



Nottinghamshire Dementia Strategy 2010-2015



Image from NHS pictures
Updated September 2012

Contents

FOREWORD

1. Introduction	1
1.1 What is Dementia?	1
1.2 Who is affected by dementia?	1
1.3 What is the purpose of this strategy?	2
1.4 Were the public involved in developing these plans?	3
2. Current services and gap analysis	4
Diagram 2.1 Current service provision	5
Diagram 2.2 Opportunities to improve dementia care in Nottinghamshire	7
3. Commissioning plans	8
4. What have we achieved already?	10
Example 1 improving dementia awareness	10
Example 2 Acute care liaison team at Kings Mill Hospital	11
Example 3 Improving GP awareness and understanding	12
Example 4 Nottinghamshire County Dementia Outreach Team	13
Appendix: National Dementia Strategy Summary	14
Contact details	20

Foreword

Dementia is one of the biggest challenges facing our health and social care economy. Dementia affects people of all ages, however the greatest prevalence is in older people. In Nottinghamshire we face the future challenges of an aging population and in turn a greater number of people living with dementia. As dementia has an impact on more and more families across the county our health and social care system will be under greater pressure, so it is important that we plan for increased demand and better support for people living with dementia and their carers.

Our vision is for people in Nottinghamshire to live well with dementia. We will promote a better public and professional knowledge about dementia to remove the stigma that is currently associated with it, offer early diagnosis and intervention, and ensure quality accessible services effectively meet the needs of people with dementia and their carers.

To achieve the good quality services that people with dementia and their carers need and deserve we will have to work together with a wide range of health and social care partners across private, public and voluntary sectors. Despite the challenges of financial pressures in today's health and social care economy, we remain committed to delivering this strategy and giving people with dementia the care and support they need to enable them to live life to the full.

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1. Introduction

1.1 What is dementia?

‘Dementia’ is a term used to describe a number of illnesses where there is a progressive decline in multiple areas of function including loss of memory, mood changes, communication problems and losing ability to reason. People with dementia may also experience depression, psychosis, aggression and wandering. Dementia can have a devastating effect on those with the disorder and their families who are often carers.

1.2 Who is affected by dementia?

In Nottinghamshire there are **9,700 people predicted to have dementia**, however only 1/3rd of people with dementia have a formal diagnosis. By 2025 the over 65 population will go up by 50% and numbers of people with dementia in Nottinghamshire are predicted to grow to nearly 15,000.

Dementia mainly affects older people however, it can affect younger people and in Nottinghamshire there are **over 200 under the age of 65 with dementia**. It is important that our services are appropriate to the needs of people of all ages with dementia.

1.3 What is the purpose of this strategy?

This strategy sets out Nottinghamshire's response to Living well with Dementia: A national Dementia Strategy (DH, 2009). Its purpose is to outline the **priorities for how services for people with dementia will be improved** in Nottinghamshire and to share some of the good practice that is already taking place.

This document has been produced in the context of the National Dementia Strategy (NDS) which outlines the need for improvement in dementia services across three key areas;

1	Improved public and professional awareness and understanding of dementia
2	Earlier diagnosis and intervention
3	A higher quality of care for people living with dementia and their carers

The NDS also identifies 17 objectives (Appendix 1) to be implemented locally to make a difference to dementia services and Nottinghamshire's plans have been produced in line with these objectives.

1.4 Were people with dementia and their carers involved in developing these plans?

Nottinghamshire County's priorities also reflect the views of local people who are impacted by dementia. Carers, people with dementia and a range of representatives from across dementia services came together for a series of commissioning workshops which took place between August 2009 and March 2010. During these workshops current service provision and the gaps in the system were mapped and local priorities for dementia services were developed.

