INFORMATION ITEM F

HEALTH AND WELLBEING BOARD				
Report Title	The Lewisham Dementia Action Plan and Integrated Care Pathway			
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Class	Part 1	Date:	7 July 2015	
Strategic Context	Please see body of the report			

1. Purpose

1.1. This report is intended to provide members of the Health and Wellbeing Board with an update on Lewisham's strategic plan for the effective Management of the Dementia agenda and the review of the integrated dementia care pathway. The report also seeks agreement to support the further development of the Dementia Pathway and subsequent initiatives which will enable a stronger focus on prevention, improved experience, outcomes and quality of life for Lewisham service users and their carers.

2. Recommendations

Members of the Health and Wellbeing Board are recommended to:

2.1. Note the content of this update on the Lewisham Dementia Action Plan and Pathway Review

3. Policy Context

3.1. Over the last few years the overall development and delivery of dementia services in Lewisham has been guided by national policies such as the National Dementia Strategy 2009 'Living Well with Dementia', The Prime Minister's Dementia Challenge on Dementia 2015 and 2020.

In August 2007, the Government announced a programme to develop the first National Dementia Strategy and implementation plan for England. Following public consultation the National Dementia Strategy 2009 'Living Well with Dementia' was released. This Strategy outlines three key steps to improve the quality of life for people with dementia and their carers:

- Improved awareness
- Earlier diagnosis and intervention
- A higher quality of care

The Strategy identifies 17 key objectives which, when implemented at largely local level, should result:

- Improvements in the quality of services provided to people with dementia
- Promote a greater understanding of the causes and consequences of dementia

The Prime Minister's Dementia Challenge continues to aim to deliver major improvements on dementia care and research by 2020. This includes:

- Improved public awareness
- Understanding of risk factors and prevention
- Equal access to diagnosis
- GPs playing a leading role in care-coordination and continuity of care
- Access to appropriate and meaningful post-diagnostic support
- Training of NHS-staff
- And making communities more dementia friendly (including businesses and employers)
- Continuing in conducting research in dementia

4. Background

- 4.1. It is estimated that there are currently around 2100 people living with dementia in Lewisham. National statistics suggest that about two-thirds of these are living in the community and the other third are living in care and nursing homes.
- 4.2. The JSNA 2010 for Lewisham suggests a significant increase of BME elders in Lewisham over the next 20 years requiring dementia services.
- 4.3. Lewisham's goal is for people with dementia and their carers to be supported to live well with dementia, no matter what the stage of their illness or where they are in the health and social care system. The vision to achieve this is to:
 - encourage help-seeking and help-offering (referral for diagnosis) by changing public and professional attitudes, understanding and behaviour through training and awareness raising
 - make early diagnosis and treatment the rule rather than the exception
 - provide individuals with immediate treatment, care and peer and professional support as needed to enable people with dementia and their carers to live well with dementia from diagnosis to the end of life
 - making Lewisham a dementia-friendly community where people living with dementia and their carers feel part of, understood and valued

5. Progress Update

5.1. Improving Dementia Diagnosis Rate

- 5.1.1. The basis of the national target for the Dementia Diagnosis Rate is that 67% of the estimated population living with dementia in any one area should have a formal diagnosis of dementia recorded.
- 5.1.2. In April 2014 the Lewisham dementia diagnosis rate was 53.5%, which was below the National Target and below the locally agreed CCG target of 58%. It also put Lewisham in the lower performance quartile compared to other London Boroughs.
- 5.1.3. Through a data cleansing exercise and encouragement of GPs to sign up to the Enhanced Service Incentive Scheme for Dementia the dementia diagnosis rate in Lewisham rose to 61.5% in March 2015.
- 5.1.4. The rate of 61.5% has put Lewisham above the Lewisham CCG agreed target of 58% but this still remains below the National Target of 67%. Further work needs to be undertaken to achieve the National Target during in 2015/16. This work includes:

- An innovative approach identifying patients with dementia in all care-homes is currently being developed in conjunction with the Health Innovation Network (HIN) and their development of the Care-Home-Case-Finding-Tool. The aim of this project is not only to increase dementia diagnosis rate but also to provide local care-home staff with more skills around dementia, improving communication between care-homes and primary care as well as promoting the Lewisham Care-Home-Intervention-Team.
- All Lewisham GP-practices have been invited to sign up to the new Enhanced Service Incentive Scheme for Dementia 15/16.

