REPORT ON DEMENTIA SERVICE DEVELOPMENT ACROSS THE WEST OF BERKSHIRE

TO: **HEALTH AND WELLBEING BOARD**

DATE: **10 October 2014**   **AGENDA ITEM:**   **6**

TITLE: **DEMENTIA SERVICES IN BERKSHIRE WEST - UPDATE**

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1.   **PURPOSE OF REPORT AND EXECUTIVE SUMMARY**

1.1   This paper provides an update to the Board on the work in progress in dementia service development locally, which is in support of the National Dementia Strategy and implemented as part of the Long Term Conditions Programme.

1.2   This work has been steered by a Berkshire West Dementia Stakeholders Group, with representation from health commissioners and providers, unitary authorities and voluntary sector partners. Through that group, this paper has had input from all the key partners within the West of Berkshire.

2.   **RECOMMENDED ACTION**

2.1   **The Health and Wellbeing Board notes the contents of this update report.**

2.2   **The Health and Wellbeing partners commit to supporting the continued work on dementia as a priority within Reading.**

3.   **BACKGROUND**

3.1   Mental ill health costs some £105 billion each year in England: this includes £21 billion in health and social care costs and £29 billion in losses to business (*The Economic and Social Costs of Mental Health Problems in 2009/10*. London: Centre for Mental Health). It was estimated that the financial cost of dementia to the UK in 2012 was over £23 billion.

3.2   'Dementia' is used to describe a range of conditions which affect the brain and result in an overall impairment of the person's function. The person may experience memory loss, problems with communication, impaired reasoning and difficulties with daily living skills. This can result in changes in behaviour, which can disrupt the ability to live independently and may affect social relationships. Dementia is a progressive and terminal condition, which will in most cases lead to increasing cognitive difficulties and dependence on others. How long the person will live depends upon the type of dementia, their age and their general health, but many will live with the condition for several years.

4.   POLICY CONTEXT

National Dementia Strategy

4.1   The National Dementia Strategy (2009) set out a work programme over a five year period to improve dementia care across three main areas - improved detection; earlier diagnosis and intervention; and delivering a higher quality of care. The Revised NHS Operating Framework (2010/11) articulated clear expectations for NHS organisations to be working with partners on implementing the National Dementia Strategy.

4.2   During 2012, the Prime Minister launched the 'Dementia Challenge' which set out an ambitious programme of work to push further and faster in delivering major improvements in dementia care and research by 2015, building on the achievements of the National Dementia Strategy.

4.3   Central to the Challenge is the requirement that, from April 2013, there needs to be a quantified ambition for diagnosis rates across the country. The rates are published annually through the NHS Information Centre and are contained within the NHS Outcomes Framework (domain two). The Dementia Prevalence Calculator Tool enables local areas to account for local factors and establish estimates of their local prevalence rates. According to the tool, the adjusted diagnosis figures for August 2014 are:
            North & West Reading CCG – 49.5 of expected prevalence
            South Reading CCG – 49.0% of expected prevalence
        The diagnosis ambition across Reading is to achieve a rate of 67% by the end of 2015/16.

4.4   There is a national Directly Enhanced Service (DES) scheme encouraging GPs to screen all 'at risk' patients with the aim of identifying more people with possible dementia and referring them to Memory Clinics. The Quality Outcomes Framework (QOF) data for 2013-14 shows the following number of patients on the GP registers:
            North & West Reading CCG – 564
            South Reading CCG – 467

The NHS Outcomes Framework

4.5   Domain 2 of the NHS Outcomes Framework, published by the Department of Health, identifies three objectives that are of particular relevance in the context of developing dementia care services. These are:

- improving the health-related quality of life for people with long term conditions and their carers;
- increasing the proportion of people who feel supported to manage their condition; and
- the effectiveness of post-diagnosis care in sustaining independence and improving quality of life for people with dementia.

5.   THE LOCAL PICTURE

5.1   A number of key improvements for dementia services were proposed at the Dementia and Elderly Care Conference hosted by NHS South Reading CCG on 14 May 2013. The Berkshire West Dementia Stakeholder Group reviewed the list of priorities identified by delegates, and progress updates on these were posted on the South Reading CCG website (http://www.southreadingccg.nhs.uk/you-said-we-did/dementia).   The following key areas were identified:
- Communication and access to services;
- Joined up working around training and information;
- Better integration between hospitals, communities and social care;
- Lack of integrated ring-fenced funding for care support, respite care, premises, domiciliary care and training;
- Joined up working across health and social care; and
- Outreach worker for BME community.