1.5 Nottinghamshire Health and Well-being Strategy

More information about dementia in Nottinghamshire can also be found in the Joint Strategic Needs Assessment and the Health and Well-being strategy, link below

<http://www.nottinghamshire.gov.uk/caring/yourhealth/health-and-wellbeing-board/strategy/>

2. Current Services and gap analysis

Workshops held across Nottinghamshire with professionals and the public enabled us to map current provision of services for people with dementia and identify the gaps. Diagram 2.1 shows current health and social care services under four headings;

Level 1: Raising awareness and early diagnosis

Level 2: Moderate support at home

Level 3: intensive support at home

Level 4: Care home or hospital care

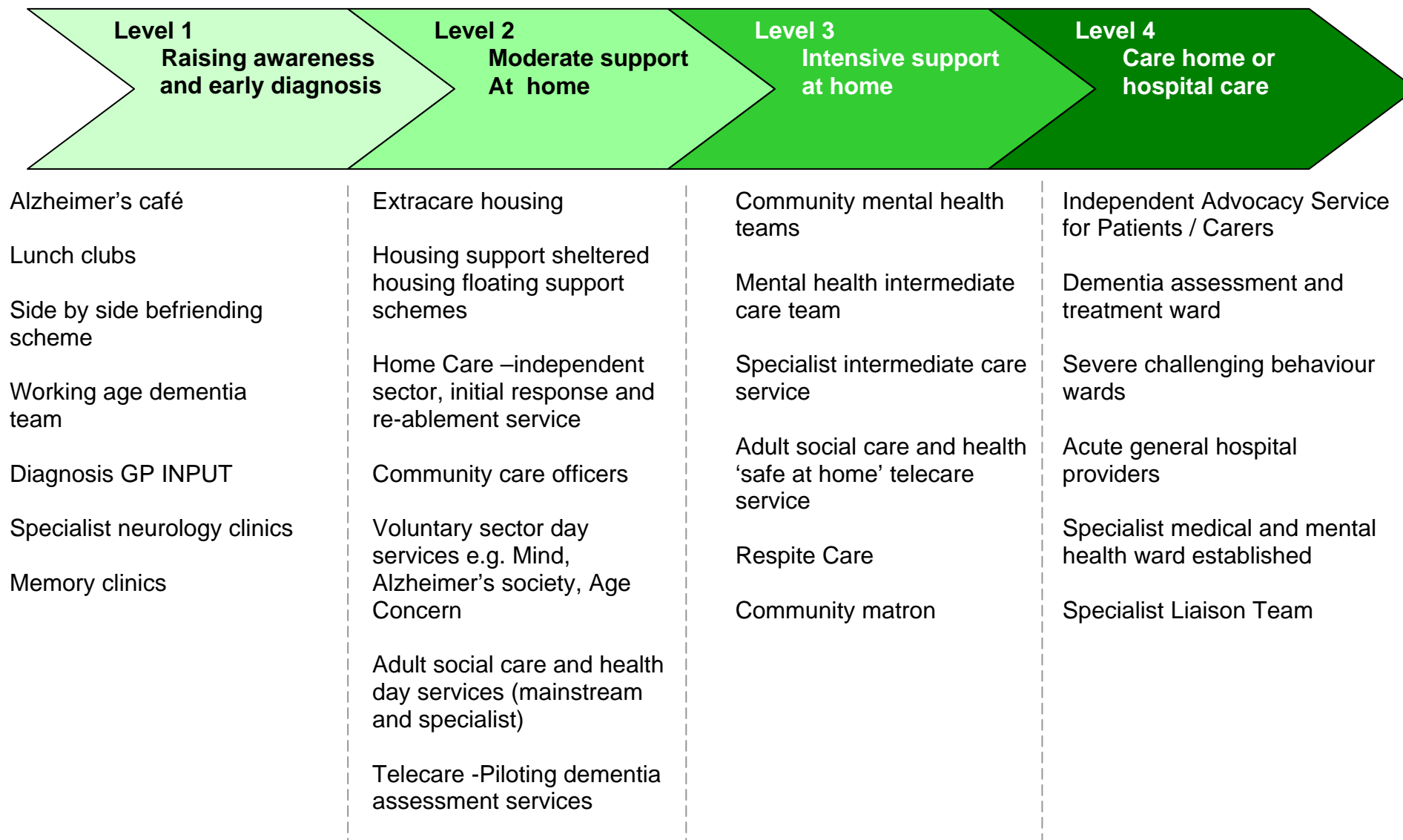
Diagram 2.2 shows the gaps in dementia services in Nottinghamshire and areas that need improvement. These have been mapped under the same four headings.



