

17 December 2013		ITEM: 6
Health and Well-Being Overview and Scrutiny Committee		
DEMENTIA		
Report of: Sarah Turner – NDS Lead and Older People Commissioner		
Wards and communities affected: All	Key Decision: No	
Accountable Head of Service: N/A		
Accountable Director: Roger Harris – Director of Health, Adults and Commissioning		
This report is Public		
Purpose of Report: To provide an update for the committee on Thurrock’s progress against the objectives of the National Dementia Strategy and the Essex, Southend and Thurrock Dementia Strategy.		

EXECUTIVE SUMMARY

With 1 in 14 people over the age of 65 and 1 in 6 people over 80 years of age with a form of dementia and with a predicted increase of nearly 25% in the next 7 years in the amount of people in Thurrock with the condition, Dementia is a growing issue.

This report details our progress against the key objectives contained within the national and local dementia strategies during 2013/14.

1. RECOMMENDATIONS:

- 1.1 For the members of the Health and Well-Being Overview and Scrutiny Committee to note the contents of the report.**

2. INTRODUCTION AND BACKGROUND:

- 2.1** After the publication of “*Living well with dementia: A National Dementia Strategy*”¹ in 2009, partner agencies worked together to implement the key objectives of the report and to develop a strategy for Thurrock, Essex and Southend.

¹ *Living well With Dementia – A National Dementia Strategy* Department of Health 2009

- 2.2 This local strategy was published in 2012 with an associated action plan for the Thurrock area.
- 2.3 This report details our progress to date against the key objectives contained in the National Dementia Strategy and the local priorities identified in the Thurrock, Essex and Southend Dementia Strategy and Thurrock Action Plan.

3. ISSUES, OPTIONS AND ANALYSIS OF OPTIONS:

- 3.1 There were 17 objectives identified in the National Dementia Strategy. Objectives 1 to 12 specify improvements in 3 key areas;

- early diagnosis and support;
- raising awareness and understanding;
- living well with dementia.

The remaining 5 objectives are cross cutting and enable the change to happen. These objectives are workforce development, commissioning, performance monitoring and evaluation, research and effective local and regional support for implementation. These 17 objectives form the basis of the local action plan.

- 3.2 Health and Social Care have made significant progress locally. If we consider key area 1 – early diagnosis and support;
 - The memory service has received a 30% increase in referrals across south west Essex this year. We have worked in partnership to increase capacity in Thurrock’s memory service to meet demand.
 - Alzheimer Society worker funded to provide support for 12 weeks post diagnosis.
 - Piloting of Mountnessing Court. This step up/step down unit was opened in Billericay (to service south Essex) for people with dementia who were medically stable but not fit for discharge home. The latest figures show that nearly 50% of patients of Mountnessing Court have been Thurrock residents. Instead of being assessed in an acute setting (as this setting can be distressing for people with dementia), the needs of people with dementia can be reviewed in a more appropriate setting during a period of rehabilitation (approximately 8 weeks) thus reducing unnecessary admissions to residential care and/or long stays in an acute setting.
- 3.3 There has been significant progress in key area 2 – raising awareness and understanding, including;
 - Family and Friends (Carers) training is now being delivered for different stages in the illness

- Increased momentum for Dementia Friend's programme (including all members of the Directors Board who all attended an information session and became 'Dementia Friends')
- Motion passed to become a Dementia Friendly Council. Members signed up to attend training.
- Peer support continues through the Alzheimer's Society. Increase in the amount of activities available – reminiscence group was instantly popular and is well regarded by those who attend.
- Library service has trialled dementia sections (books, information and activities for people with advanced dementia) at our two 'hotspots' – Blackshots and Corringham.

3.4 And in Key area 3 – living well with dementia progress has also been made;

- Thurrock's Direct Payment Policy and Guidance has been reviewed so that people with dementia (or 'Suitable Person') can receive payment in place of services whilst ensuring that appropriate monitoring and checks are put in place to safeguard both the individual and the council from financial abuse and other risks.
- As part of the direct payment review all social work staff received advanced risk planning training. Focus is now on developing the market so that there are increased options on which recipients can spend their direct payment.
- Local Area Co-ordinators (LAC's) support in pilot areas. Impact on their interventions for people with dementia will be evaluated
- Working with Ode (and hopefully Stirling University) to pilot the use of assistive technology to increase the appetite of people with dementia.
- Working with graphic design students at the local college to create appropriate signage for use in someone's home.