5.2. Awareness Raising

- 5.2.1. Lewisham CCG, the London Borough of Lewisham and the Alzheimer's Society are currently working collaboratively to raise awareness through the Dementia Friends Initiative.
 - All CCG-staff are now Dementia Friends
 - 26 lead pharmacists of the Local Pharmacy Committee are now Dementia Friends and individual pharmacies have agreed to organise dementia friend sessions for their front-line staff.
 - All non-clinical staff at GP practices have been encouraged to become Dementia Friends.
 - The Alzheimer's Society is currently running Dementia Friends sessions for local library staff and leisure centre staff.
- 5.2.2. There are plans to include Dementia Friends sessions in the induction mandatory training for all new council staff.
- 5.2.3. There are further plans to run Dementia Friends sessions for all existing council staff.

5.3. Training

- 5.3.1. Lewisham MindCare services are running well subscribed and attended training days for carers, professionals and interested people on Dementia in Lewisham.
- 5.3.2. Council staff have access to Lewisham MindCare training days and are encouraged to attend. All members of staff within the Contracts and Brokerage Team have attended the MindCare training so far.
- 5.3.3. An extensive training proposal is being drafted for GPs, Practice Nurses and District Nurses to equip them with a better clinical understanding of dementia to support early diagnosis and treatment as well as appropriate post-diagnostic support.
- 5.3.4. In line with the Lewisham and Greenwich NHS Trust's (LGHT) Dementia Strategy, trust staff are receiving Dementia Awareness training. In 2014/15 521 members of staff attended the formal Dementia Awareness Course and a further 99 attended sessions during the induction training for Band 5 staff nurses and HCAs.

5.4. Lewisham Dementia Action Alliance (DAA)

5.4.1. The Lewisham DAA was founded in December 2014 as a local vehicle to drive the development of a more dementia friendly community. It was officially launched on the 18th May 2015.

- 5.4.2. At the Launch Event the DAA received the support of Lewisham's Mayor, Sir Steven Bullock, who supports the development of a dementia friendly community in Lewisham and encouraged local businesses to join the Lewisham DAA.
- 5.4.3. The event was well attended and received very positive feedback from delegates. It revealed that Lewisham residents from different communities, but in particular from BME-communities, have a real interest in dementia and the services and support available locally.
- 5.4.4. Following the successful launch, the Lewisham DAA is currently recruiting new members to support the DAA's ambition to make Lewisham a more dementia friendly community where local residents living with dementia and their carers feel understood and valued and continue to be active members of our community.
- 5.4.5. The DAA is currently working very closely with a variety of organisations to join the local DAA; these include Lewisham and Greenwich NHS Trust and the Local Pharmacy Committee.

5.5. Pathway Review

- 5.5.1. In 2012 the Lewisham Integrated Memory Service was launched. At the time it was cited across the national dementia literature and considered a gold standard model.
- 5.5.2. Since 2012 demands on the services and national focus have changed:
 - Through rising awareness, demands on the system have risen with increasing numbers of patients being referred to the Memory Service every year.
 - In 2012 the national focus has been very much on increasing and improving dementia diagnostic rates and diagnostic services. The national focus has since widened and now includes the postdiagnostic support available to service users and their carers.
 - Primary Care will also be expected to take a leading role in the diagnosis, care-co-ordination of dementia and therefore treating dementia much more as a long-term condition going forward.
 - Locally, performance data for the Memory Service is showing that there are long waiting times for patients to be assessed and diagnosed.
 - Meeting GPs at the neighbourhood meetings highlighted that there is a requirement to improve communication between primary and secondary care. GPs have also indicated that there is a training need to support primary care practitioners to confidently diagnose and support dementia patients.
 - The focus of the Lewisham Dementia Pathway is mainly on diagnosis and post-diagnostic support. It currently does not include prevention.
- 5.5.3. To develop the pathway to more appropriately meet the local needs the Joint Commissioning Unit decided to undertake a pathway mapping exercise for dementia in conjunction with SLaM, LGHT, GP Lead and MindCare (Voluntary sector agency) to ensure that we develop and deliver holistic integrated care packages to service users and their carers.
- 5.5.4. The pathway mapping exercise for the current dementia pathway was conducted on the 9th June 2015. The following developmental issues were highlighted for action:

- A previously existing Dementia Pathway Operational Group had been discontinued due to staff changes. This will now be redevelop, review and inform the pathway.
- The pathway requires further integration between health, social care and the voluntary sector in order to appropriately support operation of integrated care packages
- Communication between different stakeholders at the most significant points of transfer within the pathway needs to improve.
- The development of preventative and early identification initiatives need to be an integral part of the pathway.
- 5.5.5. The Joint Commissioning Unit will be working with the Dementia Pathway Operational Group to review and develop a fully Integrated Dementia Pathway. This includes working together with stakeholders around the integration agenda. This includes establishing links with other pathways such as the falls prevention pathway

6. Financial Implications

- 6.1. The dementia services and pathway review are funded by the dementia budget held by the CCG, but are managed via the Joint Commissioning Team based in the local authority Community Services Department.
- 6.2. There are no specific financial implications for Lewisham Council as a result of the delivery of the current dementia services and the pathway review.

7. Legal Implications

- 7.1. There are no specific implications
- 7.2. Members of the Board are reminded that under Section 195 of the Health and Social Care Act 2012, health and wellbeing boards are under a duty to encourage integrated working between the persons who arrange for health and social care services in the area.

8. Crime and Disorder Implications

8.1. There are no specific implications

9. Equalities Implication

- 9.1. Any potential service development or significant service change as part of the pathway review will require Equality Analysis Assessment to be undertaken by the service providers and/or commissioning lead.
- 9.2. The improvements of the Dementia Diagnosis Rate is intended to increase the numbers of patients in treatment and support, all services will need to consider the increase in service access by those with protected characteristics to ensure that services are suited to meet their needs.

10. Environmental Implication

10.1. There are no specific implications

11. Conclusion

- 11.1. The Dementia Action Plan and Pathway Review are focused on improving the experience of service provision and the quality of life of Lewisham residents with dementia.
- 11.2. It is integral for the Pathway Development to be working alongside the Integration Agenda. The Joint Commissioning Unit has already been working alongside the GPs in Neighbourhood Forums but representatives of the dementia pathway are expected to have a presence in all neighbourhoods.
- 11.3. Innovative approaches are being developed to further increase the dementia diagnosis rate in Lewisham in particular in the care home population. This works is conducted in conjunction with the Health Innovation Network (HIN) and their research around the development of the Care-Home-Case-Finding-Tool.
 - By working with Care- and Nursing-Home staff it is hoped that staff will be supported to develop more skills around dementia, improve communication between care-homes and primary care as well as promote the Lewisham Care-Home-Intervention-Team as well as other services and training facilitators (such as MindCare) available to Care-Home staff and their residents.
- 11.4. Additional training needs to be provided to Home Care Providers in particular around end-of-life care for people with dementia.
- 11.5. New members are being recruited for the Lewisham DAA to ensure the development of a more dementia friendly community.
- 11.6. Specific emphasis is given on reviewing, updating and promoting the Lewisham dementia pathway. The application of a wider public health approach is to be considered to inform the dementia pathway further on preventative measures. This should include work around health checks. Working alongside the Integration Agenda is imperative to ensure the involvement of the wider services providers in the pathway.
- 11.7. It is proposed that an update on the progress of the 2015/16 Dementia Plan and Pathway Review be submitted to the Health and Wellbeing Board in October 2015.

12. Background Documents

Prime Minister's Dementia Challenge 2020
The National Dementia Strategy
Improving care for people with dementia
Lewisham's Joint Strategic Needs Assessment
Dementia Prevalence Calculator

If you would like further information on this report, please contact Karin Barthel, Joint Commissioning Manager Dementia and MHOA, Tel. 020 8314 3877, Karin.barthel@nhs.net