



Rotherham Clinical Commissioning Group

Rotherham Clinical Commissioning Group (CCG)

Dementia Strategy

December 2012 – March 2014

(Draft version 1.6)

1.0 Introduction

This is the Rotherham Clinical Commissioning Group (RCCG) first Dementia Strategy as an autonomous statutory organisation. It sets out the key priorities that the RCCG Board will deliver to improve the health and wellbeing of people with Dementia and their carers in Rotherham.

This strategy will work in conjunction with a number of local strategies and documents to ensure the successful achievement of its goals. These include:

- Rotherham Joint Needs Assessment: Our Intelligence.
- Health and Wellbeing Strategy: our vision and how we will achieve this.
- Rotherham CCG Annual Commissioning Plan (ACP) 2013/14.
- Carers Joint Action Plan 2013-16.

This plan sets out the Rotherham CCG agreed intentions for 2013/14. However, we will continue dialogue with stakeholders during 2013/14 to further develop and re-fresh our intentions for 14/15 and 15/16.

In the Rotherham “Health and Wellbeing Strategy: our vision and how we will achieve this”, Dementia has been identified as a key priority for the future provision of services. All partners are expecting an increasing demand over the next 3 years for services to support people with Dementia and their carers. Therefore, it is essential that Health and Social Care Commissioners work in partnership to commission new and innovative services within the increasingly challenging financial environment. Further work will need to be undertaken to develop a Joint Commissioning Strategy with RMBC to ensure the delivery of the dementia element of the Rotherham “Health and Wellbeing Strategy: our vision and how we achieve this.”

2.0 Background

Dementia is now the greatest health concern for people over 55 and the economic cost of dementia is more than cancer, heart disease or stroke. Currently, in Rotherham there are 1688 people on the GP Dementia register compared with a predicted prevalence of 3034. It is estimated that by 2025 the number of people in Rotherham with Dementia will have risen to 4397(JSNA 2011). Nationally, only about 42% of people with Dementia have a formal

diagnosis and too often, diagnosis comes too late. In Rotherham the figure is higher with about 55.6% of people with Dementia having a formal diagnosis, but as national policies require the reduction of undiagnosed Dementia, local rates of Dementia diagnosis will need to increase.

Increased referrals for diagnosis all too often result in an increase in the time people wait for services. As demand increases the challenge for the Health and Social care system will be to ensure the delivery of timely access to services within the financial resources available. This will be a challenge facing Health, Social care and the voluntary sector involved in the delivery of support for people with Dementia throughout the pathway provision.

In anticipation of this increase in referrals for diagnosis and greater demand over the next 2 years a programme of work has been developed to review the current pathway and provision of service for people with Dementia. This process is being overseen by the Older Peoples Mental Health Group (OPMH) which is a well established partnership group attended by Commissioners, Providers, Voluntary Sector Organisations and Carers. It is chaired by the Rotherham CCG Dementia Clinical Lead Dr Russell Brynes.

3.0 District-wide Dementia work stream progress to date

A review of services across Health, Social Care and the voluntary sector undertaken in 2011/12 highlighted the wide range and variety of services currently commissioned to support people with Dementia and their carers. This current configuration of services makes it sometimes fragmented, difficult to navigate, with potential problems arising in the transition of people from service to service and as a consequence they sometimes experience long delays to access services or end up being referred to an inappropriate service. To address the challenges arising from the anticipated increase in people with Dementia, Rotherham CCG and key stakeholders agreed to undertake a whole system review of the provision of Health and Social care services across Rotherham. To progress this work the following four groups have been established:

- Dementia - Prevention Group (anti-stigma, Healthy eating, fall prevention etc).
- Dementia – Early Diagnosis Group (interfaces between GP/RDaSH and RDaSH / RFT).
- Living Well with Dementia Group (ongoing support once diagnosis received).
- Dementia and End of Life Care Group.

The work of these time-limited work groups will be overseen by the Older Peoples Mental Health (OPMH) Group.

Dementia Prevention Group

Challenges to be addressed:

- Reduction in stigma and discrimination.
- Develop a Public Health Dementia Awareness Initiative (linked to Dementia Friendly Communities).
- Reduce the number of falls experienced by people with dementia.
- Decrease stress; promote health & wellbeing in the carers of people with dementia.
- Improve carer experience.
- Promote healthy lifestyles.
- Workforce development

Progress so far:

- Development of multi-agency prevention group established.
- Dementia Prevention Gap Analysis and action plan commenced.
- Mental health first aid training for front line staff in place.
- Public health working with RMBC on the delivery of its small grants scheme for community groups which will address challenges raised by the group.

