# WIRRAL COUNCIL

# HEALTH AND WELL-BEING OVERVIEW AND SCRUTINY COMMITTEE

# 14<sup>TH</sup> JANUARY 2012

SUBJECT:	DEVELOPMENTS IN DEMENTIA CARE
WARD/S AFFECTED:	ALL
REPORT OF:	NHS WIRRAL CCG
<b>KEY DECISION?</b> (Defined in paragraph 13.3 of Article 13 'Decision Making' in the Council's Constitution.)	NO

# 1.0 EXECUTIVE SUMMARY

As requested at the last meeting of this Committee, this paper sets out some of the recent developments led by NHS Wirral CCG with regard to dementia care, and some of its plans moving forward.

# 2.0 BACKGROUND AND KEY ISSUES

#### 2.1 Work to date

Dementia care has been identified as a main area of work and investment for the CCG. We have established a multi-disciplinary Dementia Strategy Group, spanning health and social care, and the NHS and voluntary sector, which has developed a plan for meeting the National Dementia Strategy. Some of our key areas of work are around integrating the efforts of health and social care, as we recognise that are growing elderly population means that we can no longer rely upon long term care, and that we need to work together to make the most of our shared resources. We aim to share and seek feedback on this plan as widely as possible, and to launch our strategy in the Spring. This work is led by Dr Peter Arthur, who is the CCG GP Lead for Dementia, and supported by Christine Campbell, one of the Chief Officers of the CCG. A Dementia Forum has been established and feeds into the Strategy Group brings together a wide range of people with an interest in dementia, including patients and carers, voluntary sector organisations, and champions for the elderly population such as the Older People's Parliament.

One of the key challenges will be to ensure that we can identify as many people with dementia as early as possible, so that people are able to live independent and fulfilled lives in the community. We have been working with the Memory Assessment Service to develop a shared care model with general practice, so that the role of the specialist service is to assess, diagnose and stabilise patients on any medication or care plans, and their own GP takes on the role of ongoing prescribing and monitoring. GPs are supported to do this through ongoing training and support from the service. This gives the service more capacity to offer more specialist care to a greater number of people, with reduced waiting times.

One of the three consortia has been working with its GP practices to pilot an over 65s Healthcheck, whereby each participating practice is required to invite each of its patients over 65 for an annual review, to include a brief memory assessment, and determining carer responsibilities, in order that appropriate referrals may be made and support given. This is currently being evaluated but it is hoped that it may be rolled out across the Wirral.

A tremendous amount of partnership working is taking place with the third sector, and this is something that we seek to augment through the dementia strategy. The CCG currently

commissions services including the following from the voluntary sector, which provides invaluable support to not only people with dementia, but also their families and carers:

- Dementia Outreach service
- Support Home from Hospital Service
- Early Onset Dementia service
- Alzheimer's Community Link worker

There is much that we are doing as commissioners to support our providers in training their staff to deliver high quality care to our elderly population. For instance, we will be introducing a CQUIN (commissioning for quality and innovation – a contractual lever that requires providers to go above and beyond their core contractual requirements) in our provider contracts regarding not only delivering dementia awareness training, but also monitoring the impact of this training, and ensuring that it is embedded in staff annual training plans. Furthermore, we are working closely with the care home sector and their staff to ensure appropriate use of antipsychotic medication for older people. We are in the process of rolling out dementia management training to our GP Practice clinical staff, to ensure that we can diagnose as many patients as early as possible, and equip our practices to manage these patients in the community safely and effectively.

With regard to carers, the CCG works very closely with WIRED on a range of initiatives for identification of carers, and support for carers. For instance, we have commissioned short breaks for carers, and have been doing significant work with our practices, through WIRED, to develop carer registers, encourage people to see and identify themselves as carers, and to signpost carers to any support that they may need. We are also working with Alzheimer's Society to develop education sessions for carers and families of those with dementia, in order to help people to understand the effect that the condition has upon a person, and so that the support offered is the most appropriate, and people feel empowered to continue to care.

### 2.2 Future plans

Dementia and Carer support are both key priority areas within the NHS Operating Framework, and in the CCG Strategy. Key areas of work moving forward into 2013/14 are planned as follows:

- increased use of Telehealth to support patients in the home
- promotional campaign to identify early signs of dementia
- dementia liaison staff within the hospital to ensure care for patients with dementia can be tailored to their needs, and that no one needs to stay in hospital for longer as possible
- stepped care within the community, and home treatment support
- working with the Local Authority to explore the care that is available for patients with Learning Disabilities and dementia
- focusing on patients with dementia that live alone, to enable them to remain independent
- working with providers to develop 'dementia friendly communities'
- developing registers of patients with mild cognitive impairment, and facilitating regular review of these patients, to identify and treat dementia as early as possible

The CCG will continue to work with its patients and stakeholders to ensure that its planned areas of work meet national and local targets, and are in the best interests of our local population.

### 3.0 RECOMMENDATION/S

Members of the Committee are asked to note the content of this report.

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