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Title of meeting: Health and Wellbeing Board

Subject: Portsmouth Dementia Action Plan 2014 - 2015

Date of meeting: 26 November 2014

Report by: Head of Integrated Commissioning Unit

Wards affected: All

1. **Requested by:** Cabinet Member for Health and Social Care.
2. **Purpose:** To update the HWB on the Portsmouth Dementia Action Plan 2014/15 and to set out the direction of travel for 2015/16.

3. Information Requested**Background**

- 3.1 According to research, dementia is one of the most severe and devastating disorders that we face today. It is a syndrome which describes a collection of symptoms, caused by a number of illnesses in which there is a progressive decline in multiple areas of function. Although dementia is primarily associated with old age, the syndrome also affects a significant number of people in earlier life.
- 3.2 It is estimated that 670,000 people in England are living with dementia, two thirds of whom live at home. An estimated 21 million people (42% of the population) know a close friend or family member with dementia. One in three people aged over 65 will have dementia by the time they die. Within the next 30 years the number of people in the UK with dementia is expected to rise to 1.4 million.
- 3.3 Objective one of the Portsmouth Joint Health and Wellbeing Strategy 2012/13 - 2013/14 is to enhance the quality of life for people with dementia. The strategy proposed a number of areas for action and these were translated into actions within the 14/15 Portsmouth Dementia Action Plan.

4. Policy context

- 4.1 Growing awareness of the scale of the dementia challenge has led to the development of a number of policy documents:

- [Living Well With Dementia - A national dementia strategy, DoH, February 2009](#)

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- [Quality outcomes for people with dementia: Building on the work of the national dementia strategy, DoH, September 2010](#)
- [The Prime Minister's Challenge on Dementia: Delivering major improvements in dementia care and research by 2015, DoH, March 2012](#)
- [The NHS mandate, a mandate from the Government to the NHS Commissioning Board; April 2013 to March 2015, November 2012](#)

4.2 Each of these documents build on the 2009 national dementia strategy, setting out priorities and areas for service improvement in order to help people with dementia live better lives.

4.3 Domain two of the NHS Outcomes Framework (Enhancing quality of life for people with long term conditions) includes a two part measure. The first part measures diagnosis rates for people with dementia. The National Institute for Health and Clinical Excellence (NICE) has published a number of standards, guidelines and guidance tools for dementia.

5. Dementia prevalence

5.1 Prevalence forecasts for Portsmouth in 14/15, taken from the DPC¹ show

- 2186 residents will have some form of dementia
- 55% (1202) will be mild, 32%(700) will be moderate, 13% (284) will be severe
- About a third (772) will be male and two thirds (1414) will be female
- 51 will be early onset (<65 years old) and 2135 will be late onset (>65 years old)
- 1703 will be living in the community and 483 will be living in residential care

5.2 In 2013/14 provisional data shows that 63.9%² (1510 people) of the local predicted prevalence had a diagnosis, ranking Portsmouth 1st within the Wessex region and 17th in England for diagnosis to prevalence rate. The Portsmouth CCG target is for this to increase to an ambitious 80% (1753 people) by the end of March 2015.

5.3 NHS England has a national ambition that 66.7%³ of the estimated number of people with dementia will have a diagnosis and access to post diagnostic support by March 2015.

5.4 To achieve the local diagnosis rate aspiration of 80% by March 2015, Portsmouth will be working with our GP practices in primary care to implement a number of projects which are:

¹ [Dementia prevalence calculator \(By clinical commissioning group\), adjusted for care homes in the area.](#)

² Based on Dementia prevalence calculator v.3 which uses GP practice size DPC v.1 uses ONS population size. Using DPC v.1 Portsmouth diagnosis rate is 70.49%

