

**WOLVERHAMPTON CCG**

**Governing Body**  
**9 April 2019**

**Agenda item 8**

<b>TITLE OF REPORT:</b>	Joint Dementia Strategy for Wolverhampton
<b>AUTHOR(s) OF REPORT:</b>	Sarah Fellows
<b>MANAGEMENT LEAD:</b>	Steven Marshall
<b>PURPOSE OF REPORT:</b>	For approval
<b>ACTION REQUIRED:</b>	<input checked="" type="checkbox"/> <b>Decision</b> <input type="checkbox"/> <b>Assurance</b>
<b>PUBLIC OR PRIVATE:</b>	Public
<b>KEY POINTS:</b>	<ul style="list-style-type: none"> <li>• The Joint Dementia Strategy is an overarching document that incorporates City of Wolverhampton Council and NHS Wolverhampton CCG's commissioning intentions. It includes not just commissioned services to support people with a dementia diagnosis, but wider public services and workstreams to prevent dementia risk factors and promote community asset-based services to enable people affected by dementia to live well in their community.</li> <li>• The Joint Dementia Strategy was informed and developed by an extensive consultation that was carried out as part of the development for the Strategy and the Joint Strategic Needs Assessment (JSNA) completed in February 2019 by Public Health. Initial feedback was sought on the draft Strategy and JSNA from Public Health, Council and NHS professionals, members of the Wolverhampton Dementia Action Alliance and the voluntary sector.</li> <li>• An action plan has been developed to accompany the Strategy document. This will be a living document.</li> </ul>

<b>RECOMMENDATION:</b>	For approval and sign off
<b>LINK TO BOARD ASSURANCE FRAMEWORK AIMS &amp; OBJECTIVES:</b>	
1. Improving the quality and safety of the services we commission	The new Strategy ensures we are providing high quality Dementia services for our population and in line with our STP footprint partners.
2. Reducing Health Inequalities in Wolverhampton	This Strategy ensures that no matter where you reside, your quality of care will be the equal and of a good standard.
3. System effectiveness delivered within our financial envelope	By collaborating with the STP stakeholders, we are able to ensure that any cost saving by the unifying of services, can be moved elsewhere, to services that are underfunded.

## 1. BACKGROUND AND CURRENT SITUATION

- 1.1 The City of Wolverhampton's previous strategy was developed in 2015 by a multi-agency partnership. Since 2015 there has been significant progress in developing and delivering support to people affected by Dementia, including families and carers. This includes Wolverhampton Dementia Action Alliance being recognised as Dementia Friendly Community of the Year 2018 by the Alzheimer's Society.
- 1.2 Dementia is one of the world's major causes of disability and dependency in older people. It has an impact on the quality of life of not only those that have Dementia, but of their families and carers too. The Impact on carers and family can be physical, psychological, social and economic. There is often a lack of awareness and understanding of Dementia, which can result in stigmatisation of the disease and barriers to care and diagnosis. Worldwide, the number of people with Dementia is estimated to triple by 2050. In 2015, the cost of Dementia to the global community was \$818 Billion and is estimated to cost \$2 Trillion by 2030.

(JSNA <http://www.who.int/mediacentre/factsheets/fs362/en/>)

- 1.3 The Prime Ministers Challenge stated the Governments key aspirations and commitment for improving Dementia support services in England by 2020:
- “The best country in the world for dementia care and support and for people with dementia, their carers and families to live; and
  - “The best place in the world to undertake research into dementia and other neurodegenerative diseases”. The updated Strategy is aligned to the priorities outlined in the Prime Ministers Challenge.

## **2. NATIONAL AND LOCAL CONTEXT**

2.1 According to The Prime Ministers Challenge 2020 document:

- There are 676,000 people with Dementia living in England and this figure is set to grow.
- Dementia costs society an estimated £26 billion a year, more than the costs of cancer, heart disease or stroke.
- A recent study estimated that by 2030, dementia will cost companies more than £3 billion, with the numbers of people who will have left employment to care for people with dementia set to rise from 50,000 in 2014 to 83,100 in 2030.

2.2 In Wolverhampton:<sup>1</sup>

- It is estimated that there are over 3,000 people living with dementia
- It is projected that this figure will rise to 4,703 people by 2035
- The JSNA for Dementia in Wolverhampton statistics demonstrated the relatively high prevalence of dementia in the City of Wolverhampton, with approximately five percent of citizens aged 65 and over living with the condition.

2.3 Recommendation in the JSNA include connecting people to support services earlier, ensuring that Black and Minority Ethnic Groups can access support, and promotion of both prevention messages and existing support available.

