



**AGENDA ITEM NO: 7** 

Date: 28th February 2013

Report To: Community Health & Care

**Partnership Sub Committee** 

Brian Moore Report No:

Corporate Director CHCP/22/2013/SMcCR

Inverciyde Community Health &

Care Partnership

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Subject: INVERCLYDE DEMENTIA STRATEGY

### 1.0 PURPOSE

Report By:

1.1 To update the CHCP Sub-Committee of the current work in respect of:-

Meeting the needs of people with dementia and their carers in Inverclyde;

o Progress on the development of the Dementia Strategy for Inverclyde.

### 2.0 SUMMARY

- 2.1 The Health and Social Care Committee received an initial report on the requirements of Scotland's National Dementia Strategy in 2010, and the work planned to be undertaken within Invercive to implement the Strategy.
- 2.2 The current work on dementia which is outlined on the Inverciyde Action Plan, is based on the Dementia Care Pathway. The action plan was updated in 2011 to include the standards of care for dementia, following the publication of standards by the Scottish Government in June 2011.
- 2.3 Scotland's Dementia Strategy recognises that diagnosis is important as it is a gateway to effective care and support for people with dementia and their family. This is a priority area of work.
- 2.4 Inverclyde CHCP has achieved the HEAT target:- 'Making Improvements in the Diagnosis and Management of People with Dementia' by March 2011' and through the identification of people with dementia on the dementia register in GP practices. Greater Glasgow and Clyde Health Board is the best performing Health Board in the UK in respect of this. Currently Inverclyde has 715 people on the register.

The other priority areas of work in the Action Plan are:

- Anti Stigma and Awareness, including improving staff skills and knowledge in both health and social care settings;
- Improving the information and support available to people receiving a diagnosis of dementia;
- The provision of post diagnostic support for people diagnosed with dementia and their family, in partnership with Alzheimer Scotland;
- Further development of Liaison services with acute inpatient services at Inverclyde Royal Hospital and with the care home sector;

- Continuing work to implement the redesign of older people's mental health services, in Inverclyde as part of the Modernising Mental Health Strategy, including Ravenscraig Hospital closure incorporating the requirements of Scotland's Dementia Strategy and the Dementia Care Pathway;
- 2.5 The Inverclyde Dementia Strategy Forum was established in July 2012 with stakeholders across the area, included 3<sup>rd</sup> sector organisations and carers. The outcome of the initial discussions identified the key objective of the Inverclyde Dementia Strategy is to improve the outcomes for people with dementia and their families, based on people's experiences; and support the development of services and the local community to meet their aspirations and achieve these outcomes.
- 2.6 It is proposed to further develop the Inverclyde Dementia Strategy implementation arrangements through the Inverclyde Dementia Strategy Forum, based on the objective of a Dementia Friendly Inverclyde. A stakeholder event with members of the Forum was held on the 30<sup>th</sup> January 2013 with the aim of considering key elements of the development work and services required to promote a Dementia Friendly Inverclyde, and guide the future work of the Forum. The Dementa Strategy and Action Plan will be launched in the Spring of 2013 with a public event.
- 2.7 The Scottish Government will introduce a new HEAT target in April 2013. This will require NHS Boards "to deliver the expected rates of dementia diagnosis and, by 2015/16, which is that all people newly diagnosed with dementia will have a minimum of a year of post diagnostic support coordinated by a link worker that will lead with service users and carers to the building of a person centred support plan."
- 2.8 Inverclyde CHCP is taking this work forward through the employment of a Dementia Link Worker. The Link Worker will be employed by Alzheimer Scotland, and be based within the Older Peoples Mental Health Team. This will be implemented in February 2013.

## 3.0 RECOMMENDATIONS

- 3.1 The Sub-Committee is asked:
- 3.2 To endorse the approach being taken to develop the local Inverclyde Dementia Strategy.
- 3.3 To note the work being done to meet the requirements of the Dementia Strategy and Implementation Plan to :-
  - 1. Deliver the Standards of Care for Dementia.
  - 2. Have in place post diagnosis support for 12 months for everyone newly diagnosed with Dementia.
- 3.4 To note the intention to bring a further report to the Sub-Committee on progress and to have a public launch of the Strategy and Action Plan in the Spring 2013.

