

REPORT TO: Health and Wellbeing board			
TITLE OF REPORT:	Living Well with dementia – Torbay Update		
PREPARED BY:	Ann Redmayne		
	Mental Health Commissioning Manager		
CONTRIBUTORS:	Dr Nick Cartmell		
DATE PREPARED:	May 2013	DATE OF MEETING:	May 23 rd 2013
Please indicate below to show which Quality issue this report covers and for which period:			
MONTH OR PERIOD COVERED	Position statement as at May 2013		
QUALITY DOMAIN (please tick all that apply)	PATIENT SAFETY	<input checked="" type="checkbox"/>	PATIENT EXPERIENCE
	EFFECTIVENESS/OUTCOMES	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<p>1. Introduction</p> <p>1.1 The prevalence of dementia doubles with every 5 year increase in age. Dementia is therefore essentially an illness of old age. It is estimated that currently there are 700,000 people with dementia living in the United Kingdom. The cost to the economy is estimated as £17- £18 billion. The population is aging and over the next 30 years the number of people is expected double.</p> <p>1.2 The improvement of dementia services has received increasing attention over the past 10 years, starting with the inclusion of a standard relating to mental health services in the <i>National Service Framework for Older People, DH, 2000</i>, the development of a set of clinical guidelines for effective and efficient dementia care produced by The National Institute for Clinical Excellence (NICE) and the Social Care Institute for Excellence (SCIE), <i>Dementia, Supporting people with dementia and their carers, NICE/SCIE, 2006</i> and culminating in the publications of the National Dementia Strategy, <i>Living Well with Dementia: A National Dementia Strategy, DH, 2009</i> and 'Quality outcomes for people with dementia: building on the work of the National Dementia Strategy' (DoH 2010). This document will play a central role in ensuring that the needs of people with dementia become and remain a priority.</p> <p>1.3 Living Well with Dementia, the first ever National Dementia Strategy was published in February 2009. It provides a clear pathway for improving the support available to people living with dementia, their families and their carers. As its title suggest, the emphasis is on living well with dementia throughout the course of the illness, at whatever stage people receive a diagnosis and in whatever setting they are living or receiving care.</p> <p>1.4 The National Dementia Strategy has identified 17 key objectives (see appendix 1), which when implemented will result in significant improvements in the quality of services provided to people living with dementia and should promote a greater understanding of the consequences of dementia .</p> <p>1.5 Further to the National Dementia Strategy 2009 the Prime Minister David Cameron announced a personal challenge for dementia on Friday 25th May 2012. In that announcement he reiterated the National Dementia Strategy and aims to build a focus in three areas:</p>			

- Driving improvement in health and care – by going further and faster on implementing the National Dementia Strategy
- Increasing awareness – by creating dementia friendly communities
- Accelerating research into dementia

1.6 Strategic direction is set and monitored through the Mental Health and Learning Disability Redesign Board, linking with the Devon-wide Joint Dementia Steering Group, chaired by Dr Nick Cartmell (Ashburton GP and SHA/ South Devon CCG GP Dementia Lead) and implementation at a local level through the Local Older People's Mental Health Implementation Group (OPMH LIG) chaired by Dr Richard Montgomery (Torbay's GP Dementia Lead)

1.7 This report aims to illustrate progress continues to be made against the strategy and to communicate the South Devon and Torbay CCG's dementia commissioning intentions for 2013-14.

2. National Strategic priorities

2.1 2012-13 operating framework requires PCT's to publish their dementia implementation plan

- Good quality early diagnosis and interventions for all
- Improved quality of care in General Hospitals
- Living well with dementia in care homes
- Reduced use of antipsychotic drugs

2.2 2013-14 NHS Outcomes framework

Domain 2: Enhancing quality of life for people with long term conditions

- Estimated diagnosis rate or people with dementia
- A measure of effectiveness of post-diagnosis care in sustaining independence and improving quality of life

3. South Devon and Torbay Dementia Commissioning intentions

3.1 Key outcomes to be achieved:

- Timely (early) diagnosis and intervention – more than 55% of prevalence will have a formal diagnosis of dementia (GP QOF register) by 2015. Current rates – Torbay 47%, Devon 35.7% (*Source: Alzheimer's Society: Mapping the Dementia Gap 2012 – Progress on improving diagnosis of dementia 2011-2012*). Agreed post diagnosis intervention pathway to ensure people living with dementia are able to access timely and effective support to sustain independence and improve quality of life for the individual and their carer/family
- Improved quality of care in acute and community hospitals for people living with dementia and their carers by the implementation of the SHA dementia hospital standards, leading to improved user and carer experience. Improved accessed to specialist psychiatric liaison.
- Enabling people with dementia to live well in care homes. Reducing acute admissions from care homes, improved quality of life outcomes, advance directives, appropriate antipsychotic medication prescribing and improved staff satisfaction
- Improved awareness, reduced discrimination and stigma (dementia friendly community)