5.2   Dementia remains high on local people's agenda. The 'Living well with Dementia ' conference put on by the Earley Charities Group in September 2014 for those with dementia and their carers attracted around 150 people. 30 different organisations attended with information stalls.

5.3   There is already a significant amount of joint working in this area between health agencies, local authorities and the voluntary sector. Updates on work in progress are set out below, by reference to the lead partner organisation where appropriate.

Dementia Challenge bids

5.4   In response to the Prime Minister's Dementia Challenge launched in 2012, 7 proposals were submitted to the Challenge Fund from across Berkshire West. These were lead by the unitary authorities working in partnership with Berkshire Healthcare Foundation and the Clinical Commissioning Groups. Five of the 7 bids were successful in securing funding.

Patient and Carer Information

5.5   This project aimed to give patients with dementia and their carers access to the information they want and need via a variety of media, including a local Dementia Information website, to inform, empower and improve lives. The approach taken was

based on the successful model previously developed for stroke patients in Berkshire West, which involves working closely with service providers, users and carers.

5.6 The resulting website has now been in existence for over a year with positive feedback and visitor volumes. The content includes links to national dementia sites, summaries of local support available, and a video 'Talking about Dementia'. The Dementia Information website is accessible from all of the Berkshire CCG websites, e.g: www.southreadingccg.nhs.uk/long-term-conditions/dementia

Care Home In Reach Team

5.7 The aims of this project were: improved quality of life for people with dementia living in selected residential and nursing homes; improving the skills of the care home staff, building their confidence and professionalism; and improved communication with people with dementia, and involvement of, carers. This includes their involvement with anticipatory planning for End of Life care.

5.8 The Berkshire West project team includes a clinical team lead and 5.5 FTE experienced nurses. There is an equal split between Registered Mental Nurses (RMNs) and Registered General Nurses (RGNs). The team works across the 3 local authority areas in the West of Berkshire but includes a dedicated RMN and RGN for Reading. All of the staff are employed by Berkshire Healthcare NHS Foundation Trust.

5.9 The team began delivering their service in the first wave of identified care homes in May 2013. The team works intensively in 2-3 homes (depending on size) for a period of 3 months and then will move on to a new group of homes. However, links are maintained with the first group of homes which are still visited occasionally and staff there can continue to approach the In-reach team for support. The In-reach staff work alongside the care home staff to model good practice and to observe and identify areas for improvement. The team only goes into homes at the invitation of the manager and the owners.

5.10 A variety of training has been delivered as training is a big part of the team's remit. This includes formal training sessions, workshops and informal teaching "on the floor". Care home staff have also been helped and encouraged to access external training. The team is collecting both quantitative and qualitative data to evidence their effectiveness, and building a collection of case studies to illustrate the work they have achieved.

Cognitive Stimulation Therapy (CST)

5.11 This project aims to extend the current provision of CST and to develop the knowledge and competency of staff working in non-health settings. The project supports the initial delivery of CST followed by Maintenance CST in Day Care and Extra Care settings and is designed to expand the local CST network to deliver continued and expanded CST across the local area.

5.12 This project has been running since July 2013. By delivering formal training to staff working in Day Centres and Extra Care Housing Schemes, and providing them with the

opportunity to observe and participate in established CST courses, the project will ensure participants then have the confidence and capability to run CST in their workplace. This in turn extends best practice across care settings and enables more people with dementia to engage in this proven therapy for longer.

5.13   Training typically starts with a full-day programme of explanatory lectures followed by group workshops and discussion. Trainees then shadow the BHFT led CST (3 providers 5 staff). Two providers have now fully completed the shadowing sessions (3 staff). Continuing dialogue with the providers has been productive in striking the right balance so that participants can more easily manage the training alongside their existing work commitments.

5.14   During December 2013 an evaluation was undertaken with the first cohort of trainees. This demonstrated that the shadowing was effective in complimenting and consolidating the theoretical element of the training. Woodley Age Concern was the first local provider to start marketing maintenance CST sessions, and others are expected to follow shortly.

