WIRRAL COUNCIL

HEALTH AND WELL BEING OVERVIEW AND SCRUTINY COMMITTEE - 22 JUNE 2009

REPORT OF THE COMMITTEE CHAIR - CIIr Ann Bridson

DEMENTIA SCRUTINY REVIEW - PROGRESS REPORT

EXECUTIVE SUMMARY

This report provides an update on progress for the Dementia Scrutiny Review.

1. Background

- 1.1 The Hospital Discharge Scrutiny Review was held during 2008/9, with the final report being presented to the Social Care & Health Overview and Scrutiny Committee meeting held on 25th March 2009. During the evidence-gathering stage of the review, issues were raised with the panel members regarding support for people with dementia in hospital and in the community.
- 1.2 The Final report of the Hospital Discharge Scrutiny Review included the following section:
 - 6.7 Needs of Specialist Groups Dementia patients

Evidence, particularly from the voluntary sector, has raised a number of issues relating to patients with dementia and their treatment in hospital. A representative of a third sector organisation commented that:

"As a society, there is a need to look at creative alternatives to keep people at home. At present, people are being admitted into residential care earlier than they really need to".

The discharge process for dementia patients is often longer than average. To many such patients, the environment is confusing and they do not understand why they are in hospital. However, the point was made to the Panel that the real issue is that there is often no adequate support available to keep the person with dementia in their own environment.

The Panel have suggested that further scrutiny, involving Cheshire and Wirral Partnership Trust, should take place into issues for patients with dementia. Some specific points that the Panel would like to consider further include:

- ensuring as short a stay in hospital as possible for a person with dementia.
- reducing the number of admissions of people with dementia, that is, try to treat them in their own home.
- speed up the Social Services processes for this client group.

With respect to the ability to assist patients with dementia from having to go into hospital, a professional from the third sector commented that for some patients, a 'virtual ward' approach would be more suitable:

"Sometimes there is no alternative to a stay in hospital, for example, a broken leg. However, it can often be the case that people with dementia end up in hospital because a carer is no longer able to look after them, for example, because the carer is ill, stressed, and so on. The real issue is that there is no support to available to keep the person with dementia in their own environment". 1.3 During a discussion of the Committee Work programme at the Social Care & Health Overview and Scrutiny Committee meeting held on 25th March 2009, the Committee resolved that 'the Chair and Spokespersons arrange a meeting to discuss the idea of scrutinising the area of 'patients with dementia in general hospitals'.

2. Scope of the Review

- 2.1 Further to the committee meeting held on 25th March 2009, the Spokespersons have met to discuss a possible review. A draft scope document is attached (see Appendix 1) for consideration by the Committee. It is proposed that the Review Panel will consist of the three Spokespersons (Councillors Ann Bridson, Sheila Clarke, Denise Roberts).
- 2.2 The Panel is recommending that this scrutiny review focuses on the following issues:
 - Management of patients with dementia in an acute hospital setting.
 - Impact of patients with dementia on other patients during a stay in hospital.
 - Are there alternative approaches which allow more patients with dementia to be cared for outside an acute hospital setting?
 - Is it possible to keep more people with dementia in their own home for as long as possible?

3. Evidence Gathering and the Report

The panel proposes to use a number of methods to gather evidence, at all times recognising the importance of patient confidentiality in this piece of work.

- 3.1 Meetings with officers
 - Meetings will be arranged for the panel members to discuss relevant issues with a number of key officers from each of:
 - Wirral NHS
 - Wirral University Hospital Trust
 - Cheshire and Wirral Partnership NHS Foundation Trust
 - Wirral Borough Council.
- 3.2 The Panel will seek to obtain the views of patients and carers though Carers Groups, the Older Peoples Parliament and advocacy groups such as Alzheimers Society and Age Concern.
- Further written evidence will be gathered from recent Committee reports, relevant Department of Health reports and strategies as well as from other Councils.
- 3.4 It is planned that the final report for the Dementia Scrutiny Review will be available for the meeting of the Health & Well Being Overview and Scrutiny Committee on 10th November 2009.

RECOMMENDATIONS

- (1) That the Committee approve the Scope for the Dementia Scrutiny Review, as detailed in Appendix 1.
- (2) That the Panel members, for the new municipal year, be confirmed as Councillors Ann Bridson, Sheila Clarke and Denise Roberts.

Ann Bridson, Chair of Health & Well Being Overview and Scrutiny Committee 09/06/09)

Appendix 1: Scope Document for the Dementia Scrutiny Review

Date: 8th June 2009

Review Title: The 'Care of People with Dementia in Hospital' Scrutiny Review

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Panel members: Cllr Ann Bridson Cllr Denise Roberts Cllr Sheila Clarke	0151 201 7310 mobile: 07759 587597 0151 652 3309 0151 608 1154
Other Key Officer contacts: Michael Monaghan, Wirral University Teaching Hospital	

1. Which of our strategic corporate objectives does this topic address?

- 1.1 To Improve Health and Well-being for all, ensuring people who require support are full participants in mainstream society, in particular:
- To Improve support for those with mental health problems
- To Promote greater independence and choice

2. What are the main issues?

- 2.1 Management of patients with dementia in an acute hospital setting.
- 2.2 Impact of patients with dementia on other patients during a stay in hospital.
- 2.3 Are there alternative approaches which allow more patients with dementia to be cared for outside an acute hospital setting?
- 2.4 Is it possible to keep more people with dementia in their own home for as long as possible?