Image from dementia commissioning workshop in Nottinghamshire

Diagram 2 1

Current service provision



Current service provision continued

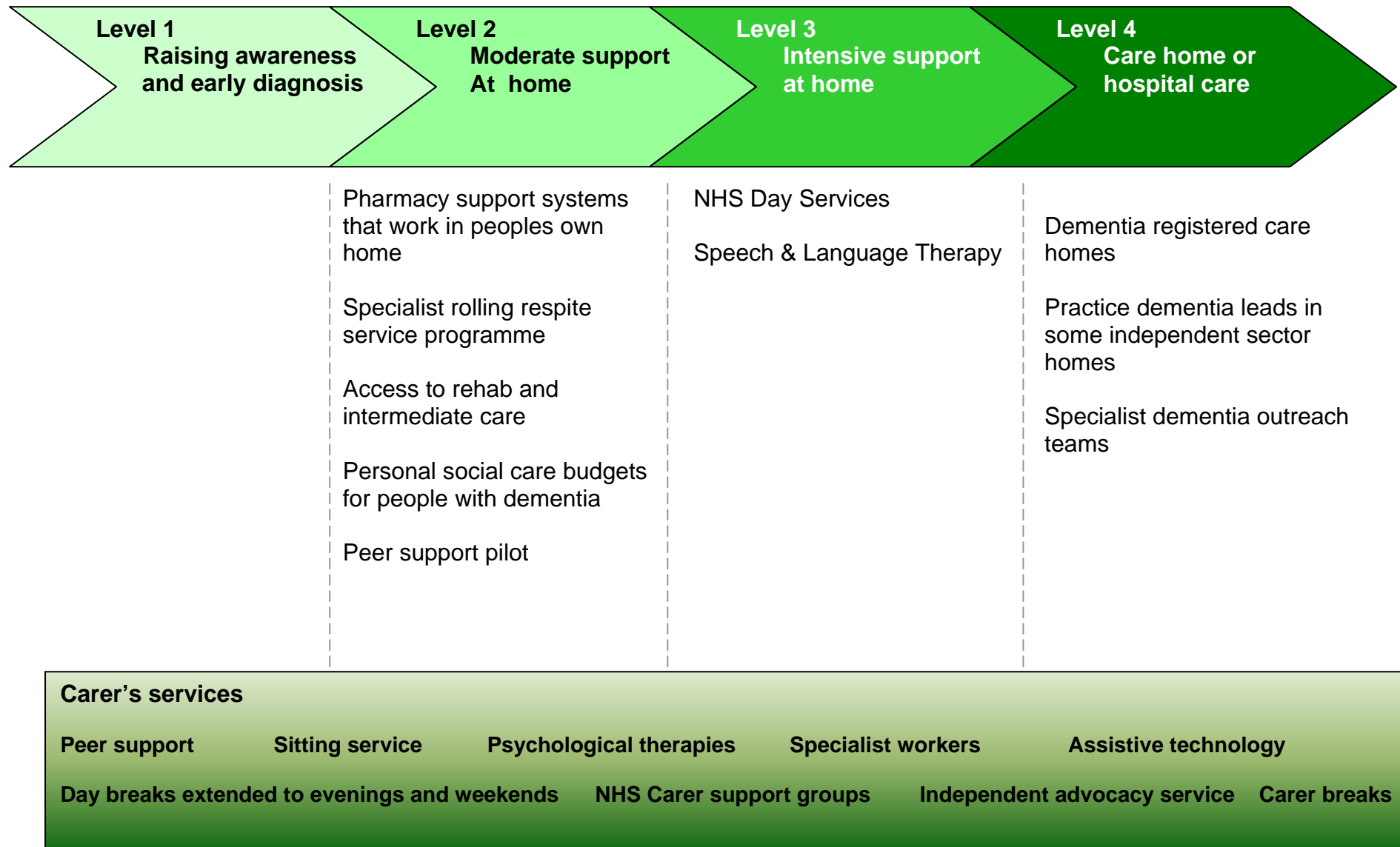
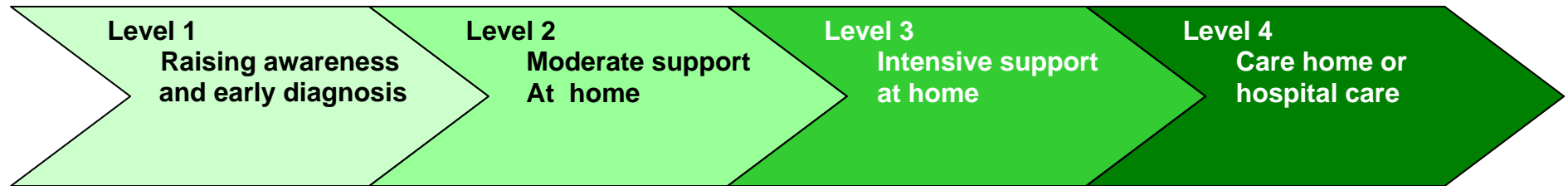