Domiciliary Care Training

5.15   This project was designed to scope current training provision, identify training needs through a training needs analysis, and then develop a future plan of action to meet identified training needs. There is a variable take up of the dementia training currently available to domiciliary care providers, and this analysis will help CCGs and the local authority to tailor courses based on local need and to target those agencies who wish to become market leaders.

5.16   The project manager has developed a work force questionnaire and has begun her work with Reading providers, although she is expected to address similar issues across Wokingham and West Berkshire in future. This work is overseen by the Berkshire Care Association.

'Berkshire Blue Book'

5.17   The bid to the Dementia Challenge Fund for this project was not successful, but the Berkshire West CCGs decided to proceed and fund it themselves. The Berkshire Blue Book adapts the concept behind Gloucester's 'Living Well handbook' to Berkshire West, and was formally launched at the 'Living Well With Dementia' conference in September 2014. It is a tool intended to enhance user participation and ownership from the outset, and its development has been informed jointly by 'experts by experience' (patients and carers) and 'experts by training' (professionals). The Berkshire Blue Book draws on the online 'Patient and Carer Information' project described above to offer a parallel physical post-diagnosis pack.

5.18   The pack is based on information, input and results from a review of dementia information; qualitative research to elicit patient/carer information needs; and parallel research to identify information considered important by healthcare professionals, by local authorities and by voluntary sector staff.

5.19   The process of review and research also included gathering baseline data for evaluating the impact of the pack on patient/carer's reported quality of life, knowledge/skill and service usage. The impact of the pack will also be measured against unplanned admissions and crises requiring intervention.

Dementia Action Alliance in Reading

5.20   Establishing a local Dementia Action Alliance was another bid which secured Prime Minister's Challenge funding. The aim of this project was to assist in making Reading a dementia-friendly community by developing a local dementia declaration - as outlined by the national Dementia Action Alliance – which major local employers and service providers are then invited to sign. Signing commits the organisation to reviewing and changing its activities as required to improve support to people with dementia.

5.21   The Reading Dementia Action Alliance was launched in March 2014, and "Working to Become Dementia Friendly" status was awarded one month later. The Reading Dementia Action Alliance Steering Group continues to meet quarterly to promote and encourage the Dementia Friendly Community concept, and so support the inclusion of people with dementia and their carers. The Butts Centre in Reading has now acquired dementia-friendly status whilst the Oracle centre is working towards it.

5.22   The Dementia Action Alliance in Reading has also supported the development of contacts, networking and training tools. The aim has been to forge relationships in order to develop sustainability for the future. Through the Alliance, a broad range of local organisations now include committed 'Dementia Friends or 'Dementia Champions'. **'**Times of our Lives' workshops have been rolled out across primary and secondary schools in Reading to support intergenerational dementia awareness raising. In 2013, the Hands-On Company researched, devised and rehearsed 'Times of our Lives' (using drama and puppetry) and created a follow-up CD. An article in the Reading Chronicle about this project then preceded a news story on South Today and a twenty minute studio chat with Drive-time Radio Berkshire. The first workshop was held in September 2013 and continued into the spring and summer terms of 2014. Feedback has been very positive.

Younger People with Dementia

5.23   The needs of younger people with dementia and their carers differ greatly from older people as the pattern, progression and burden of illness are all different. Loss of employment and with it financial insecurity, marital breakdown and impact on children have far reaching effects. Furthermore behavioural and psychological symptoms associated with the dementia when they occur are very difficult to manage within current care provisions for people with dementia which are geared towards people who are much older and physiologically frailer.

5.24   A Younger People With Dementia Group is run by Crossroads Reading in partnership with Woodley Age Concern to offer a combination of workshops and one-to-one sessions which support younger people with a dementia diagnosis. The three Berkshire West local authorities provide funding support to Crossroads for this service whilst the

Woodley Age Concern element receives funding support from the CCGs via the Partnership Development Fund.

5.25   Younger People with Dementia (YWPD) was launched as a registered charity in June 2012 in order to provide support for younger people with dementia (by definition onset of symptoms before the age of 65) and their carers. The main aims were to raise the profile about the different needs of younger people with dementia, specifically in relation to age appropriate activities, to provide social and emotional support and to raise funds through grants to provide age appropriate support.

5.26   The Younger People With Dementia Charity offers alternative community based activities for this group of patients, and an element of day respite which is of benefit to carers. The YPWD Charity is supported from pooled health and social care budgets set up to support carers to access breaks.