## **3 JOINT DEMENTIA STRATEGY**

3.1 The Joint Dementia Strategy is underpinned by the topic specific Joint Strategic Needs Assessment (JSNA). The aim of this JSNA was to analyse the current and future ‘needs’ of people living with dementia, and their carers, in the City of Wolverhampton. Both the Strategy and JSNA were informed by extensive consultation. This included:

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<sup>1</sup> Source: <http://www.poppi.org.uk/>

1. A public and professionals Survey completed in 2018, which included specific questions related to dementia support and barriers.
  2. Focus groups with the community such as people affected by dementia, professionals and carers. The JSNA also analysed, local and national data sources.
  3. JSNA and Strategy Development Groups.
- 3.2 Reflecting both the local and national vision for transforming dementia care and support, the 2015 strategy seeks to develop proactive services and ensure good quality care and support that best meets the needs of people living with dementia, their families and carers. It follows a person-centred approach, aligned with NICE Quality statements and Prime Ministers Challenge on Dementia. This updated strategy keeps these central themes whilst recognising the opportunity to redesign services in a challenging climate with growing demand on resources.
- 3.3 The updated Strategy was developed in partnership with Public Health, Council, Health Professionals and voluntary sector representatives. A Dementia Strategy Group met bi-monthly to review and discuss the pathways, need and demand to support people affected by dementia. The NHS Living Well Pathway for Dementia was used to provide thematic group discussions and ensure all elements of the pathway was discussed. This framework underpins the updated Joint Dementia Strategy 2019-2024 as detailed below and is grouped into:

Preventing Well, Diagnosing Well, Living Well, Supporting Well and Dying Well

***Our Aims for people affected by Dementia in Wolverhampton***

<b>Prevent ing Well</b>	The City of Wolverhampton will be 'memory aware' and promote risk reduction through healthy lifestyles.
<b>Diagnosing Well</b>	People living with dementia in the City of Wolverhampton will receive a timely diagnosis with an offer of early support.
<b>Living Well</b>	The City of Wolverhampton will be a Dementia Friendly City that supports people to continue to live well and connect to their community
<b>Supporting Well</b>	People living with dementia in the City of Wolverhampton will receive support that adapts to changing needs with access to good quality secondary care
<b>Dying Well</b>	People with dementia in the City of Wolverhampton can die with dignity and respect

- 3.4 In developing the updated Strategy it is recognised that there are good pockets of practice, however, this support was not always clear to individuals and professionals, and that work is to be joined up across the wider system. This Strategy will help to avoid unnecessary duplication and allows the identification of any gaps or unmet need.
- 3.5 The Joint Dementia Strategy provides a high-level summary of current achievements and planned workstreams across the City of Wolverhampton Council and CCG to promote messages of prevention, including specific pieces of work to engage with Black and Minority ethnic groups through all levels of support including being able to

use good practice such as advance end of life care planning. It provides key actions, covering all levels of support from universal to specialist services.

- 3.6 The aim is to not only meet the specific needs of people diagnosed with dementia but also recognise the levels of support required as a person ages, or their dementia advances, whilst promoting positive messages of wellbeing and related risk factors.

#### **4 KEY THEMES IN THE JOINT DEMENTIA STRATEGY**

- 4.1 In addition to the recommendations of the JSNA, the key redesign highlighted in the Strategy is the development of a new integrated offer that supports the delivery of targeted specialist care and support in people's homes, this also includes residential care homes.
- 4.2 The Strategy also highlights gaps in the community pathway to support people with dementia to access day/community respite.
- 4.3 There is a commitment in the Strategy to engage with Black and Minority ethnic communities.
- 4.4 The partners are requested to continue to work together to deliver the actions and utilise partnership working groups including the Better Care Fund workstreams.
- 4.5 This updated Strategy has provided a framework for developing an action plan based on systematic identification of where support may be lacking, and opportunities for working across teams, sectors and organisations to deliver quality outcomes during challenging demands and budget pressures.

#### **5 SPECIFICATIONS IN SCOPE**

- 5.1 There are a range of specifications in scope which, agreed collaboratively between all Commissioners and Providers in the Black Country were selected as they provide real opportunities for:
- Providing opportunities of scale and scope is commissioned and delivered as one
  - Will minimise clinical variation across the services provided in the BC
  - Close service provision gaps through freeing up funding

#### **6 CLINICAL VIEW**

The Dementia Strategy has been collaboratively developed with Provider Clinicians and concurrent to the governance process; they are also being signed off by Provider Clinical Governance process.

## **7 PATIENT AND PUBLIC VIEW**

Both the Strategy and JSNA were informed by extensive consultation. This included:

- A public and professionals Survey completed in 2018, which included specific questions related to dementia support and barriers.
- Focus groups with the community such as people affected by dementia, professionals and carers. The JSNA also analysed, local and national data sources.
- JSNA and Strategy Development Groups.

## **8 KEY RISKS AND MITIGATIONS**

N/A

## **9 IMPACT ASSESSMENT**

### ***Financial and Resource Implications***

- a. There are no financial implications arising directly from this report. Any costs related to delivery of the strategy will be met from existing budgets.

### ***Quality and Safety Implications***

- b. Quality and safety implications will be defined within the Dementia Strategy Action Plan.

### ***Equality Implications***

- c. A reduction in health inequalities is an overarching aim of the Strategy. Equalities impact assessments will be carried out as appropriate within the work programmes that make up the overarching Strategy.
- d. The Strategy is inclusive and considers support for all needs and will continue to develop an understanding of potential barriers to access support and services. For example considering the particular concerns from the Black and Minority Ethnic Groups, the deaf community and adults experiencing sight loss.
- e. The Council and CCG are committed to ensuring the correct assessments are completed through any associated projects.

***Legal and Policy Implications***

- f The CCG has statutory obligations to commission safe, effective services that deliver value for money in partnership with key stakeholders and in response to levels of need and service user and carer views. This is in keeping with the seven key principles of the NHS Constitution (2015) and also with operational and planning guidance as laid out in the mandate to NHS England by the Department of Health.

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**Date:** 9 April 2019

**ATTACHED:**

Dementia Strategy  
Joint Needs Strategy Assessment