Diagram 2.2 Opportunities to improve dementia care in Nottinghamshire



Better support to plan for the future

Provide support after diagnosis

Enhance general GP awareness

Early intervention opportunities targeted at BMI communities

High quality memory assessment services

Support after diagnosis

Improve continuity of care workers

Improve access to housing

Improve access to re-ablement

Train staff in universal services

More mental health intermediate care

Sufficient and appropriate range of day care provision

Improved support for carers

Respite services need to be able to support people with high needs

Improve quality & consistency of intensive home support services / staff

Dementia specific training for staff in care homes and hospitals

Utilise carers' skills / knowledge as input into staff training

Mental health Liaison services

More person centred care in care homes for people with dementia

Improve support for individuals with challenging behaviours and offer training

3. Commissioning plans 2012-13

What do we want to achieve?	How we will do this?	What will this mean for people affected by dementia?
1. Raise public and professional awareness of dementia	<ul style="list-style-type: none"> - Workforce awareness training events -Dementia training as a requirement of provider contracts via a CQUIN¹ - National Dementia awareness campaign 	People with dementia living in Nottinghamshire will know the key signs and symptoms of dementia. This will lead to earlier diagnosis allowing people with dementia to live a better life for longer.
2. Good quality early diagnosis, support and treatment for people with dementia and their carers	<ul style="list-style-type: none"> - memory services have been assessed and new investment is being made in 2012-13 to develop best practice model. - guidelines on dementia for GPs will be reviewed again taking into account changes to prescribing of anti-dementia drugs 	<p>All people in Nottinghamshire with dementia will have access to care that gives them</p> <ul style="list-style-type: none"> • A high quality specialist assessment • An accurate diagnosis delivered sensitively to the person with dementia and their carer • Access to appropriate care, support and treatment after diagnosis.
3. Effective support for people with dementia	<ul style="list-style-type: none"> - the dementia advice and support service has been reviewed and is being extended - Dementia information prescriptions. - mental health intermediate care is being developed across the whole County 	<p>People with dementia and their carers will be able to access support.</p> <p>More people with dementia will be able to stay in their own homes.</p>
4. Easy access to care, support and advice after diagnosis	<ul style="list-style-type: none"> - the dementia advice and support service has been reviewed and is being extended 	People with dementia and their carers will have help to access the right information, care and support.
5. Develop structured peer support and learning networks	<ul style="list-style-type: none"> - the peer support pilot has concluded. From this Carer Information Programmes have been developed 	<p>People with dementia will Get support from local people with experience of dementia.</p> <ul style="list-style-type: none"> • Take an active role in developing services
6. Improve community personal support services for people living at home	<ul style="list-style-type: none"> - Work to promote telecare for people with dementia – use of Just Checking - Improve homecare for people with dementia -Personal budgets 	<p>There will be a range of flexible effective services to support people with dementia and their carers at home. Services include;</p> <ul style="list-style-type: none"> • Early intervention • Reablement • Assistive technology

