

Supplementary Information Sheet 6

Organisation Action Plan

Your pledge to become more dementia friendly

Part One:

Information about you and your organisation

Organisation Name:

Contact Name:

Position:

Telephone Number:

Email:

Address:

Website:

Organisation Summary:

Organisation Type: Private Sector Voluntary/Charity Public Sector
 Other

Organisation Logo: Do you have one? Yes No
If yes, please send a copy for us to use on the website alongside your action plan

I confirm that the organisation is committed to delivering the actions and tasks listed in this action plan within the agreed timescales. I agree to DFK holding my data as per GDPR regulations and being displayed on the DFK website. If at any time you would like the data to be removed or not held by DFK, please inform DFK and they will delete.

Signature:

Name:

Date:

Office Notes:

| | |
|----------------------------|--------------|
| Date Action Plan Agreed: | Review Date: |
| Date Organistaion Awarded: | DFK worker: |

Part Two: Your Action Plan

Organisation Name:

Date Completed:

Action 1: Increase Awareness and Understanding of Dementia

Brief overview of what you will do to deliver this action:

| | Tasks to deliver this action | Who responsible? | Timescales |
|---|------------------------------|------------------|------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Notes:

Action 2: Review and Promote Dementia Friendly Environments

Brief overview of what you will do to deliver this action:

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| | Tasks to deliver this action | Who responsible? | Timescales |
|---|------------------------------|------------------|------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Notes:

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Action 3: Provide appropriate support for people affected by Dementia

Brief overview of what you will do to deliver this action:

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| | Tasks to deliver this action | Who responsible? | Timescales |
|---|------------------------------|------------------|------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Notes:

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Action 4: Provide support for DFK, your local Dementia Friendly Community

Brief overview of what you will do to deliver this action:

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| |
|--|

| | Tasks to deliver this action | Who responsible? | Timescales |
|---|------------------------------|------------------|------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |

Notes:

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