6 September 2011

ITEM

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Health and Well-being Overview and Scrutiny Committee

Draft Essex, Southend and Thurrock Dementia Strategy

Report of: Roger Harris. Head of Strategic Commissioning and Resources

Wards and communities affected:	Key Decision:
All	No

Accountable Head of Service: Roger Harris

Accountable Director: Lorna Payne – Corporate Director, Community Well Being

This report is Public

Purpose of Report: This report is part of the overall consultation process for the Dementia Strategy which concludes on 19th September.

This report should be read in conjunction with the enclosed presentation

EXECUTIVE SUMMARY

The Essex, Southend and Thurrock Dementia strategy provides an overarching statement on how objectives within the National Dementia Strategy can be met. Priorities identified are set out in section 3 of this report. Public consultation, which runs until 19th September asks for responses to the following:

Is there anything that has been missed to help us to deliver the Essex, Southend and Thurrock Dementia Strategy?

Does this Strategy fully address issues of equality and diversity and the needs of particular groups?

What are your priorities for implementation? What can and should be done first?

What can you or your organisation do in partnership to help deliver the outcomes?

1. **RECOMMENDATIONS**:

1.1 Health and Well Being Overview and Scrutiny Committee is asked to note and comment upon the Essex, Southend and Thurrock Dementia Strategy including the priorities identified for action across the region.

1.2 Health and Well Being Overview and Scrutiny Committee is asked to note that following the public consultation being held until 19th September a local action plan for Thurrock will be produced.

2. INTRODUCTION AND BACKGROUND:

- 2.1 The Essex, Southend and Thurrock Strategy for Dementia 2011-2014 is based on national guidance, set out in *Living well with dementia: A National Dementia Strategy, 2009,* the subsequent Department of Health *Quality Outcomes for people with Dementia* and the NICE Quality Standards for Dementia. It encompasses Essex, Southend and Thurrock Council, the two Primary Care Trust clusters and the two Mental Health Trusts in Essex and supports the strategies and action plans which are being developed at a local level across the sub economies.
- 2.2 The purpose of the strategy is to provide an overarching statement of how the objectives of the National Dementia Strategy can be collectively met whilst allowing the flexibility of responding to local needs. It has been developed by the Older Adults Mental Health Programme Board in partnership with Adult Social Care, NHS Services and third sector organisations.
- 2.3 The strategy aims to refocus investment and current resources to improve access to high quality diagnosis, treatment, support and advice for all people living with dementia in order to improve quality of life from diagnosis to end of life for people with dementia and their carers. This includes ensuring that people with dementia and their carers receive health care and social support from staff who have the skills and training to provide the best quality care and support. It also aims to support people in the comfort and familiarity of their own environment by moving care away from acute hospitals and reducing the number of people prematurely entering long term care.
- 2.4 The strategy is underpinned by the commitment to the values of dignity and respect and the principles of Personalisation and person centered support, to enable individuals to make choices regarding their care needs; thereby maximising opportunities for independence and improved quality of life.
- 2.5 The strategy is designed to be inclusive of all citizens in Essex, Southend and Thurrock who may experience dementia, or are the carers of people with dementia irrespective of age. It is inclusive of all user groups including for example adults who may have a learning disability or other long term health condition that impact on their cognitive abilities.
- 2.6 The strategy is in line with the Council's vision :

'Thurrock to be at the heart of the Thames Gateway, a place of ambition, enterprise and opportunity, where communities and businesses flourish' and meets priorities that will achieve this. In particularly the strategy aims to 'provide and commission high quality and accessible services that meet need individual needs'

It aims to reduce inequalities in health and wellbeing by providing a clear pathway to ensure timely assessment, diagnosis, treatment and support. The strategy enables vulnerable people to exercise choice and control by ensuring access to admission avoidance schemes, re-ablement and intermediate care.

2.7 The strategy focuses on the Care Quality Commission three outcome areas of:

Improved health and wellbeing, increased choice and control and maintaining personal dignity and respect. These aims are in alignment with Thurrock Councils' vision and priorities mentioned above.

3. ISSUES AND/OR OPTIONS:

- 3.1 The priorities outlined within the strategy fall broadly under two headings of early diagnosis and support and living well with dementia. These are:
 - Ensuring clear pathways area available for all people including those with young onset dementia or learning disabilities to access timely assessment, diagnosis, treatment and support.
 - Access to admission avoidance schemes, re-ablement and intermediate care
 - Enhanced liaison and in reach services to acute hospitals and nursing homes which include strategies to reduce the use of anti psychotic medication
 - An effective, trained and skilled workforce
 - Appropriate support to carers and recognition of carers as partners in the care of people with dementia
 - Access to palliative care and support to people with dementia at the end of their life
- 3.2 The strategy will help to drive up quality and improve dementia care services. It reflects a shift in emphasis from structures and processes towards our agreed priorities, centred on improving outcomes for people with dementia and their carers.

4. CONSULTATION (including Overview and Scrutiny, if applicable)

4.1 There has been a wide public consultation running from 27th June until 19th September

5. IMPACT ON CORPORATE POLICIES, PRIORITIES, PERFORMANCE AND COMMUNITY IMPACT

5.1 These will be covered in the final Thurrock Action Plan.

6. IMPLICATIONS

6.1 Financial

Implications verified by:Roger HarrisTelephone and email:01375.652192rharris@thurrock.gov.uk

These will be addressed as part of the final Thurrock Action Plan.

6.2 <u>Legal</u>

Implications verified by:	Roger Harris	
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These will be addressed as part of the final Thurrock Action Plan.

6.3 **Diversity and Equality**

Implications verified by:	Roger Harris
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These will be addressed as part of the final Thurrock Action Plan.

6.4 <u>Other implications</u> (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental

None at present

7. CONCLUSION

7.1 The Health Overview and Scrutiny Committee is asked to note the Essex, Southend and Thurrock Dementia Strategy and have regard to the priorities mentioned in section 3.

BACKGROUND PAPERS USED IN PREPARING THIS REPORT:

- The National Dementia Strategy (2009)
- Essex, Southend and Thurrock Dementia Strategy 2011-2014

APPENDICES TO THIS REPORT:

• Presentation attached



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