³ Based on DPC v.3

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- **Introduction of an Enhanced Service Scheme for dementia identification** of 'at risk' patients from their registered list and offer a dementia assessment. This will enable timely support for those with identified dementia.
- **Data Harmonisation** - A systematic audit of individual practice register of patients diagnosed with dementia from their local Memory Clinic provider to ensure that GP register has been updated with the suitable Read Code (to the patient's clinical record). This will ensure accurate demand for services and will ensure that the right community support is put in place.
- **Care Home Case Finding** – A specifically developed project to assess Care Home residents who do not have a recorded diagnosis of dementia which is supported by community and district nurses. This will enable effective support and communication with those residents subsequently diagnosed with dementia within the care home setting.
- **Dementia Toolkit** – A regional toolkit has recently been published that offers solutions to common issues and signposting to the relevant resources. This has been circulated to GP practices.

5.4 There is still confusion on the methodology for calculating diagnosis rates based on the population denominator used by the two available diagnosis prevalence calculator's v.1 and v.3 which distorts the diagnosis rates:

- ONS data suggest England **resident** population is in the order of 53.5 million and this is the population on which the NHS outcomes framework indicator is based and the Dementia prevalence calculator v.1;
- But the sum of the CCG **registered** population is around 55.5 million, meaning CCGs could achieve a **slightly lower dementia diagnosis rate** for their registered population while collectively achieving diagnosis aspiration on the basis of resident population.

For Portsmouth our ambition is 80% for 14/15 using DPC v.1 and would be approximately 75% using DPC v.3. This demonstrates that care is required to interpret the diagnosis rate in absolute terms; as such Portsmouth will continue to report diagnosis rate using both calculators.

6. Current position and direction of travel

- 6.1 Currently services are offered by a range of providers in the city. Specialist secondary mental health services for Portsmouth's older people are principally provided by Solent NHS Trust. This includes dementia services supporting people both over 65 yrs. (late onset dementia) and people under 65 yrs. (early onset dementia).
- 6.2 Portsmouth City Council provides a range of in house services and commission residential and domiciliary care from the third sector. The Alzheimer's Society,

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Solent Mind and Age UK are also very active in the city, providing advice, information and a range of independent services.

7. Dementia Action Group

- 7.1 Portsmouth is fortunate in that it has a proactive Dementia Action Group (DAG) which monitors the progress of the dementia action plan and offers advice and professional appraisal of innovation in dementia services. The group meets monthly and is attended by partners from NHS, Voluntary Community Sector, Local authority and Portsmouth Hospital Trust.
- 7.2 The DAG has responsibility for implementing the dementia national dementia strategy at local level.
- 7.3 The DAG priority is to involve service users and carers in developing and monitoring the plan in line with the Portsmouth Service User and Carer Charter. This is facilitated through engagement with the dementia network and ensuring the network is fully engaged in the development of the plan for 15/16.

8 Review of achievements against the 14/15 dementia action plan

- 8.1 Through 14/15 - a number of pilot schemes were implemented to explore ways of meeting the future needs of people with dementia and their carers. These are;

- **Solent Mind - Dementia Reablement Advisors** Supporting people with dementia and their carers through admission / discharge process at QA hospital.
71 referrals have been received (August- October). 351 in total since outset of service, 28 completed 'This is Me' documents (August- October). 189 in total since outset of service which is a simple and practical tool that people with dementia can use to tell staff about their needs, preferences, likes, dislikes and interests.

- **Housing 21 - Dementia Voice Nurse** - Providing support for carers and people with severe dementia and/or end of life care.
For the period of 1st August to 1st November, the Dementia Voice Nurse received 24 referrals as a result the service this saved 14 hospital bed days through effective discharge home, 294 days of nursing/care home bed days through supporting individuals to remain at home and avoiding 4 ambulance conveyances.

- **Alzheimer's Society - Dementia Cafes, Carers information and support programme (CRISP) & Dementia Network** - Provides a 'drop in' café and has established a dementia network of member organisation and individuals.
A total of 55 Carers have attended the 6 week (CRISP) programme and as a result 100% felt more informed and supported in their caring role.