7. Implement the carers strategy for dementia carers	<ul style="list-style-type: none"> - Increase number of people having carers assessments - Individual support plans for all carers who want them - the new psychological therapies services will specify working with carers - Greater variety of carers breaks available 	<p>Carers will;</p> <ul style="list-style-type: none"> • Have an assessment of their needs • Get better support • Be able to have good quality short breaks
8. Improve the quality of care for people with dementia in hospitals	<ul style="list-style-type: none"> - the national CQUIN¹ requires acute hospitals to screen, assess and refer people who may have dementia - Nottingham University Hospitals and Sherwood Forest Hospitals will pilot a Rapid Access and Integrated Discharge service (RAID) including people with dementia 	<p>Care for people with dementia in general hospitals will get better. Hospitals will work closely with older people's mental health teams to ensure appropriate care is given. People with dementia will be discharged sooner.</p>
9. Improve intermediate care for people with dementia	<ul style="list-style-type: none"> - Mental Health intermediate care will be extended to cover the whole County 	<p>There will be more care to support people with dementia to stay at home.</p>
10. Improve the quality of care for people with dementia in care homes	<ul style="list-style-type: none"> - Ensure registered dementia care homes have a lead for dementia care. - Improve quality through care home contracts - Introduce specialist dementia outreach into care homes 	<ul style="list-style-type: none"> • Better care for people with dementia in care homes • Clear responsibility for good quality dementia care • Clear requirements for how people will be cared for which homes will be checked against regularly. • Visits from specialist mental health teams
11. Improve end of life care for people with dementia	<ul style="list-style-type: none"> - Develop an end of life pathway that initiates end of life planning early in the dementia progression. 	<p>People with dementia and their carers will be involved in planning end of life care. People with dementia will have access to end of life care</p>
12. Reduce the use of antipsychotic medication	<ul style="list-style-type: none"> - guidelines for challenging behaviour have been revised - Local CQUIN¹ to audit prescribing in mental health 	<ul style="list-style-type: none"> • Reduce inappropriate use of antipsychotic drugs. • More person centred care • National audit shows reduction in prescribing

1. CQUIN – commissioning for quality and innovation in contracts

4. What have we achieved already?

Significant work has already taken place across the county in response to the National Dementia Strategy. Some examples of good practice have been included below to demonstrate local determination to improve services for people with dementia.

Example 1: Improving Dementia Awareness Nottinghamshire County Council

What are we doing?

We are developing and testing a dementia training programme for care homes and home care providers.

We are starting by testing the programme on 13 care providers, 800 staff.

Training has two parts

- E-learning to help staff develop knowledge of all aspects of dementia including Person-centred care
- Knowledge is built on with face to face learning events where staff learns about the experience of dementia and how to achieve better outcomes for people with dementia.

What are the benefits?

- Staff in care homes and home care services will increase their knowledge and understanding of dementia.
- Staff will learn how to use simple activity to build positive connections.
- Staff will value each individual and ensure person-centred care is provided.
- Quality of care for people with dementia in care homes and day care will improve.

Example 2: Acute Care Liaison Team at Kings Mill Hospital

What does the acute care liaison team do?

They are a group of mental health professionals who

- Assess patients at Kings Mill Hospital who are over the age of 65 and believed to have mental health problems including dementia, depression, delirium or anxiety.
- Provide education and training about mental health problems to other hospital staff through informal advice and lectures.

What are the benefits?

- Quality of care for people with dementia in hospital will improve.
- Hospital staff have a better understanding of dementia.
- Careful planning for when patients leave hospital will ensure appropriate support is in place and are less likely to be readmitted to hospital or a nursing home.
- The team will work with patients, carers and ward teams to ensure the best care interventions are planned.

Example 3: Improving GP awareness and understanding



Dementia in Primary Care:

Guidelines for Prevention, Early Identification & Management

We have written new guidelines for GP's on prevention, early diagnosis and management of dementia in primary care.

These guidelines were shared with all GP's across Nottingham City, Nottinghamshire County and Bassetlaw.

A dementia academy was held for GP's to launch the new guidelines and educate them about dementia.

We are continuing to ensure GP's are aware of how best to work with people with dementia through a series of education sessions.

