Executive Summary
Our vision is for all Individuals with Dementia and their carers in North East Lincolnshire to continue to live their life well and to live life to the full

To do this we will create an environment which offers:

- A choice of access points and good information to enable individuals to seek help early
- Timely and accurate diagnosis for individuals if requested
- A range of flexible services to meet an individual’s personal needs and support their daily routines
- A high standard of care, to give confidence to individuals should they need to go into hospital
- Consistency in care, ensuring that the public and professionals are knowledgeable about dementia
- Carers training and support to continue in their role, for as long as they are able to do so
A widely used drug for individuals with dementia suffering from anxiety agitation and other complex behaviours.

When the Government or the CTP asks individuals what they think about its plans for the future.

A person who advises individuals with dementia and their carers where to go for help.

Deciding what is wrong with an individual’s health.

Care Trust Plus – the NHS organisation that provides health and social care under one service.

Individuals with a similar heritage, often individuals who come from or whose ancestors came originally from another country.

Friends or relations who look after those with dementia.

Hospitals that provide a range of healthcare services, rather than specialising in one sort of disease.

Help for individuals who are not quite ill enough to be in hospital, but not quite well enough to manage on their own at home, to give them time to improve.

The Government’s 5-year plan for improving health and social care services in England for everyone with dementia and their carers.

What we want the Strategy to achieve.

What the Strategy will mean for individuals with dementia and their carers.

When someone’s everyday living needs are met through care in the community.

Used in this document to mean a health check done by a dementia specialist.

The idea that something (in this case dementia) is shameful.

A high level plan for the organisation to work to in the future.

Special equipment to help individuals who receive care or monitoring from far away, for example by telephone.
Foreword

The population of older individuals in North East Lincolnshire is rising steadily and dementia will impact on an increasing number of families and also increase the pressure on health and social care services. The current systems need to plan for this increased demand and provide better support for the many dementia sufferers and their carers.

North East Lincolnshire Care Trust Plus (NELCTP) has commissioned work to develop a commissioning framework, which will ensure that services better meet the needs of local individuals, both clinically and financially. A radical re-design of dementia care in North East Lincolnshire, will transform the current services and help to improve the registration of dementia in primary care.

The Care Trust Plus has a three year strategy to improve dementia care. It is driven by the Local Implementation Plan “Living Well with Dementia in North East Lincolnshire.”

Jeanette Logan
Service Lead for Older People

There are no networks or support for me in my situation.

I had a slow diagnosis, poor information and this caused strains on the family.
Introduction

The National Dementia Strategy was published in February 2009 and now all health commissioners are required to publish their plans. This local Implementation Plan is intended to support and give direction to the development of improved, high quality, dedicated and mainstream services for individuals with dementia and their carers.

The aim is to ensure that significant improvements are made to dementia services across key areas. Recent reports and research have highlighted the shortcomings in the current provision of dementia services across the area. Dementia presents a huge challenge to society both now and in the future. There are currently 700,000 individuals in the UK with dementia of whom 570,000 live in England. It costs the economy £17billion a year and in the next 30 years, the numbers will double to £1.4million, with costs trebling to over £50billion a year.

The over 65 population in North East Lincolnshire is expected to increase by 38% from 2008 to 2025 with an increase of 52% in the incidence of dementia. There are 617 individuals currently registered with their GP as having dementia, compared with the expected total number of 1989 based on national estimates.

While the numbers and costs can be daunting, the impact on those with the illness and on their families is profound; it results in a progressive decline in multiple areas of functioning, including memory, reasoning, communication skills and the skills needed to do 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.

Families and carers of individuals with dementia are often old and frail themselves, with high levels of depression, physical illness and a diminished quality of life. Dementia is a terminal condition, but individuals can live for 7-12 years after diagnosis. This Implementation Plan has been developed to support the individual with dementia, to live their life well and to the full.
Key principles

This implementation plan is the first step for change in the way that those with dementia are viewed and cared for in the future. It will allow dementia services to respond to wider ranging needs and give more individuals more choice and control over their support needs by:

- Providing good quality early diagnosis, care, support and intervention.
- Creating services which meet the personal needs and choices of individuals with Huntington’s disease, learning disabilities, or young onset dementia.
- Reducing hospital admissions and making improvements to the quality of care within general hospital settings.
- Ensuring there is easy access to help, the right information for families affected by dementia and knowledge of what services to expect.
- Improvements to the quality of care for individuals living with dementia in care homes.
- Significantly reducing the use of antipsychotic medications, by developing alternative therapies to manage behavioural difficulties.