Dementia Early Diagnosis Group

Challenges to be addressed:

- Anticipated increase in the rate of diagnosis of patients with Dementia.
- Review the future capacity, demand and delivery in view of the financial restraints and increasing demand.
- Complete a review of the Dementia pathway relating to the primary care / RDaSH interface.
- Review the referral criteria for primary care referrals to the RDaSH older people services.
- Agree a TRFT/RDaSH Dementia pathway for the delivery of the 2012/13 Dementia CQUIN.
- Review the service implications of the 2013/13 Community Dementia CQUIN * on both the RFT and RDASH services.
- Diagnostic Capacity issues (CT scanner) versus pre-screening in primary care.

Progress so far:

- A joint review of the dementia diagnosis pathway has commenced.
- Draft Primary Care Referral Criteria produced for consultation
- Review of the memory clinic carer support provision completed and recommendation produced.
- Phase 1 Review of people with Mild Cognitive Impairment (MCI) completed and Recommendation produced.
- TRFT /RDaSH Dementia CQUIN pathway launched in October 2012 with screening commenced in November 2012.

**Commissioning for Quality and Innovation (CQUIN)
- a quality improvement objective which is incentivised through a CQUIN scheme*

Living Well with Dementia Group

Planned & Unscheduled Care Challenges to be addressed:

- Support people with Dementia to live in community settings and maintain their independence for longer by developing high-quality, compassionate community care.
- Ensure Provider Medication policies are in line with Contract requirements.
- Reduction of inappropriate admissions to hospital by providing better community support, such as specialist services and carers support.
- To ensure that people with Dementia do not stay longer in hospital than those without Dementia.
- Reduction in the delay discharges experienced by people with Dementia.
- Improve carers support and quality of life (reduction in carer fatigue).
- Improve patient carers' experience.

Planned & Unscheduled Care Progress so far:

- Living Well with Dementia Group action plan produced.
- Service reviews and 2013/14 contract discussions have commenced for a number of the Rotherham CCG Providers of Dementia care.
- Dementia Unscheduled Care Summit 28th November 2012. A stakeholder event attended by a wide range of stakeholders from TRFT, RDaSH, RCCG, Voluntary Sector, Patients and Carers.
- Work has commenced to align the Rotherham Carers and Dementia Strategies.
- Initial consultation on the Joint Commissioning Dementia Strategy completed.

Dementia Unscheduled Care Event Challenges to be addressed:

- Reduction of inappropriate admissions to hospital by providing better community support, such as specialist services and carers support.
- To ensure that people with Dementia do not stay longer in hospital than those without Dementia.
- Reduction in the delay discharges experienced by people with Dementia.
- Improve carers support and quality of life (reduction in carer fatigue).

Dementia Unscheduled Care Event Key emerging themes:

Dementia Unscheduled Care Summit 28th November 2012. A stakeholder event attended by a wide range of stakeholders from TRFT, RDaSH, RCCG, Voluntary Sector, Patients and Carers.

- The importance of aligning CCG commissioning intentions with other commissioners (RMBC adult service and public health) but noting that organisations are working to different time scales
- In order to deal with the scale of the challenge it is likely there will need to be further investment in the existing Mental Health Liaison service – the use of this model in other areas of the country has demonstrated some significant savings in acute services.
- Carers support - The importance of carers in maintaining people with dementia in the community for longer. The need to link the dementia and carer strategies was also noted.
- The need to develop a local Public Health Dementia Awareness initiative.
- Once the strategy is agreed the need to have an effective delivery group. This might be through a fourth QIPP group covering mental health and dementia.

Dementia & End of Life Care Group (EOLC)

Challenges to be addressed:

- To ensure the End of Life Care (EOLC) pathway meets the needs of people with Dementia.

Progress so far:

- Work is ongoing to align this to the RCGG End of Life Care (EOLC) pilot.

Other Related Dementia Areas of Work

Clinical Waiting Times Group

- Challenges to be addressed:

- Develop a more transparent way of measuring and recording waiting times.
- Implement an 18 week waiting target across RDaSH Dementia services.