“Dementia is on the increase, I attended to learn more about dementia, to provide proper diagnosis, referral & treatment in primary care as a GP” Nottinghamshire GP

With a better understanding and knowledge of dementia, people are likely to receive earlier diagnosis and access to support services.

Example 4: Nottinghamshire County Dementia Outreach Service



Image from NHS pictures

What does the Dementia Outreach Service do?

Improve quality of care of people with dementia by providing specialist input into care homes.

- a) Support to find appropriate management for behaviours.
- b) Working with care homes staff to develop their knowledge, skills and confidence in working with residents with dementia.
- c) Information and advice.

What are the benefits of these services?

- Reduction in the use of anti-psychotic medications.
- Improved activity opportunities.
- Improve quality of care in care homes.
- Reduce admissions to hospital.
- Improved care for people with difficult behaviours.

Appendix

Summary of Living well with dementia: A National Dementia Strategy (DH, 2009)

The aim of the Strategy

1. The aim of the Strategy is to ensure that significant improvements are made to dementia services across three key areas: improved awareness, earlier diagnosis and intervention, and a higher quality of care. The Strategy identifies 17 key objectives which, when implemented, largely at a local level, should result in significant improvements in the quality of services provided to people with dementia. This Strategy should be a catalyst for a change in the way that people with dementia are viewed and cared for in England.

The issue

2. Recent reports and research have highlighted the shortcomings in the current provision of dementia services in the UK. Dementia presents a huge challenge to society, both now and increasingly in the future. There are currently 700,000 people in the UK with dementia, of whom approximately 570,000 live in England. Dementia costs the UK economy £17 billion a year and, in the next 30 years, the number of people with dementia in the UK will double to 1.4 million, with the costs trebling to over £50 billion a year.
3. While the numbers and the costs are daunting, the impact on those with the illness and on their families is also profound. Dementia results in a progressive decline in multiple areas of function, including memory, reasoning, communication skills and the skills needed to carry out daily activities. Alongside

this, decline individuals may develop behavioural and psychological symptoms such as depression, psychosis, aggression and wandering, which complicate care and can occur at any stage of the illness. Family carers of people with dementia are often old and frail themselves, with high levels of depression and physical illness, and a diminished quality of life. Dementia is a terminal condition but people can live with it for 7 – 12 years after diagnosis.

The context

4. The size of the population affected by dementia and the pervasiveness of the condition mean that the development of policy and services for people with dementia and their families is also affected by the wider policy context. This currently includes initiatives, guidance and policy statements such as Our NHS, Our Future, *Putting People First: A shared vision and commitment to the transformation of adult social care*, the current public debate on the future of the care and support system, the National Institute for Health and Clinical Excellence (NICE) commissioning guide on memory assessment services, the Carers' Strategy (Carers at the heart of 21st century families and communities) and the National End of Life Care Strategy. Getting services right for people with dementia will make a positive contribution to all of these.

The Strategy objectives

The key objectives of the Strategy, addressed in more detail in the full document, are as follows:

- **Objective 1: Improving public and professional awareness and understanding of dementia.** Public and professional awareness and understanding of dementia to be improved and the stigma associated with it addressed. This should inform individuals of the benefits of timely diagnosis and care, promote the prevention of dementia, and reduce social exclusion and discrimination. It should encourage behaviour change in terms of appropriate help-seeking and help provision.
- **Objective 2: Good-quality early diagnosis and intervention for all.** All people with dementia to have access to a pathway of care that delivers: a rapid and competent specialist assessment; an accurate diagnosis, sensitively communicated to the person with dementia and their carers; and treatment, care and support provided as needed following diagnosis. The system needs to have the capacity to see all new cases of dementia in the area.
- **Objective 3: Good-quality information for those with diagnosed dementia and their carers.** Providing people with dementia and their carers with good-quality information on the illness and on the services available, both at diagnosis and throughout the course of their care.
- **Objective 4: Enabling easy access to care, support and advice following diagnosis.** A dementia adviser to facilitate easy access to appropriate care, support and advice for those diagnosed with dementia and their carers.
- **Objective 5: Development of structured peer support and learning networks.** The establishment and maintenance of

such networks will provide direct local peer support for people with dementia and their carers. It will also enable people with dementia and their carers to take an active role in the development and prioritisation of local services.