There have been on average 10 visitors to Dementia café in the North and South of the City per week. Those attending the café have commented that they felt less socially isolated and more informed of dementia support.

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The Dementia network is forum attended by providers, carers and service users and is a system for communicating the activity to deliver the dementia action plan and raise awareness of dementia with the community. The network has 33 members who meet bi-monthly.

- **Alzheimer's Society - Dementia Adviser Service** - Information and signposting service for people affected by dementia this was launched in May 2014.
The service has received over 400 enquires and has provided advise and sign post interventions to 79 people with dementia and their carers last quarter. As a result of the service 88.8% felt more involved in their community and felt improved wellbeing.

8.2 All of the above pilots will continue up to the end of April 2015. It is therefore essential that during, November 2014, they are all reviewed to assess effectiveness and impact on providing positive outcomes. The findings from this review will be used to inform future commissioning arrangements.

8.3 **Other achievements in 14/15 include;**

- The completion of an independent review of the mapped dementia pathway. This has been undertaken by the University of East London. Findings will be available November 2014 and will used to consider our community support needs for 15/16
- Initial programme dementia friendly community initiatives, including awareness raising and training for businesses and communities and implementation a dementia friendly community recognition process.
- The roll out of 'virtual dementia tour' to Portsmouth City Council residential and care home staff. This scientifically proven training method provides a greater understanding of dementia through the use of patented sensory tools and instruction and is a window into the world people with dementia live and will assist effective communication techniques to care for people with dementia.
- Elder Friendly Community Pharmacy - 80% of Portsmouth community pharmacy have completed an Elder friendly workbook to outline specific activity to support people with dementia and their carers within local pharmacy such as signage, dementia friends trained staff and other environmental factors.
- The completion of a review of the use of telecare for people in the early stages of dementia which recommended the use of telecare would enable individuals to live independently longer using assisted technology such as GPS tracking and motion sensors. A decision on the use is pending waiting implementation of Better Care Fund work streams.
- The opening of 'Memory Lane' which is an allocated room at Queen Alexander hospital providing weekly information and advice drop in for service users and carers which is facilitated by representatives from Portsmouth Hospital Trust, PCC, Carers Centre, Solent Mind, Alzheimer's Society & Housing 21.
- The first draft of the Dementia Action plan for 15/16 due for completion January 2015.

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- Introduction of a directed enhanced service scheme for Dementia Identification within primary care to review the accuracy of the dementia diagnosis coding, to identify new people with dementia and provide the appropriate level of support.

8.4 The latest version of the Portsmouth Dementia Action plan can be found online at <http://www.portsmouth.gov.uk/yourcouncil/29971.html>

8.5 **Direction of travel for the future 15/16**

- Dementia Champion/s identified within Portsmouth City Council
- Working with colleagues in Learning and development to roll out a programme of Dementia Friends training across Portsmouth City Council and Portsmouth Clinical Commissioning Group to raise awareness of dementia.
- Consultation and self-assessment of training needs in care and nursing homes and improvement plan developed
- Establish a local Dementia Action Alliance to create a Dementia Friendly Community - involving local organisations who may be influential in raising awareness of dementia amongst their staff and who can make a real difference by improving environments where we live, work and socialise.
- Subject to the review of findings from the dementia pathway and pilot schemes commission appropriate community support services - Yet to be determined.
- Establish a programme of work with primary care to support dementia diagnosis including coding harmonisation and introduction of effective screening tools.
- Working in collaboration with University of Portsmouth Ageing Network.

Background list of documents: Section 100D of the Local Government Act 1972

The following documents disclose facts or matters, which have been relied upon to a material extent by the author in preparing this report:

- [Living Well With Dementia - A national dementia strategy, DoH, February 2009](#)
- [Quality outcomes for people with dementia: Building on the work of the national dementia strategy, DoH, September 2010](#)
- [The Prime Minister's Challenge on Dementia: Delivering major improvements in dementia care and research by 2015, DoH, March 2012](#)
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