3. The Committee's overall aim/objective in doing this work is:

- 3.1 To improve care management in an acute hospital setting for both patients with dementia and for other patients.
- 3.2 To identify possible alternative approaches to hospital admission for people with dementia.

4. The possible outputs/outcomes are:

- 4.1 Improved services in a hospital setting for patients with dementia.
- 4.2 Better experience for general patients who have interaction with patients with dementia.
- 4.3 Identify possible alternatives to acute hospital admission.
- 4.4 Ensuring that assessment and discharge of patients with dementia is effective and in the shortest possible timescale.
- 4.5 Reducing the number of admissions of people with dementia.
- 4.6 Assisting people with dementia to maintain their life skills.
- 4.7 Ensuring that patients with dementia are safeguarded.

5. What specific value can scrutiny add to this topic?

To use the experiences of those who work closely with people with dementia (such as hospital managers, advocates, family / carers, charitable / voluntary organisations and the Older Peoples Parliament) in order to identify any changes which would lead to the outcomes listed in section 4 above.

6. Who will the Committee try to influence as part of its work?

- 6.1 Wirral University Teaching Hospital
- 6.2 Wirral NHS
- 6.3 Cheshire and Wirral Partnership NHS Foundation Trust
- 6.4 Department of Adult Social Services, Wirral Council
- 6.5 Appropriate Cabinet members, Wirral Council

			quiry?

Aim for the final report to be available before the Health and Well-being Scrutiny Committee due to be held on 10th November 2009

8. What category does the review fall into?							
Policy Review	Х	Policy Development					
External Partnership	Χ 🗆	Performance Management					
Holding Executive to Account □							

9. Extra resources needed? Would the investigation benefit from the cooperation of an expert witness?

The review will be conducted by councillors with the support of existing officers. However, the panel are looking for advice from people with expertise on this topic.

10. What information do we need?

- 10.1 Secondary information (background information, existing reports, legislation, central government documents, etc).
- 10.1.1 Recent Committee reports.
- 10.1.2 Relevant evidence that arose during the Hospital Discharge Scrutiny review.
- 10.1.3 Relevant Department of Health documents, including the National dementia Strategy.
- 10.1.4 Reports from other councils into similar topics.

10.2 **Primary/new** evidence/information

- 10.2.1 Experience of carers / family members.
- 10.2.2 Experiences gathered from support groups, charitable / voluntary organisations and the Older Peoples Parliament.
- 10.2.3 Interviews with key officers.
- 10.2.4 Relevant statistics on admissions of patients with dementia.

10.3 Who can provide us with further relevant evidence? (Cabinet portfolio holder, officer, service user, general public, expert witness, etc).

Contacts may include:

Carers and family members.

Carers Groups

Age Concern (including the Devonshire Centre)

Sue Newnes (Wirral Alzheimers Society)
Other charitable / voluntary organisations
Ken McDermott and other
representatives from the Older Peoples
Parliament.

Wirral NHS

Tina Long (Director, Strategic Partnerships) Debbie Mayer (Acting Deputy Director, Strategic Partnerships) Jenny McGovern (Integrated Commissioning Manager) Heather Rimmer (Interim Head of Integrated Commissioning and Mental Health)

Wirral University Teaching Hospital

Michael Monaghan (Director, Nursing and Midwifery)

Lesley Hutchinson (Patient Flow Manager)

Marie Jeffries (Lead nurse for Medical Directorate)

DME Consultants

Cheshire and Wirral Partnership NHS Foundation Trust

Peter Cubbon, Chief Executive Avril Devaney, Director of Nursing, Therapies and Patient Partnership Dr Andrew Ellis, national expert

Department of Adult Social Services, Wirral Borough Council

Jeanette Hughes, Team Manager Pete Gosling, Principal Manager

10.4 What specific areas do we want them to cover when they give evidence?

10.4.1 Current arrangements

10.4.2 Areas for improvement

10.4.3 Possible management of people with dementia outside the acute hospital setting.

- 11. What processes can we use to feed into the review? (site visits/observations, face-to-face questioning, telephone survey, written questionnaire, etc).
- 11.1 Discussion with family / carers and support groups, etc..
- 11.2 Desk-top analysis
- 11.3 Interviews of staff
- 11.4 Possible written questionnaire aimed at family / carers (similar to that produced on Hospital Stays by the Older Peoples Parliament)
- 12. In what ways can we involve the public and at what stages? (consider whole range of consultative mechanisms, local committees and local ward mechanisms).
- 12.1 Family and carers
- 12.2 Relevant organisations, for example, Older Peoples Parliament, Age Concern and Carers groups