
Printed reports can also be created based on timeline content. This will assist medical professionals and help update family members who are offline.



appointments



well-being



assistance



social



biography

## Benefits






By facilitating group interactions, Groupe spreads the workload, increases dialogue and improves the quality of care, creating a better, more joined up experience both for carers and the person with dementia.

In addition to its more practical benefits, Groupe provides reassurance and inspiration. Family members on the periphery such as grandchildren can see what is going on and feel involved.


## The opportunity

There are other websites for carers, but none provide the sophisticated functionality the Groupe team has developed for their needs, particularly with regard to sharing duties and information.


Categories:

Start date:

 16 04 2012

End date:

 31 10 2012

Include events by:

Rebecca	<input checked="" type="radio"/>
Bill	<input type="radio"/>
Daisy	<input checked="" type="radio"/>
Kate	<input type="radio"/>
Arthur	<input type="radio"/>

**'As opposed to a phone call with one person, you are able to link up with everyone and compare notes and all be on the same page.'**

Allison, research subject



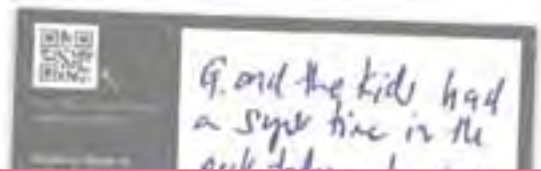
## Next steps

The Design Council challenge has enabled the team to create a working prototype that is currently being tested with invited families.

Using their feedback, the team will refine the design and user experience before making Grouple more widely available in a beta phase.

Development is also planned of an accompanying smart-phone app to allow people to post to the Grouple timeline directly from wherever they are.

Grouple is seeking development partners to support this becoming a financially sustainable social enterprise.



## The team

**Matthew Harrison and Cian Plumbe** are user-experience designers who have worked together on inclusive design projects for clients including BT, the Wellcome Trust and the Helen Hamlyn Centre for Design, based at the Royal College of Art, London.

**Dr Ifung Lu** is a technologist and open-source advocate with a master's degree from MIT Media Lab and a PHD from UCL. He has designed front-end concepts and medical devices for Johnson & Johnson, winning an IDEA 2005 Gold Award for medical devices.

**Meike Walcha** is an award-winning media artist who has recently been creating rich multimedia and web content for the NHS to facilitate public and patient involvement in medical research.

**Louise Wilson** is a socially sustainable designer and researcher focusing on design for social good. Louise is involved with the behaviour change company Ecoconomy, tutors on the MA Design for Development at Kingston University and helps out with the social venture, the People's Kitchen.

The team would like to acknowledge Jewish Care, Gregor Timlin and Adam Oliver of BT Innovate & Design for their assistance and advice in developing Grouple.

**[grouple.cc](http://grouple.cc)**



04

ODE

—

Appetite  
stimulation  
by aroma



## The problem

Weight loss is common to most people with late-stage dementia and can be an early indicator of the condition's onset.<sup>1</sup> Malnutrition costs the NHS around £13 billion a year<sup>2</sup> compared to £5.1 billion<sup>3</sup> for obesity.

### Insights

- The causes of weight loss among people with dementia can include depression, forgetfulness and loss of identification with food.
- According to a 1997 study, food-related olfactory cues have more effect in triggering an 'appetitive urge to eat food' in restrained eaters than unrestrained eaters.<sup>4</sup>
- The ode design team found that people with dementia often missed experiencing the aromas that could stimulate appetite, either because their meals were cooked from frozen or, in care homes, prepared elsewhere in the building.

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<sup>1</sup> University of Florida 2010, Alzheimer's Society

<sup>2</sup> Combating Malnutrition: BAPEN, February 2009

<sup>3</sup> The economic burden of ill health due to diet, physical inactivity, smoking, alcohol and obesity in the UK: an update to 2006/07 NHS costs, British Heart Foundation Health Promotion Research Group, Department of Public Health, University of Oxford, December 2011

<sup>4</sup> Fedoroff, IC et al. 1997

A white ceramic plate with a gold-colored rim and a black inner circle. A silver fork and knife are placed on the right side of the plate. The text is centered on the plate.