Berkshire West CCGs

5.27   As part of the 2013-14 QIPP programme the Berkshire West CCGs prioritised increased investment into their Older People's Mental Health services delivered by Berkshire Healthcare Foundation Trust. This investment is in recognition of the costs associated with both the increase in the number of patients with dementia, and the prescribing issues relating to anti-dementia drugs, which are only effective for people with some types of dementia and not all types.

5.28   Capacity in memory clinics is being increased in line with demand. Prescribing of anti-dementia drugs is extending to those with mild dementia in line with NICE guidance. All memory clinics across Berkshire have seen a rise in referrals. Referrals to memory clinics has increased on average by 15.8% compared with the same period in the previous year. An average of 30 patients are referred to the memory Clinic from Reading each month and 80% of them have been seen within 6 weeks of being referred.

5.29   The Parliamentary All Party report, 'Dementia does not Discriminate' recommended that the ethnicity of those being identified with dementia should be monitored. We have found that the ethnic status of patients attending the memory clinics locally very closely mirrors the ethnic profile of the >65 years population in the area. Ensuring that Nepalese elders have equitable access to services is of particular relevance to Reading, and the Berkshire West GP lead for mental health has met with the Nepali community development workers to see if barriers to care/help with education about dementia can be identified. The Dementia Advisor from the Reading branch of the Alzheimer's Society is also involved with this project.

5.30   Shared care has been introduced between specialists and GPs, enabling suitable patients to transfer to GP care once stabilised on their medication and a care plan is agreed by the clinicians involved.

5.31   The CCGs fund a Reading Dementia Care Advisor post to provide information, advice, guidance and support to those newly diagnosed with dementia, their family and carers. There is also a dedicated post to offer support to people with early onset dementia across the Berkshire West area, funded by the four Berkshire West CCGs collectively.

Age UK Berkshire (Home from Hospital Service)

5.32   A specialist service is available to clients with dementia who are in-patients at the Royal Berkshire Hospital to support their discharge from hospital and return home. The specialist service is an extension of Age UK Berkshire's generic Home from Hospital service run elsewhere in Berkshire, and uses the expertise built up across that broader service. The service also supports clients in Reading who have been admitted to other hospitals, including the Oakwood Unit at Prospect Park and The Willows Intermediate Care facility, and patients at private hospitals receiving NHS elective surgeries. In the first quarter of 2014-15, the Specialist Dementia Home from Hospital service supported 12 people with dementia in Reading.

5.33   This is a service part-funded by the Berkshire West CCGs through the Partnership Development Fund with Reading Borough Council also supporting the service via grant funding. Charitable donations to Age UK Berkshire also help support this service.

Reading Borough Council

Improving the environment of care for people with dementia

5.34   The construction of a dementia friendly garden at The Willows care home in Reading started in November 2013. A conservatory was built and garden areas cleared of paving and overgrown shrubs. Hard landscaping and planting was then followed by the development of a programme of activities by Thrive, which specialises in therapeutic gardening. The garden is used as a best practice example for local care homes, extra care and day care settings. It has also fed into the production of a national dementia friendly environments building design guidance.

Alzheimer's Society

5.35   The Council provides funding support for the Alzheimer's Society's Befriending Service which uses volunteers to visit people with dementia and take part in activities with them. Befriending volunteers are paired with people with dementia, having matched them according to interests. The programme has experienced difficulty in recruiting sufficient volunteers to meet demand, but this has been addressed by the recruitment of a dedicated manager for this aspect of the Alzheimer's Society's service.

5.36   The Alzheimer's Society also runs a weekly drop-in, a monthly Dementia Café and an empowerment group. The latter enables people with dementia to influence and comment on local services.

Carers Support

5.37   The Council also provides funding support to several voluntary and community groups which have services designed to support carers, including carers of those with dementia. Crossroads Reading offers a sitting service or 'at home respite' and holds a

monthly carers support group at Hazelwood. Both Age UK Berkshire and Age UK Reading receive funding support from Reading Borough Council to offer a range of support to elderly people and their carers. Berkshire Carers Service is funded to provide an information advice and support service to all carers.

The Royal Berkshire NHS Foundation Trust (RBHT)

Staff Training

5.38   As part of the Secretary of State's Health Education England Dementia Mandate the RBH has completed the '*Health Education England Provider Organisation Dementia Scoping Survey'*. This relates to the provision of dementia awareness training, based on the national expectation that 100,000 NHS staff were to have received foundation level dementia training by March 2014.