To make sure resources are used in the best possible way, the proposals for the new model of services will take full advantage of the possible integration of services and will plan to move some resources from existing services, to the new services which will increase efficiency. More choice and control will be given to individuals, by providing services which can be adapted to be suitable for individual budgets.

We have tried to use the information provided, to help design the new service. There is a real need to provide support at earlier stages of the illness and to use the finances available in a different way.
What outcomes do we want to achieve in North East Lincolnshire?

The NELCTP is using high quality commissioning plans to improve local dementia services, without an increase to the funding. This is not about implementing a national document locally; it is about making the lives of individuals with dementia and their carers better. It will also help us to meet our partnership ambitions for health and for transforming community services.

Despite the best intent, the current ways of working do not provide a consistently high quality of care or improved health outcomes for individuals with dementia, or the family members who care for them. The practice of making changes from purchasing some expensive services and reinvesting the funding in creating new services, will be used to ensure that the services that are needed, are provided more effectively and efficiently.

It will redesign the support available to individuals in the earlier stages and throughout the illness, without using any growth money. The future service specifications and delivery plans will set out what is required. In addition, we will use savings that are made from reducing emergency admissions, to fund a practice-based memory support service, to help GPs find individuals with dementia and to manage their care through more of a shared care approach.
Through implementation of the “Living Well with Dementia in North East Lincolnshire” plan, there are also options for introducing new services, which could include:

- A scheme to provide a regular phone-in advice slot on local radio, operated by a mental health specialist, to provide practical advice about those worried about dementia and its symptoms.

- The development of new partnership schemes with the voluntary organisations and mental health services, in the future, may offer peer support groups and education for carers’ by providing memory cafes and drop in centres.

- A dementia liaison service to support individuals with dementia, whilst they are inpatients in hospital or care homes and increase staff education. This role will be key in linking up care homes, mental health services, primary care and GPs.

- Setting up a public dementia helpline in conjunction with the Alzheimer’s Society and Age UK (Age Concern Help the Aged)

- Other initiatives could also include Arts for Health scheme, which offers painting and music therapy in care homes, to help tackle behaviours that challenge and prevent the administration of antipsychotic medication.

THE NELCTP is looking to set up a dementia academy, where clinicians including GP’s can receive training to assess their knowledge, with input from psychologists and psychiatrists of old age. Training could also be offered to all care homes and hospitals, to link workers and develop approved trainers in each home with the use of a dementia toolkit for wide ranging use.

I was given care that didn't meet my individual requirements and didn't give me any choice.
It is important to recognise that the delivery of this plan cannot be achieved by one organisation alone and the NELCTP is working closely with Mental Health partners, the Northern Lincolnshire and Goole hospital, Primary care services, Housing providers, voluntary and Private sector providers. Our partnership will help to create changes that are needed to improve the lives of individuals affected by dementia and their carers. We aim to make a real difference, ensuring that individuals receive the right care and support to meet their personal needs and requirements.

The Dementia Implementation Plan sets out the local plans to meet the identified needs as outlined in this document. The Dementia Forum which involves a range of individuals with an interest in dementia services will drive these actions forward and set, monitor and review timescales for implementation.

There are no housing options and very limited choice of long term care.
Priorities for Action

The following sets out our plans for implementing the key objectives set out in the National Dementia Strategy, highlighting the five priority areas and gives consideration to what local individuals told us they need and what impact we hope to make.