37%

OF RESIDENTS IN  
CARE HOMES ARE  
MALNOURISHED<sup>2</sup>



## The solution

**A fragrance-release system designed to stimulate appetite among people with dementia. The mains-powered unit releases three food fragrances a day, adjustable to coincide with the user's mealtimes.**

Scents have been developed specially for ode, in conjunction with a leading fragrance laboratory and in response to workshop feedback. Users can choose their preferred scents at installation.

Fragrances are released in short sharp bursts, acting as a strong appetite trigger and then dissipating rapidly so users won't become inured to the effect.

A subtle light indicates the device is working and also communicates when fragrances need refilling.



## Benefits

This discreet system is less stigmatising and more inspiring than an alarm or constant reminders from carers to eat. Initial research suggests it can stimulate real hunger subliminally. Scents are pleasant and evocative, and aim to improve mood as an additional effect.

The system can be used preventively, but has also demonstrated compelling impact as a redressive solution during later stage dementia.

## The opportunity

Early results are already stimulating interest from care home providers. There is also potential to sell direct to individuals.

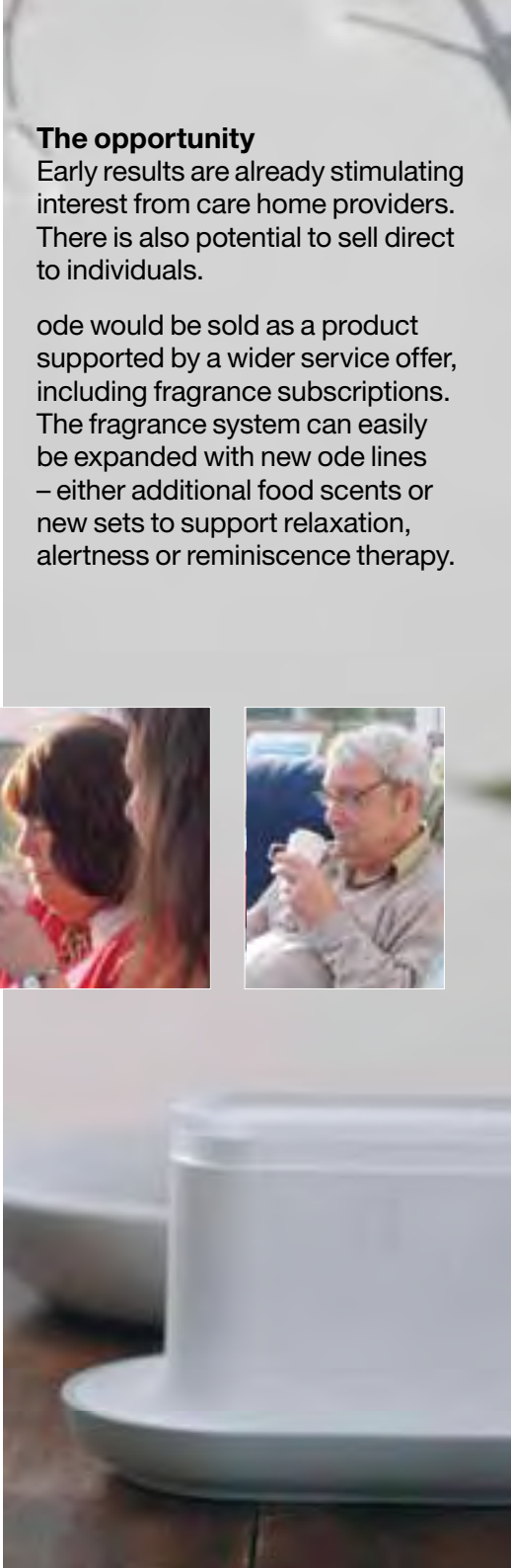
ode would be sold as a product supported by a wider service offer, including fragrance subscriptions. The fragrance system can easily be expanded with new ode lines – either additional food scents or new sets to support relaxation, alertness or reminiscence therapy.