5.39   Dementia awareness training continues to be provided to all Registered Nurses, Allied Health Professionals and Health Care Assistants during Trust Induction. 355 staff received dementia awareness training during their induction period in 2013. Student nurses on placement in elderly care wards are now provided with training in dementia awareness, recognition and management of challenging behaviour, and visuo-perceptual difficulties.

5.40   The second round of Dementia Champion training in RBH in November 2013 was attended by thirty-seven RBHT staff and 14 Student Nurses. There was staff representation from the Urgent, Planned and Networked Care Groups and the day was very well evaluated by attendees.

5.41   Dementia Champion training has continued in 2014 with bi-monthly 90 minute training sessions focusing on communication, recognition and management of challenging behaviour, end of life care, and the carers' perspective. The award winning DVD 'Barbara's Story', which was created by St Thomas and Guys Hospital, was used for the first time at the RBH in the Champion training.

5.42   As a result of the Francis Report, ward-based simulation scenarios have been implemented as a Pilot Study. Dementia care has been incorporated into these scenarios. In addition, the Older People's Mental Health Service delivered at RBHT by BHFT continues to provide staff training on various subjects.

5.43   In November 2013, RBHT sent a representative to the Health Education England gathering of health practitioners, academics, and commissioners to discuss what the learning requirements were for post graduate nurses to improve the level of care received by older people with complex needs. This work has been collated by Health Education North East (HENE). This HENE project is proposing to define what the educational requirements are for post graduate training and how this may be achieved at Foundation, Specialist and Higher Specialist Level (There are almost 500 post graduate courses for nurses relating to caring for older people. However, there are currently no national standards directing the course content.)

Dementia Friendly Wards

5.44   Phase 1 of the 'enhancing the healing environment' work has been completed on four elderly care wards. The new wards incorporate safe flooring, new colour schemes, reduced size of nurses' stations, and space made within the bays for staff to work at. This is to encourage staff to be closer to the patients.

One to One Care Crew

5.45   The Trust is currently in the process of recruiting a team of Health Care Assistants specifically to provide one to one care for patients with cognitive problems. These staff will undergo a special training programme.

Forget-Me-Not Scheme

5.46   This scheme will be rolled out across the Trust. Forget-me-nots are put behind the beds to aid communication, orientation and reassurance.

Delirium Screening

5.47   The Trust will implement training related to Confusion Assessment Method (CAM) screening and delirium recognition.

Berkshire Healthcare Foundation Trust

5.48   The Older People's Mental Health (OPMH) teams that operate within each of the Berkshire West localities (Reading, West Berkshire and Wokingham) deliver a number of services to support people with dementia and their carers. Memory clinic accreditation is being sought for each of the 6 clinics in Berkshire. The details are provided below are specific to West Berkshire but all localities run these courses:

Collaboration with the Young People with Dementia (YPWD) Charity

5.49   There are no dedicated statutory services for younger people with dementia in Berkshire, as there are in other areas of the country, although nationwide provisions are quite variable. BHFT offers assessment for people with dementia of any age through the Memory Clinics and Community Mental Health Teams for the Elderly, but any interventions offered such as the Understanding Dementia Course for Carers and Cognitive Stimulation Therapy for patients are aimed at people in their seventies, eighties and nineties, as these provide the bulk of the referrals. Whilst carers of younger people with dementia have accessed the Understanding Dementia Course, feedback has been that this is not appropriate for them. BHFT (and the Council) have therefore been pleased to partner with the Younger People With Dementia Charity to develop more appropriate provision for this group.

5.50   YPWD employs an Admiral Nurse part-time (3 days per week). This is on a fixed term contract of 18-months according to the funding stream. Admiral Nurses specifically provide intervention - psychological and practical - for carers. Carers of younger people with dementia often have complex needs, because they tend to be juggling many roles,

and over 50% of carers of younger people with dementia suffer from mental health problems.

5.51   The rest of the activities of the charity are related to fundraising, providing information (via website and quarterly newsletter), carer support, social events and networking. The staff working for YPWD work extremely closely and jointly with the BHFT team and are based in the locality memory clinics, accessing relevant supervision and teaching by BHFT staff, are involved in away days and planning of the service both at a strategic level but also individual care plans of patients and are involved in the support and delivery of the younger people with dementia carer and patient education groups.