3.2 Key pieces of work in the next year to achieve outcomes:

We will continue to implement the dementia strategy and the Prime Minister Dementia Challenge:

Key work areas:

- Early diagnosis and interventions, including:
 - Publish dementia care pathway (Map of Medicine). Agree care pathway for at risk groups e.g. people with learning disabilities, BME background
 - Primary care role in the diagnostic pathway
 - Agree the model and implement high quality memory clinics across the CCG, based on a “one stop” model where possible. Capital improvement – through a successful dementia environmental challenge fund bid
 - Agree and develop interventions and support following diagnosis
 - Ensure access to anti-dementia drugs
 - Acute care screening of all acute admissions over 75 (National CQUIN)
 - Raising awareness through the development of dementia friendly communities
 - Establish locality sensitive dementia prevalence data to inform future commissioning intentions
 - Support other professions to identify and promote the benefits of early diagnosis e.g. pharmacist, district nurses
- Support the development of dementia friendly communities (Norms Mc Namara, Torbay Dementia Alliance)
- Appropriate prescribing of anti-psychotic prescribing for people living with dementia
- We will work with the independent sector to ensure Individuals with dementia live well in care homes by developing a Torbay and South Devon Dementia Care Home Learning Community.
- Improving quality of care for people living with dementia and their carer’s in acute and community hospitals by continuing to implement the dementia hospital standards developed by the SHA Expert Reference Group. We will continue to embed and evaluate the Liaison Psychiatry Service at Torbay Hospital. High quality liaison psychiatry services such as Rapid Assessment interface and Discharge (RAID) have been shown to save money for the NHS by reducing hospital admissions and length of stay. Collaborative care arrangements outside hospital can also improve people’s ability to manage their own health and offer a cost-effective way of joining up mental and physical healthcare for people with Long Term Conditions. We will review the RAID model and work with key stakeholders to develop services to meet local needs.
- Building voluntary and community sector capacity to provide an appropriate level of services are available to support people living with dementia and their carers e.g. memory cafés, orientation programmes post diagnosis, dementia advisors, peer support services, with the aim to prevent crisis, acute admissions and delay in the need for residential care.
- Addressing carer’s needs – develop an innovative range of services to need the needs of those who care for people with dementia
- Keeping people safe – by the use of GPS tracking for those with dementia who are at risk of wandering

Assurances:

Please outline in this section any targets or performance measures that the provider is expected to meet and the evidence that gives assurance. Please include charts, tables or any other visual aid that

would demonstrate the findings/assurances. Please keep your text concise,

The South Devon and Torbay Mental Health Redesign group will continue to monitor progress.

Issues arising:

Please outline in this section any issues that have been identified – e.g. is the provider failing to meet expected quality requirements or standards? How has the issue been addressed? What is the timeframe for getting back on track?

No major issues identified – all key stakeholders are committed to improving care for people living with dementia and their carers; however some of the planned improvements are reliant on securing additional resources particularly to address inequities across South Devon and Torbay.

Risks:

Please outline in this section if there is an indication of risk to patient safety, patient experience or clinical effectiveness or expected outcomes. Please rate the risk – high, medium, low and outline the actions that have been put in place to mitigate the risk. Does this risk need to be escalated?

Identified risks includes:

Sustainability of services funded through charitable funding. (Peer support services). (South Devon issue only)

Further action

APPENDIX 1

NATIONAL DEMENTIA STRATEGY OBJECTIVES

- Objective 1: Improving public and professional awareness and understanding of dementia.
- Objective 2: Good-quality early diagnosis and intervention for all.
- Objective 3: Good-quality information for those with diagnosed dementia and their carers.
- Objective 4: Enabling easy access to care, support and advice following diagnosis
- Objective 5: Development of structured peer support and learning networks.
- Objective 6: Improved community personal support services.
- Objective 7: Implementing the Carers' Strategy.
- Objective 8: Improved quality of care for people with dementia in general hospitals.
- Objective 9: Improved intermediate care for people with dementia.
- Objective 10: Considering the potential for housing support, housing-related services and Telecare to support people with dementia and their carers.
- Objective 11: Living well with dementia in care homes.
- Objective 12: Improved end of life care for people with dementia.
- Objective 13: An informed and effective workforce for people with dementia.
- Objective 14: A joint commissioning strategy for dementia.
- Objective 15: Improved assessment and regulation of health and care services and of how systems are working for people with dementia and their carers.
- Objective 16: A clear picture of research evidence and needs.
- Objective 17: Effective national and regional support for implementation of the Strategy.