## Evidence

Six scents were tested with 15 participants both in own-home and in residential care settings, with a placebo where possible of equal duration.

Around 30% of the tests delivered strong positive results and these were from participants who most closely fitted the criteria of experiencing weight loss.



## Next steps

The next stage is to test ode's impact on a statistically robust scale by manufacturing a small batch prototype for a formal product evaluation in care homes. The supply chain can then be developed for production and/or licensing at scale.

**'Over the course of the week she had considerably improved. One day after eating lunch she asked for more food. I have not experienced such a rapid turnaround before and to have someone ask for more is very unusual.'**

**Satian, NHS Ward Manager**

## The team

**Rodd Design** is a user-centred design agency with a track record of highly acclaimed projects for clients such as Philips, Panasonic (Japan), Transport for London, Motorola and Morphy Richards.

**Lizzie Ostrom**, a.k.a. 'Odette Toilette', from The Olfactory Experience is a scent specialist. Having designed fragrance-based events at the Wellcome Collection, Natural History Museum, The Body Shop and the International Fragrance Association among others, Lizzie saw potential to create scent-based products and services for health and wellbeing.

Rodd and Lizzie worked with experts including the fragrance house Seven Scent and Gwen Coleman, dementia specialist at Anchor.

**[myode.org](http://myode.org)**





05

# TRADING TIMES

—  
Jobs for those  
who care



## The problem

An estimated 670,000 people in the UK now care for someone with dementia.<sup>1</sup> One study found that over half provide more than 35 hours of informal care each week.<sup>2</sup>

The costs to them are significant with 72% worse off financially and many struggling to make ends meet.<sup>3</sup>

Carers also face reduced opportunities to work and earn income forcing many to reduce their working hours or give up work entirely.

### Insights

- 27% of carers surveyed expressed a desire to take up paid work, with flexible working hours and the ability to work from home being the two most important factors that would enable them to do so.<sup>4</sup>
- Carers expressed a clear desire for improved access to paid work and, probably even more importantly, to remain connected to society.
- Small and medium-sized companies often need skilled local employees for short periods (typically below 10 hours a week), but have difficulty finding them.

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<sup>1</sup> Dementia 2012: A national challenge, Alzheimer's Society