3.5 In addition to the main three strands of the strategy we have also taken action on the cross cutting objectives, specifically focussing on workforce development this year:

- A full workforce development plan for 2013/14 was developed and implemented. This included;
 - Full survey of adult social care staff undertaken to identify what training we needed to commission to meet identified gaps;
 - Dementia Awareness training for council, SERCO, private, voluntary and independent sector staff;
 - Training programme for Adult Social Care staff based on need and specific to role;
 - Training has been developed for family carers and awareness training for members of the community;
 - Intensive one week training programme for the contracting team.

3.6 Most actions were completed this year; however the development of a Dementia Action Alliance has not been fully progressed during 2013/14. Initial interest was very low from local organisations. As such, we are looking to create interest by building up awareness locally at an individual level in the later part of this financial year.

- 3.7 Our biggest recognition this year was that on 09 May 2013 the Alzheimer's Society invited Thurrock to register as an early adopter for the recognition process for Dementia Friendly Communities. This is because the Society 'recognise[d] the progress [we] have made to date locally in working to make [our] community dementia friendly'. Only those organisations/areas invited were able to register.
- 3.8 There is still so much we plan to do in Thurrock. We are currently setting the priorities for 2014/15 but the action plan will need to include a focus on End of Life, increased support and community understanding and living well with dementia.
- 3.9 More energy is required next year on increasing the number of people who have advanced directives/care planning decisions in place. This will be most effective if this is encouraged shortly after diagnosis. Dementia is a terminal illness and we need to equip all staff with the skills to feel confident to initiate a conversation with people about end of life.
- 3.10 During this year we will also evaluate the impact of a short pilot that has been funded by health to have specialist mental health workers within our Rapid Response Assessment Service (RRAS) to increase the support available in the community at the point of crisis. This should reduce inappropriate admissions to residential care and hospital and give specialist support to the team.
- 3.11 We will also be working with Thurrock Coalition to develop a process of co-production so that we can develop a Dementia Support Strategy (considers the internal or external development of respite services, community support etc) that reflects what people with dementia and their carers require. We will then commission/develop the market to meet any gaps in provision.
- 3.12 There will be increased initiatives aimed at supporting people with dementia to feel part of their community and to live well with dementia. In particular partners will;
- Carry out further discussion with Lakeside Shopping Centre about creating a dementia friendly environment. Training on what a dementia friendly environment looks like will be made available internally to planning, facilities, and housing colleagues. This training offer will be extended to other local organisation where it will be of benefit.
 - In line with NICE (National Institute for Health and Care Excellence) guidance increase community based activities and therapeutic interventions for people with dementia so that people living with dementia are able to participate in activities based on their individual interest and choice. Specifically, we will submit a bid to the Arts Council for increased creativity and cultural opportunities (including utilising the local museum to aid reminiscence) for people with dementia.

4. REASONS FOR RECOMMENDATION:

Dementia is a growing issue in Thurrock. Therefore it is essential that the committee is aware of the progress that health and social care have made in this area.

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

Not applicable.

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

This report links specifically to corporate priority 4 – Improve Health and Well-Being.

7. IMPLICATIONS

7.1 Financial

There are no financial implications.

Implications verified by: **Jill Kirby**
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7.2 Legal

In relation to 3.4 first bullet point, Direct Payments must be administered in line with the Direct Payment Regulations 2009.

Implications verified by: **Dawn Pelle**
 Telephone and email: **020 8227 2657**
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7.3 Diversity and Equality

There are no diversity and equality implications inherent in this report.

Implications verified by: **Samson DeAlyn**
 Telephone and email: **01375 652472**
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7.4 Other implications (where significant) – i.e. Section 17, Risk Assessment, Health Impact Assessment, Sustainability, IT, Environmental

N/A

BACKGROUND PAPERS USED IN PREPARING THIS REPORT (include their location and identify whether any are exempt or protected by copyright):

All the papers used in preparing this report are publically available except the Direct Payments Policy and Guidance;

- DoH (2009), *Living Well with Dementia: A National Dementia Strategy*, London: TSO
<https://www.gov.uk/government/publications/living-well-with-dementia-a-national-dementia-strategy>
- Essex County Council (2012), *Essex, Southend and Thurrock Dementia Strategy*, Essex.
If you require a copy please contact the report author on the details below.
- Thurrock Council (2013), *Thurrock Dementia Action Plan*, Thurrock.
Attached as an appendix to this report.
- Thurrock Council (2013), *Direct Payments Policy and Guidance*, Thurrock.
If you require a copy please contact the report author on the details below.

APPENDICES TO THIS REPORT:

- Thurrock (2013), *Thurrock Dementia Action Plan*, Thurrock.
- Objectives of the National Dementia Strategy (exert from *Living Well with Dementia: A National Dementia Strategy*)

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