

WOLVERHAMPTON CCG

Governing Body
9 July 2019

Agenda item 14

TITLE OF REPORT:	Joint Dementia Strategy for Wolverhampton Implementation Plan
AUTHOR(s) OF REPORT:	Lisa Murray, Business Manager, Mental Health
MANAGEMENT LEAD:	Sarah Fellows, Head of Mental Health
PURPOSE OF REPORT:	To provide an update as requested on progress on implementing the Joint Dementia Strategy that was launched in May 2019.
ACTION REQUIRED:	<input type="checkbox"/> Decision <input checked="" type="checkbox"/> Assurance
PUBLIC OR PRIVATE:	This Report is intended for the public domain OR This report is confidential for the following reasons
KEY POINTS:	<ul style="list-style-type: none"> • Following the Governing Body Report in April 2019, the Joint Dementia Strategy was launched in May 2019 following extensive consultation. • A Dementia Strategy Delivery Group has been set up to deliver the joint Dementia Strategy in Wolverhampton. • The remit of the Dementia Strategy Delivery Group is to ensure the Joint Dementia Strategy is implemented across Wolverhampton. • The NHS Living Well Pathway for Dementia was used to provide thematic group discussions and ensure all elements of the pathway was discussed. The Strategy underpins the Joint Dementia Strategy 2019 – 2024 and is grouped into: <ul style="list-style-type: none"> ○ Preventing Well ○ Diagnosing Well ○ Living Well ○ Supporting Well ○ Dying Well • These themes form the basis for the Implementation Plan (Appendix I). • Activity leads are across partner organisations as well as NHS Wolverhampton CCG.

RECOMMENDATION:	To please note and be assured that the Joint Dementia Strategy will be delivered.
LINK TO BOARD ASSURANCE FRAMEWORK AIMS & OBJECTIVES:	
1. Improving the quality and safety of the services we commission	The Joint Dementia 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	The Joint Dementia 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 savings by the unifying of services, can be moved elsewhere, to services that are underfunded.

1. BACKGROUND AND CURRENT SITUATION

1.1. Wolverhampton's previous strategy was developed in 2015. Since then 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 which was recognised as Dementia Friendly Community of the Year 2018 by the Alzheimer's Society.

1.2. In Wolverhampton:

- It is estimated that there are over 3000 people living with dementia
- It is projected that this figure will rise to 4703 people by 2035
- The Joint Strategic Needs Assessment (JSNA) for Dementia in Wolverhampton statistics demonstrated the relatively high prevalence of dementia in Wolverhampton with approximately 5% of citizens aged 65 and over are living with the condition.

1.3. Throughout the work, the Joint Dementia Strategy has adhered to the principles of coproduction. This has involved strong engagement with multiple stakeholders including people living with dementia, their families and carers, Black Country Partnership NHS Foundation Trust, The Royal Wolverhampton's NHS Trust, the Local Authority, Alzheimer's Society, other voluntary sector providers, care home sector and local councillors.

- 1.4. A Dementia Strategy Group met monthly to review and discuss the pathways, need and demand to support people affected by dementia.
- 1.5. The Joint Dementia Strategy provided a framework for developing an action plan 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.
- 1.6. Following the launch of the Joint Dementia Strategy in May 2019, an Implementation Plan was drafted and meetings held to agree the activities and responsible leads. The responsible leads will report into the Dementia Strategy Delivery Board on a monthly basis. Responsible leads are across our multiple stakeholders including Black Country Partnership NHS Foundation Trust, The Royal Wolverhampton's NHS Trust and the Local Authority.
- 1.7. As the Joint Dementia Strategy highlights gaps in the community pathway to support people with dementia to access day / community care, this consideration has been included in the Implementation Plan to fill those gaps.
- 1.8. The Joint Dementia Strategy, and Dementia Strategy Implementation Plan, also provide a commitment to engage with Black and Minority ethnic communities.
- 1.9. The Joint Dementia Strategy Implementation Plan is a live document and any actions without a responsible action lead will be finalised at the next meeting scheduled for 16 July. However some actions are already progressing. The Joint Dementia Strategy Implementation Plan is attached as Appendix I.

2. CLINICAL VIEW

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

3. PATIENT AND PUBLIC VIEW

- 3.1. The Joint Strategy has adhered to the principles of coproduction. This has involved strong engagement with multiple stakeholders including people living with dementia, their families and carers, Black Country Partnership NHS Foundation Trust, The Royal Wolverhampton's NHS Trust, the Local Authority, Alzheimer's Society, other voluntary sector providers, care home sector and local councillors. This included:
 - A public and professionals Survey completed in 2018, which included questions related to dementia support and barriers
 - Focus groups with the community.
 - JSNA was analysed; local and national data sources
 - JSNA and Strategy Development Groups

4. KEY RISKS AND MITIGATIONS

4.1. NA

5. IMPACT ASSESSMENT

Financial and Resource Implications

5.1. Any costs related to delivery of the strategy will be met from existing budgets.

Quality and Safety Implications

5.2. Quality and safety implications are defined within the Dementia Strategy Action Plan

Equality Implications

5.3. A reduction in health equalities is an overarching aim of the Strategy. Equalities impact assessments will be carried out as appropriate within the work programmes.

5.4. The Strategy and Implementation Plan 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.

5.5. The Local Authority and NHS Wolverhampton CCG are committed to ensuring the correct assessments are completed throughout the Implementation Plan projects.

Legal and Policy Implications

5.6. 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.

Name	Lisa Murray
Job Title	Business Manager, Mental Health Services
Date:	9 July 2019

ATTACHED:

Joint Dementia Strategy Implementation Plan

REPORT SIGN-OFF CHECKLIST

This section must be completed before the report is submitted to the Admin team. If any of these steps are not applicable please indicate, do not leave blank.

	Details/ Name	Date
Clinical View	BCPFT, RWT	Representation at Dementia Strategy Group
Public/ Patient View	Ongoing via Public and Patient groups	Representation at Dementia Strategy Group
Finance Implications discussed with Finance Team	NA	
Quality Implications discussed with Quality and Risk Team	Molly Henriques-Dillon	Representation at Dementia Strategy Group
Equality Implications discussed with CSU Equality and Inclusion Service	Public Health	Representation at Dementia Strategy Group
Information Governance implications discussed with IG Support Officer	NA	
Legal/ Policy implications discussed with Corporate Operations Manager	NA	
Other Implications (Medicines management, estates, HR, IM&T etc.)	NA	
Any relevant data requirements discussed with CSU Business Intelligence	NA	
Signed off by Report Owner (Must be completed)	Lisa Murray	9 July 2019