<sup>2</sup> Dementia UK: The Full Report, Alzheimer's Society, 2007

<sup>3</sup> Carers in Crisis, Carers UK, 2008

<sup>4</sup> Survey of Carers in Households 2009/10, NHS Information Centre

# 27%

OF CARERS  
WOULD LIKE PAID  
WORK TO FIT IN  
AROUND THEIR  
CARE ROLE





## The solution

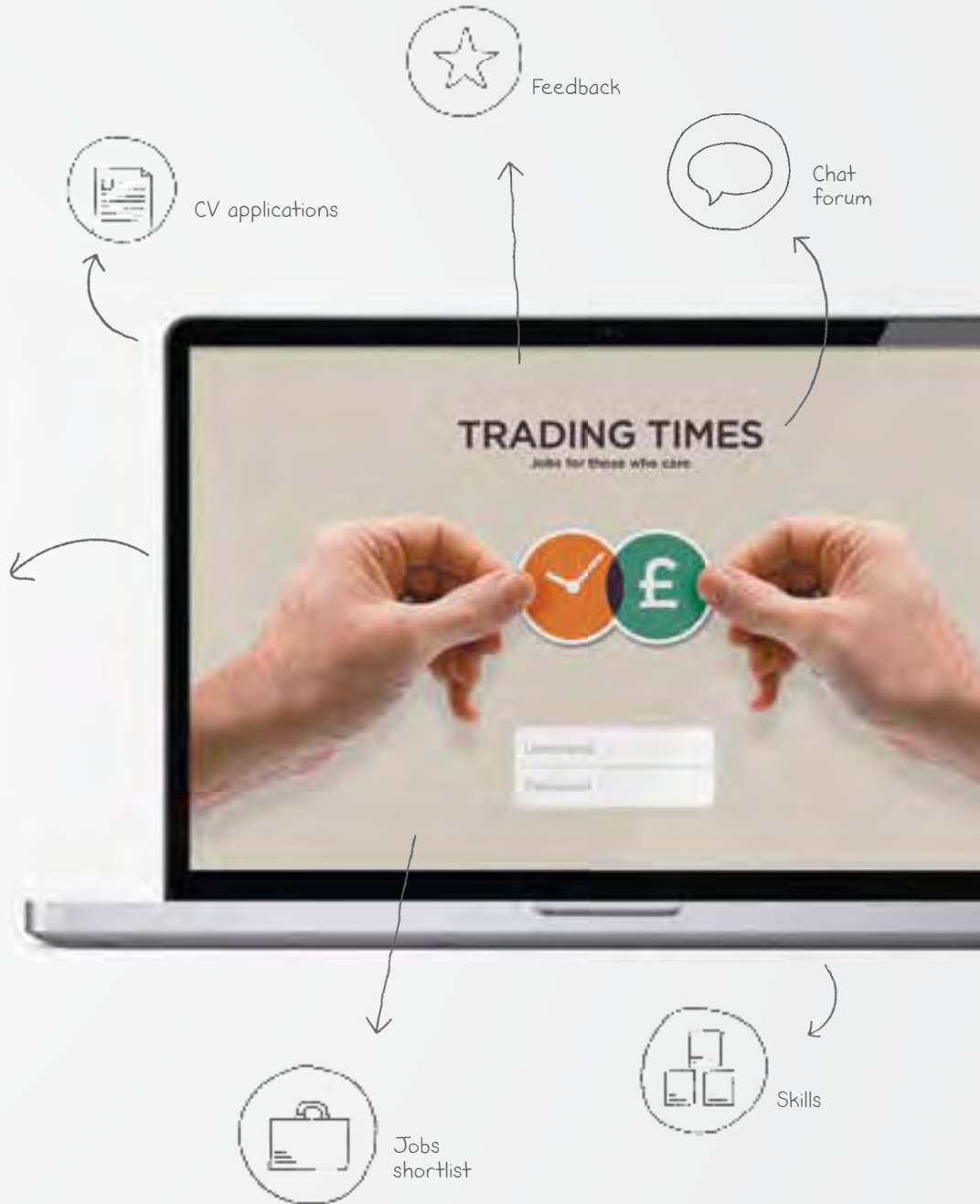
**An online service that matches carers with local businesses for flexible paid work. It is free to carers and paid for on a transactional basis by employers.**

Carers will complete a simple profile describing their work skills and enter the number of hours they think they can work. A local community manager will welcome every new carer with a telephone call to help them on their way. Employers will either post short job adverts or search for local carers with relevant profiles.

The Trading Times website will provide a rich and supportive environment with a full range of tools and templates to assist both carers and employers. These include an email helpline, carer chat forums, success stories and a guidance library. Carers and employers will also be able to add performance-related feedback to each other's profiles.



Experience



CV applications



Feedback



Chat forum

TRADING TIMES

jobs for those who care.

Username: \_\_\_\_\_  
Password: \_\_\_\_\_



Jobs shortlist



Skills

## Benefits

Trading Times will provide carers with access to opportunities to earn, the ability to retain and develop work skills, stay connected with society and maintain a sense of self-worth. At the same time as it helps carers with existing work-based skills, it also empowers those who haven't worked before by showing that many of their caring skills – time management, organisation, budgeting – are extremely valuable in the workplace.

## The opportunity

The size of the problem, scalability of the web-based solution and the politico-economic context all indicate considerable opportunity for Trading Times to deliver significant social impact.

The Trading Times team's market and focus-group research found that carers seeking work tend not to find suitable opportunities on existing job sites – which is where they usually look first. The absence of such a service in the UK points to a tangible opportunity.



## Next steps

The Trading Times web service will now be developed and tested ahead of a live launch.