Brian Moore Corporate Director Inverclyde Community Health & Care Partnership

### 4.0 BACKGROUND

4.1 National and policy context:-

The development work being undertaken in respect of dementia is informed by Scotland's National Dementia Strategy, which was published by the Scottish Government in June 2010. This was a three year strategy which identified the challenges and key actions to support change to improve the outcomes for people with dementia and their families. Within this two key areas for service delivery change were prioritised in respect of improving support after diagnosis and improving care within the general hospital. The Strategy emphasises the need for change across the whole system of health and social care to address these challenges.

- 4.2 Previous reports have been presented to Inverclyde Council's Health and Social Care Committee in 2010, informing of the national strategy and work plan to take forward the actions required. A report in April 2010, "Remember I'm still me", Inverclyde Progress Report, informed committee of the aims and specific actions arising from the Care Commission and Mental Welfare Commission joint report on the quality of care for people with dementia living in care homes. This formed the basis of a local action plan.
- 4.3 Since the publication of the national strategy the Scottish Government has published national documents to support the action for change in relation to dementia care. The Standards for Care for Dementia in Scotland were published in 2011. These standards relate to everyone with a diagnosis of dementia in Scotland, regardless of where they live, their age, the supports they receive or the severity of their illness. These were based on the Charter of Rights for People with Dementia and their Carers in Scotland, 2009. These standards were developed to help people with dementia understand their rights, and how these rights can help ensure that they receive the support they need to stay well, safe and listened to.
- 4.4 Promoting Excellence: A framework for health and social care staff working with people with dementia and their families and carers was published in June 2011. The framework outlines the skills and knowledge health and social care staff should have depending on the role they play in supporting people with dementia. In order to ensure continuing improvement in the care provided and received the framework needs to work in conjunction with the Standards for Care document.
- 4.5 In July 2012 the Scottish Government reported on progress in implementing the strategy. This was followed by a series of dialogue events as part of an informal engagement process to inform the successor three year strategy, which will be published in summer 2013. Inverclyde CHCP has contributed to this in attendance at the national dialogue event in December 2012, and advertising the local event held on 13<sup>th</sup> January 2013 in Paisley encouraging both staff, service providers and the local community to participate.
- 4.6 There were no new direct resources aligned to the strategy, although the Scottish Government expected that community resources available for dementia would be protected. The Big Lottery Fund has approved funding to create a fully independent £50 million Trust the Life Changes Trust, which aims to transform the lives of young people leaving care and improve the lives of people with dementia and their carers in Scotland. This was published in October 2012, and will be available over the next ten years.
- 4.7 In respect of dementia the Life Changes Trust strategy will support the Scottish Government's one year Post Diagnostic Support guarantee by investing in peer support and community connection projects to enable people to live well in their communities. There will also be a focus on supporting the needs of carers throughout the carer journey.

Mechanisms to take work forward:

- 4.8 The Strategy emphasised the expectation that partnership working at national and local level would develop further to deliver the objective of transforming dementia services. Within Inverclyde the existing partnership work has been enhanced with the implementation of the CHCP.
- 4.9 Currently Inverclyde CHCP is engaged in implementing the Modernising Mental Health Services Strategy. This work includes the redesign of Older Peoples Mental Health Services and is based on the development of care pathways, including specifically the dementia care pathway. The work in this area includes addressing the interface with wider community care services, older people's services and the acute sector. This has been the main vehicle by which the work to improve dementia services was taken forward.
- 4.10 The advent of Reshaping Care for Older People has provided an opportunity to further integrate the work on improving dementia care and support within the wider change agenda for older people. The CHCP's Lead Officer for dementia is engaged within the structure to take the reshaping care work forward, and dementia is a specific work stream within this.
- 4.11 The Inverclyde Change Fund has enabled the work on dementia initially with the provision of funding to support a Dementia Development Worker through 2012, currently with funding for the Dementia Link Worker post from February 2013.
- 4.12 The Inverclyde Dementia Strategy Forum was established in July 2012. This forum will enable wider engagement and connections to be made across services and with the community to improve the outcomes for people with dementia and their families. This includes the involvement of people with dementia and their carers themselves.
- 4.13 In 2012 the Council established a champion for older people with a emphasis on dementia with Councillor McIllwee, Convenor of the CHCP elected to this role. This reflects the priority Inverclyde Council is placing on dementia.

### 5.0 DEMENTIA STRATEGY

Good progress is being made and progress will be overseen by the Dementia Forum. Appendix 1 A summary is attached in Appendix 1. A public launch of the Dementia Strategy and Action Plan will take place on the 26th April 2013 at the Municiple Buildings in Inverclyde.