- **Objective 6: Improved community personal support services.** Provision of an appropriate range of services to support people with dementia living at home and their carers. Access to flexible and reliable services, ranging from early intervention to specialist home care services, which are responsive to the personal needs and preferences of each individual and take account of their broader family circumstances. Accessible to people living alone or with carers, and people who pay for their care privately, through personal budgets or through local authority arranged services.
- **Objective 7: Implementing the Carers' Strategy.** Family carers are the most important resource available for people with dementia, active work is needed to ensure that the provisions of the Carers' Strategy are available for carers of people with dementia. Carers have a right to an assessment of their needs and can be supported through an agreed plan to support the important role they play in the care of the person with dementia. This will include good-quality, personalised breaks. Action should also be taken to strengthen support for children who are in caring roles, ensuring that their particular needs as children are protected.
- **Objective 8: Improved quality of care for people with dementia in general hospitals.** Identifying leadership for

dementia in general hospitals, defining the care pathway for dementia there and the commissioning of specialist liaison older people's mental health teams to work in general hospitals.

- **Objective 9: Improved intermediate care for people with dementia.** Intermediate care which is accessible to people with dementia and which meets their needs.
- **Objective 10: Considering the potential for housing support, housing-related services and telecare to support people with dementia and their carers.** The needs of people with dementia and their carers should be included in the development of housing options, assistive technology and telecare. As evidence emerges, commissioners should consider the provision of options to prolong independent living and delay reliance on more intensive services.
- **Objective 11: Living well with dementia in care homes.** Improved quality of care for people with dementia in care homes by the development of explicit leadership for dementia within care homes, defining the care pathway there, the commissioning of specialist in-reach services from community mental health teams, and through inspection regimes.
- **Objective 12: Improved end of life care for people with dementia.** People with dementia and their carers to be involved in planning end of life care which recognises the principles outlined in the Department of Health End of Life Care Strategy. Local work on the End of Life Care Strategy to consider dementia.

- **Objective 13: An informed and effective workforce for people with dementia.** Health and social care staff involved in the care of people who may have dementia to have the necessary skills to provide the best quality of care in the roles and settings where they work. To be achieved by effective basic training and continuous professional and vocational development in dementia.
- **Objective 14: A joint commissioning strategy for dementia.** Local commissioning and planning mechanisms to be established to determine the services needed for people with dementia and their carers, and how best to meet these needs. These commissioning plans should be informed by the World Class Commissioning guidance for dementia developed to support this Strategy and set out in Annex 1.
- **Objective 15: Improved assessment and regulation of health and care services and of how systems are working for people with dementia and their carers.** Inspection regimes for care homes and other services that better assure the quality of dementia care provided.
- **Objective 16: A clear picture of research evidence and needs.** Evidence to be available on the existing research base on dementia in the UK and gaps that need to be filled.
- **Objective 17: Effective national and regional support for implementation of the Strategy.** Appropriate national and regional support to be available to advise and assist local implementation of the Strategy. Good-quality information to be

available on the development of dementia services, including information from evaluations and demonstrator sites.

What will the National Dementia Strategy mean for people with dementia and their carers?

Full implementation of the Strategy will mean that all people with dementia and those who care for them would have the best possible healthcare and support. We know that early diagnosis, effective intervention and support from diagnosis through the course of the illness can enable people to live well with dementia. We also know that improving health and social care outcomes in dementia in the short and medium term can have significant benefits for society both now and in the future.

Our vision is for the positive transformation of dementia services. It would be a system where all people with dementia have access to the care and support they need. It would be a system where the public and professionals alike are well informed; where the fear and stigma associated with dementia have been allayed; and where the false beliefs that dementia is a normal part of ageing and nothing can be done have been corrected. It would be a system where families affected by dementia know where to go for help, what services to expect, and where the quality of care is high and equal wherever they might live.

Your comments

If you want any further information about the work we are doing or have comments about existing services please let us know by writing to communications.team@nottspct.nhs.uk