**‘On the one side it has to be credible for an employer, but at the same time it can’t be too corporate and intimidating for carers. And we’ve done a lot of work in getting that balance right.’**

**Alex Lampe, A+B Studio**



1. Create a profile



2. Find a match



3. Earn while you care

## The team

**Dr. Jonathan Collie**, Project Lead, is head of CREO UK and has extensive experience in the design and implementation of transformational healthcare delivery models. He has worked in clinical practice in the NHS and held senior positions within IT consulting organisations including EDS and Perot Systems.

**Alex Lampe**, Design Lead, is Co-founder and Co-director of A+B Studio, whose clients include Sony, Revlon, the BBC and Zeal Healthcare and whose work has been celebrated in the design press.

**David Reinhardt**, Technical Lead, is an application design expert who has worked on solution design for the NHS and has more than ten years' experience in complex IT-enabled business changes.

Web development support is provided by FeedHenry.

**[tradingtimes.org.uk](http://tradingtimes.org.uk)**



# THE CHALLENGES PROGRAMME



## The Challenges programme

**'We start new businesses here. It's not just about the creation of ideas. It's about implementing them and measuring that design has had a great impact.'**

**Mat Hunter, Chief Design Officer,  
Design Council**

For each challenge we create a call to action that frames the problem as an opportunity, spread the word through diverse networks in order to bring unlikely collaborators together, and then support the product and service development through seed funding and bespoke mentoring. Following this we help launch the resulting products and services into the marketplace and share the wider story to inspire others. True impact, though, takes time, so we monitor the results as they grow.

Current challenges include helping older people live independently for longer and young people find employment and training. Over the past five years, we have run challenges on infection-control in hospitals, violence and aggression against staff in A&E, and alcohol-related violence and theft in communities. The result is a portfolio of innovative products and services that are generating a positive impact for society and creating business opportunity for the UK.

## Why design?

**'Design is what links creativity and innovation. It shapes ideas to become practical and attractive propositions for users or customers. Design may be described as creativity deployed to a specific end.'**

**Sir George Cox, former Chairman  
of the Design Council**



**The Design Council believes that in taking on difficult issues such as dementia, design processes should be central to every serious innovator's toolbox. The five winning responses to *Living well with dementia* show why.**

## VISUAL

Designers make ideas visible, ensuring thinking never gets lost in abstraction. They don't just work towards a visible end result, they think visually, using diagrams, video and photos to understand context, map user journeys and provide a focus for discussion. The designers of Trading Times, for example, didn't only design a website, they used visualisation to understand how users would interact.

## HUMAN CENTRED

Good designers spend time with the kinds of people who will use their designs, often gaining surprising insights into their needs. For example, through engaging with users the buddiband creators discovered that personal alarms were often not worn because they are cumbersome and stigmatising. They therefore focused on designing a product that was unobtrusive, attractive and comfortable.

W  
DE

## ITERATIVE

Designers use prototypes – simple models of their ideas – because they are a quick, cheap way of seeing what works with users. All of the projects, even Dementia Dog, will have gone through these kinds of iterations to refine and develop their solutions, and all are at working prototype stage – advanced in their details, but still to be proven on a large scale.

WHY  
SIGN  
?

## COLLABORATIVE

Great new products and services require input from a wide variety of disciplines such as technology, research, and engineering. The expertise involved in the development of the ode included product design, fragrance creation and nutrition. In fact, design processes have proved so effective at coordinating interdisciplinary groups that they are increasingly used on projects not strictly design-related.

**Design Council Challenges are national competitions that use design to address genuine societal issues and stimulate new commercial opportunities for industry.**

Our Challenges are a unique framework for publicising and galvanising the role of design in taking on the biggest issues of our time.

They bring together designers with technologists, manufacturers, entrepreneurs, civil servants and others on the ground to develop innovative ideas and put them into practice.

Get in touch to suggest a challenge or find out how we can tackle a problem for you.

**Design Council**

34 Bow Street  
London WC2E 7DL  
United Kingdom

Tel +44 (0)20 7420 5200  
[info@designcouncil.org.uk](mailto:info@designcouncil.org.uk)  
[www.designcouncil.org.uk](http://www.designcouncil.org.uk)

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Company number 7580913

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