5.2 To note the report

## 6.0 PROPOSALS

6.1 To note the report.

## 7.0 IMPLICATIONS

7.1 Legal: Not required.

## 7.2 Finance:

The Council's specific budgets relating to Dementia are noted below and total £484,000. There is also a budget of £35,000 within the Change Fund to pay for a Dementia post. In addition to these specific budgets there will be dementia related costs throughout a wide variety of both Council and NHS services.

Cost	Budget	Budget	Proposed	Virement	Other
Centre	Heading	Year	Spend this	From	Comments

			Report		
00154	Inverclyde Dementia	2012/13	£250,000	N/A	Annual budget for information
00176	Alzheimers Scotland	2012/13	£234,000	N/A	Annual budget for information
02409	Change Fund	2012/13	£35,000	N/A	Annual budget for information

7.3 Personnel: None.

7.4 Equalities: Improves service for people with Dementia and their families.

7.5 Repopulation: None.

## 8.0 CONSULTATION

8.1 The Dementia Forum have been consulted.

# 9.0 LIST OF BACKGROUND PAPERS

- 9.1 Scotland's National Dementia Strategy 2010.
- 9.2 Standards of Care for Dementia, Scottish Government 2011.
- 9.3 Remember I'm Still Me Inverclyde Progress Report April 2010.

Dementia Strategy: Summary of Progress. January 2013.

Element of Dementia Pathway	Interventions/Approaches	Achievements	Action/work in Progress	Work to start/Comments
Raising awareness and understanding  to encourage help seeking and help offering Prevention	Dementia awareness Dementia risk reduction Anti stigma	Identified training requirements for staff within Promoting Excellence Framework. Home care staff and Healthcare assistants in older peoples mental health service all trained to level 1. Dementia awareness elearning course developed for launch, including for community.	Inclusion of Dementia within work of Anti stigma partnership.  Health Improvement information.	Training needs analysis across all CHCP services. Enabling all services to be responsive to needs of people with Dementia.
Anyone concerned about their own health or other peoples health	Information Carer support Peer support	Information booklets identified, and available in GP practices  Peer support provision within Health Inequalities Gateways To, via Regeneration funding	Ensuring information is consistently available and accessible throughout public venues in Inverclyde.  Review of existing provision in tandem with further development of post diagnostic support	

Early Diagnosis and support  • for people concerned about their own or other people's memory problems	Memory assessment service Early diagnosis Post Diagnosis Support Continuity of support Involvement of carers and family	Register of people with Dementia in GP practices established, HEAT target achieved.  Improvement work with Mental Health Collaborative to improve process for diagnosis.  Post diagnostic support provided in conjunction with Alzheimer Scotland, via Health Inequalities Gateways To.	Review of work required for new HEAT target to be achieved by 2015/16 on expected rates of diagnosis, and post diagnostic support.  Older Peoples Mental Health Service redesign of services in primary care to support provision of service by GP's and wider primary care team.  Further development of post diagnostic support with Dementia Link Worker in OPMHT	Outcome of Scottish Government pilots in Post Diagnostic Support in South Glasgow, East Renfrewshire; Argyll and Bute will inform this element.  Identify opportunities to access Life Changes Trust for further development of peer support and sustaining community connections for people with Dementia.
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Living Well with dementia  • quality of life for people diagnosed with dementia	Specialist assessment & Treatment with the provision of:  • Management of stress & distress:  • Intermediate care  • Home care  • Housing with telecare  • End of life care  • Personal support/anticipatory plan  • Continuity of post diagnostic support  • Peer support	Redesign of older peoples mental health service – model complete.  Telecare accessible for people with Dementia piloted and implemented.  Liverpool Care Pathway implemented in inpatient psychiatric wards for older people.	Implementation of redesign, including liaison service to care homes.  Review of aids and equipment for people with Dementia within Reablement workstream of Reshaping Care for Older People, [RCOP].  Consideration of needs of people with Dementia within development of Intermediate model of care via RCOP.	Post diagnostic support development will also support this element, via introduction of the use of personal support plans to inform ongoing care.  Consideration of the specific needs of younger people with Dementia; and people with a Learning Disability and Dementia.
Acute illness	Inpatient dementia care:  • Dementia friendly care in general hospital  • Risk management  • Physical healthcare	Dementia Champion identified within IRH. Extension of liaison service in acute from Mental Health; Delirium guideline developed in Mental Health for implementation in acute sector.	NHS GGC Acute sector work plan.	