Prospect Park Hospital

5.52   BHFT were successful in gaining funding of just under £1 million to improve the environments of two wards in Prospect Park Hospital: Rowan, a specialist 20 bedded dementia ward and Oakwood, a community ward which accommodates patients with dementia as a secondary issue. Rowan ward was opened on 7th January 2014 for the transfer of patients. It includes:
- o   a dedicated cinema room;
- o   'Heal Well' bedrooms, which use specialist lighting to recreate a gradual sunrise and sunset feel to eliminate the need for night sedation (where possible) and so discourage the day/night reversal so often found with people who have dementia;
- o   a 'Garden Room' which has a drinks machine (receiving payment by donations only), and microwave facilities to encourage families to sit with the patient and eat. The aim is to include the family as much as possible in the care of the patient if that is their desire. There have been noticeable positive effects on the patients if a member of the family sits and eats with them.

End of Life Group

5.53   This group is chaired by Dr Luke Solomon and is overseeing a pilot project in a nursing home in Hungerford on advanced care planning. Advance care planning is a sensitive area, but can help improve quality of life for people with dementia and their carers. This project considers a nursing home population of people with dementia and attempts to bring together all parties connected with their care to evaluate the impact of an advance care planning intervention that would be available to emergency services. The pilot is to map the difficulties and benefits of the scheme which is planned to roll out. The advance care plans will be kept in the care notes if a person is in a care home where GPs can access them. The information on Adastra will be accessible by GPs, A&E, in-reach teams, 111 and 999.

5.54   Care Home In-Reach nurses and a CPN have been running the pilot this year, inviting families to be involved in an initial session (with Mandy Coombes), monitoring the time required to complete the form, seeing what can be merged from the Nursing Home's current system and how the information can be input onto Adastra. The forms being used are in two parts: (i) to be completed by those who have mental capacity; and (ii) to be completed on behalf of those who have lost mental capacity. The qualified nursing home staff are being given an understanding of how to complete the form.

Online support for carers of people with dementia

5.55 SHaRON (Support Hope and Recovery Online Network) for carers of people with a mental health condition was launched in June 2014 (during Carers Week), and a version adapted for those caring for someone with dementia is about to be launched. BHFT's first SHaRON was developed for people with eating disorders, and the concept has now been used to offer online support to other groups. SHaRON facilitates peer support plus access to expert support. It is moderated rather than operating on a completely open access model.

6.   NEXT STEPS

6.1 Although a great deal has been achieved already, there remain some significant challenges in meeting the needs of growing numbers of people with dementia, nationally and locally. The Berkshire West Dementia Stakeholders Group has identified the following priorities for local development.

a) Sustainability of two of the Dementia Challenge Projects: Dementia Friendly Communities and Domiciliary Care Training.

b) CCGs achieving the 67% target diagnosis rate by end of 2015/16. This represents a significant challenge despite all the work undertaken thus far.

c) The long term sustainability of tailored and age appropriate activities / accommodation for younger people with dementia.

d) End of Life Care – more focus and attention is needed on people with dementia nearing the end of life.

e) The standard of care in many local nursing homes – with both the number of safeguarding reports and the high staff turnover giving cause for concern.

f) Co-ordination of the services in the different areas particularly around hospital discharges and how this may be affecting patients' length of stay in hospital.

Work Plan :Executive Summary

The work plan for dementia in Berkshire West has been constructed to show the priority areas, the intended projects for these areas, and an indicative timeline for the work.

The priority areas have been identified as:
- Dementia Prevalence and GP registers
- Young People with Dementia
- Dementia Clinical Advisers
- Training needs assessments
- Evaluation of dementia challenge investments

The current project list focusses on the assessment of current services with a view to understanding the needs for further investment in services. The outputs of these projects are likely to identify further work for the future.