Key Priorities:
1. Good quality early diagnosis and intervention for all
2. Improved quality of care for individuals with dementia in general hospitals
3. Living well with dementia in care homes
4. Improved community and personal support
5. Reduced use of antipsychotic medication

In addition it should be noted that consideration through all service delivery is to meet the individual needs of individuals with Huntington’s disease, learning disability or young onset Dementia.
All individuals 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 individual with dementia and their carers; and treatment, care and support provided as needed following diagnosis. Navigation through the services and ongoing support will be provided through a dementia advisor, the system needs to have the capacity to see all new cases of dementia in the area. A new Memory support system will provide the assessment, diagnosis and support for individuals, through a range of new services.

What individuals need

- All professionals to understand the local care pathway and how to refer into it.
- Limited waiting time between steps along the pathway.
- Accurate diagnosis and good needs assessment.
- Support from staff that have the time to work in person-centred ways.

My home care was inflexible and did not support my daily routine.

Mum was admitted to care; we received no support and guidance with this difficult decision.

Priority 1
- Good quality early diagnosis and interventions for all
Priority 2
- Improved quality of care for individuals with dementia in general hospitals

Identifying leadership for dementia in general hospitals, defining the care pathway for dementia and the commissioning of specialist liaison older individuals’ mental health teams to work in general hospitals, primary care and care homes.

What individuals need

- All staff trained to identify when a patient may be suffering from dementia and needs to be assessed including Emergency and Ambulance staff.
- Hospital staff trained to provide acute treatment to individuals with dementia.
- Discharge planning to take place by teams who understand what community services are available.

My worker changed frequently so I had no consistency.

My husband’s stay in hospital was a difficult experience due to the lack of understanding and the poor environment.
Priority 3
- Living well with dementia in care homes

Improved quality of care for individuals with dementia in care homes by the development of explicit leadership within care homes. Define the care pathway, there will be the provision of appropriate enhanced care units for those with dementia and an higher quality of care delivered to individuals with dementia in all care homes. The commissioning of liaison services through specialist in-reach support from mental health experts and through stronger local inspection regimes. The provision of high quality ongoing training and support with person centred care will be a priority.

What individuals need

- Assurance that they or their loved ones will be cared for well and with dignity.
- Availability of choice of homes within reasonable distances.
Priority 4
- Improved community personal support

Support to be provided in any community setting, which include practical supports to enable an individual with dementia to remain independent for as long as possible. The Introduction of assistive technology to provide re-assurances and enhancing flexibility in lifestyles. **Opportunities for engaging with others in a similar situation and receive valuable support, information and advice will be provided through a range of memory café’s in community resources.**

**What individuals need**
- Well trained staff who understand person centred care and deliver a flexible approach to enhance living well with dignity.
- Partnership approach to supporting the person with dementia and carer in a community setting.

Priority 5
- Reducing the use of anti-psychotic medication

There is a national overuse of antipsychotic medication in care homes and unacceptable harm and risk associated with that overuse. Specialist support from the liaison service will be commissioned to educate staff and successfully decrease the use, and in turn increase the quality of care provided.

**What individuals need**
- To reduce the rate of use of anti-psychotic medication to a third of its current level and substitute with sustainable behavioural interventions and alternatives.
Support to Carers

The recognition of the role that carers play in the support of individuals with dementia has been considered throughout all of the outlined priorities. There is a drive to support the new deal for carers and to ensure that a partnership approach to shared care will be delivered in all services. The admiral nurse role will continue to provide valuable support and education for carers and families as appropriate.

I feel lonely and isolated.

The staff didn't seem to have enough training or knowledge about my illness.

Conclusion

This Implementation Plan will be a catalyst for change, in the way that individuals with dementia and their carers are viewed and cared for in the future. The interpretation is strong in ensuring that there is age equality for all services. The plan will help to drive up quality and improve all local dementia care services; it reflects a shift in emphasis from the previous structures and processes towards other priorities which are centred on meeting the needs of individuals with dementia and their carers within local planning.

The publication of this local Implementation Plan “Living Well with Dementia in North East Lincolnshire” is the first step to making it possible.
A fuller version of the report is available from Marie Walshe
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For further details and information about this report summary, to become involved in the Implementation Plan, or to submit support for the intended plans, please contact Jeanette Logan e-mail: jeanettelogan@nhs.net