Clinical Waiting Times Group - Progress so far:

- Memory clinic waiting times technical pathway developed. Consultation ongoing.
- Clinical Waiting times Group established. This is a joint clinical group with GP and psychiatry representation. To agree clinical 'Clock stops'

The Right Prescription – Anti-psychotic Prescribing (SHA funded Project)

Challenges to be addressed:

- To improve the commissioning of health and social care services to support people with Dementia and their carers.

Progress so far:

- RDASH antipsychotic register for patients with dementia is now fully operational and available to clinical staff to prompt clinical reviews.
- Prescribing Observatory for Mental Health (POMH) 11a topic antipsychotic use in dementia, re-audit completed August/September 2012.
- Antipsychotic pre-discharge protocol in use in The Rotherham Foundation NHS Trust.
- "Call 2 Action" clinician appointed due to commence December 2012.

Joint Commissioning & Partnership Working

Joint Dementia Commissioning Group

Challenges to be addressed:

- To improve the commissioning of health and social care services to support people with Dementia and their carers.
- A Joint Rotherham Commissioning Strategy for Dementia.

Joint Dementia Commissioning Group Progress so far:

- RCCG and RMBC Commissioners have established a joint commissioning group.
- An initial Commissioning review of Health and Social Care services delivering Dementia care across Rotherham has been completed.
- RCCG's Annual Commissioning Plan (ACP) development commenced. This plan will be aligned with Rotherham 'Health and Wellbeing Strategy.'

Partnership Working - Challenges to be addressed:

Partnership working with key stakeholders from across the district will be essential to ensure the successful delivery of the dementia pathway. In particular the CCG with endeavour to work with partners to deliver:

- The Prime Minister's Dementia Challenge across Rotherham.
- A Public Health Programme focusing on:
 - The development of Dementia Friendly Communities.
 - The inclusion of Dementia in the NHS Health Check.
 - To ensure that high quality information and support is provided to people with Dementia, carers, health and social care staff and the wider Rotherham public.
- To ensure alignment of the Joint Rotherham Commissioning Strategy for Dementia and Rotherham Carers Strategies.

Partnership Working - Progress so far:

- TRFT have signed up to the Dementia Friendly Environments initiative. Phase 1: Acute Service Roll out (TRFT/RCCG contract).
- Dementia Prevention Group established and Action Plan commenced.
- Work has commenced on aligning the Joint Rotherham Commissioning Strategy for Dementia and Rotherham Carers Strategies.
- The development of the Rotherham CCG Dementia Strategy process has involved consultation with stakeholders, patients and their carer

4.0 Rotherham CCG Dementia Strategy Priorities

4.1 Delivery:

The CCG will endeavour to work through the Health and Wellbeing Board partners to delivery this Dementia Strategy and will provide clinical leadership to its multi-agency partners.

Rotherham CCG will prioritise the majority of its efforts in 2013/14 towards delivering the following priorities:

- To establish a Mental Health and Learning Disability QIPP Group to oversee the Rotherham Efficiency programme and implementation of the CCGs Dementia Strategy by the end of January 2013.
- To ensure that all of the following groups have an approved Action Plan with clearly identified milestones in place by the 1st April 2013.
 - Dementia - Prevention Group.
 - Dementia – Early Diagnosis Group.
 - Living Well with Dementia Group.
 - Dementia and End of Life Care Group.
- To reduce unacceptable delays and improve access times to services commissioned by the CCG healthcare for people with dementia by:
 - Working with RDaSH to develop a clear and transparent waiting times measurement process to be completed by April 2013.
 - Implementation of the waiting time measurement process by October 2013.
- To work with partners to endeavour that a draft Joint Dementia Commissioning Plan is available for consultation by April 2013.
- To work with partners to support the Strategic Clinical Network.

- To have undertaken a review of GP referral diagnosis pathway process and diagnostic capacity:
 - Produce a recommendation report by 31st March 2013.
 - Implementation of new GP referral diagnosis pathway to be completed before December 2013.

- The CCG will invest in a new adult mental health liaison service for people presenting to acute hospitals with mental health problems including dementia.
 - Prepare an adult mental health liaison service business case for approval (March 2013).
 - Procurement of the adult mental health liaison service (September 2013).
 - Implementation of the adult mental health liaison service (September/October 2013).