Objective	What	How	Resources Required	Timeline	Risks
Dementia Prevalence					
Increase the number of patients who are registered as having a diagnosis of Dementia on GP registers. This is to ensure that patients are able to: • Gain access to information, resources and support • Demystify and destigmatise the condition • Maximise your quality of life • Benefit from treatments • Plan for the future Target = 57% 2014/15. 67%	• Review of current position at Practice level for all CCGs. • Assessment of next steps including coding issues and educational elements. • Assessment of validity and achievability of diagnosis target. • Report back to LTC board	• Informatics support to provide most recent data • BHFT to advise on memory clinic engagement • Clinical lead to support clinical interpretation of information. • Alignment of GP registers with BHFT memory clinic information and RBH CQUIN data. • Project management to produce review and put in place reporting arrangements. Reporting arrangements should be transitioned to Business as usual to correct board.	Informatics 3 days Project management = 1 day per week Ongoing data reporting support?	See timeline table below	• No QiPP savings • Ability to influence the target. • Unclear if anything additional can be done to increase current rates

Timeline:

	Jul	Aug	Sep	Oct	Nov
Review of current position			■		
Next steps assessment			■		
Report back to LTC Board with recommendations				■	

2015/16						
Young People with Dementia (YPWD)						
Improve and embed service for younger people with dementia. Younger people with dementia and their carers frequently fall through the net of health and social care services. They are subject to delays in diagnosis, poor after care and a lack of age-appropriate services.	• Review of business case from BHFT • Understanding and clarification of current funding arrangements • Translation of business case into QIPP/investment scheme for LTC board consideration.	• Clinical lead and stakeholder group to ratify business case • Project management to pull together business case requirements • Support to bring together YPWD	Project Management oversight 3 day Project support (consultant) 5 days	(see timeline below)		• Provision of current service under risk in absence of recurrent funding • Links to East Berkshire geography may be necessary
Training Needs Assessment						

Timeline:

	Jul	Aug	Sep	Oct	Nov
BHFT business case review	■				
QIPP investment scheme formulated	■				
Best practice review		■			
Business case presentation to LTC Board		■			

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<tr><td>To ensure that primary care doctors and clinical staff have sufficient skills and knowledge to manage people with dementia and ensuring good quality services

Training needs also to be assessed in Royal Berkshire Hospital</td><td>

- Report outlining training needs to include strengths, knowledge gaps, and recommendations for provision of training.
- Report to LTC board outlining analysis of need and recommendations for investment (if needed)

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- Structured questionnaire to GP practices. Follow up phone calls ensuring take up
- Desk top analysis of training standards requirements.
- Report production with recommendations for next steps

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- Project management oversight 3 days
- Project support 5 days

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	Jul	Aug	Sep	Oct	Nov
Questionnaire design and circulation	■				
Desktop review of best practice	■				
Questionnaire results analysis		■			
Report production		■			
Report to LTC board			■		

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- Training needs not addressed with potential quality issues in services
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<tr><td colspan="6">Sustainability of training for Domiciliary Care workers</td></tr>
<tr><td>Dementia challenge funding in place for care worker training to ensure support services are in place for people with dementia.</td><td>

- Evaluation of impact and recommendations for further funding.
- Recommendations of further investment and/project work

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- Cost/benefit analysis of schemes
- Desktop review of best practice
- Links with Local authority stakeholders

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Project management oversight 5 days
Project support 5 days
Informatics support 1 day</td><td>

	Sept	Oct	Nov	Dec	Jan
Review of current scheme		■			
Desktop review		■			
Report production			■		
Report to LTC Board				■	

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- Important scheme does not continue and benefits of service lost.

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Dementia Care Advisors									
A dementia support service provides one to one support to people with dementia, carers and family members. The service is unique to personal circumstances and the information and support needed. A dementia support service provides information and practical support to help greater understanding about dementia, and to support	Evaluation of services to include: • Assessment of impact of service against original KPIs • Assessment of capacity of DCAs against demand for services • Assessment of Cost implications of additional DCAS • Feasiblity assessment for DCAs performing primary care assessments	• Links to Alzheimers society re expectations of DCA services. • Best practice review (desktop) • DCA focus group to assess current provision, gaps in current service and requirements for improvement. • Data analysis of available data for services • Review of national guidance	Project management oversight 5 days Project support 10 days	(see Gantt below)					• Service quality issues if there is insufficient resource. • Potential return on investment challenges. • Availability of funding for additional DCAs if necessary

Gantt chart:

	Jul	Aug	Sep	Oct	Nov
Review of current scheme		■			
Desktop review			■		
DCA Meeting			■		
Report production				■	
Report to LTC Board					■

service users with dementia. DCAs are in place locally but need to be reviewed for fitness for purpose, impact assessment and recommendations for enhancement or additional funding. It is also important to assess the feasibility of DCAs undertaking primary care assessments.		for primary care dementia reviews. • Demand/capacity assessment • Business case development where needed		