

**CABINET – 9 MARCH 2018****DRAFT LEICESTER, LEICESTERSHIRE AND RUTLAND LIVING WELL
WITH DEMENTIA STRATEGY 2019–2022****REPORT OF THE DIRECTOR OF ADULTS AND COMMUNITIES****PART A****Purpose of the Report**

1. The purpose of this report is to seek the Cabinet's approval to consult on the draft Leicester, Leicestershire and Rutland (LLR) Living Well with Dementia Strategy 2019–2022. This is intended as a joint Strategy with all local authorities and Clinical Commissioning Groups (CCGs) across LLR and sets out the draft strategic priorities relating to dementia.

Recommendations

2. It is recommended that:
 - a) The draft LLR Living Well with Dementia Strategy 2019–2022 (attached as Appendix A to this report) be approved for consultation;
 - b) A further report be submitted to the Cabinet in autumn 2018 regarding the outcome of the consultation and presenting the final LLR Living Well with Dementia Strategy 2019-2022 for approval and subsequent implementation.

Reasons for Recommendations

3. The Director of Adults and Communities requires the Cabinet's permission to undertake a formal joint consultation alongside Leicester City Council, Rutland Council, Leicester City CCG, West Leicestershire CCG and East Leicestershire and Rutland CCG on the priorities and actions identified for supporting people with Dementia, their carers and families.
4. Following significant stakeholder engagement, the draft Strategy has been developed alongside partner agencies. Amendments may be required to the draft Strategy after formal consultation responses are received.

Timetable for Decisions (including Scrutiny)

5. The draft Strategy will be considered through relevant partner governance arrangements during February and March 2018.
6. A nine week public consultation will be undertaken once the draft Strategy has been agreed by all partner organisations'. As there will not be a meeting of the

County Council's Adults and Communities Overview and Scrutiny Committee during the consultation period, the draft Strategy will be presented to this Committee on 6 March 2018 and its comments will be reported to the Cabinet.

7. The consultation outcomes, the final Dementia Strategy and an implementation plan for Leicestershire will be reported to the Cabinet in autumn 2018.

Policy Framework and Previous Decisions

8. The relevant policy framework includes:
 - The Care Act 2014;
 - The Equality Act 2010;
 - Prime Minister's Challenge on Dementia;
 - Better Care Together Five Year Strategic Plan 2014-2019;
 - The Sustainability and Transformation Plan (STP);
 - The Leicestershire Adult Social Care Strategy 2016-2020;
 - Leicestershire County Council Provisional Medium Term Financial Strategy (MTFS) 2016/17-2019/20.
9. In April 2015, the first phase of the Care Act 2014 was implemented. The Act replaces most previous laws and includes reforms of health and social care, prioritising people's wellbeing, needs and goals.

Resource Implications

10. There are no resource implications arising directly from this report. However, the Strategy, along with the stakeholder and consultation feedback received, will be used to shape future commissioning decisions for Dementia services.
11. The Director of Corporate Resources and the Director of Law and Governance have been consulted on the content of this report.

Circulation under the Local Issues Alert Procedure

12. This report has been circulated to all Members of the County Council via the Members' News in Brief.

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PART B

Background

The Law relating to Dementia Support

13. The Care Act 2014 introduced new responsibilities for local authorities from April 2015. This requires local authorities and health partners to work together to integrate services where possible, in order to provide seamless support, avoid duplication and achieve best value for money.

The Prime Minister's Challenge on Dementia 2020

14. In February 2015, the Department of Health published the above document detailing why Dementia remains a priority and outlining the challenges faced by the UK. The key priorities identified were threefold; to improve health and care, to promote awareness and understanding, and to invest in research.

The Leicester, Leicestershire and Rutland Dementia Strategy

15. The Dementia Programme Board, with membership across partnership organisations including CCGs, local authorities, University Hospitals of Leicester, voluntary organisations, the police and De Montfort University, has drafted the Dementia Strategy and the high level delivery plan. The multi-agency partnership works to ensure that interdependencies are identified.
16. Funding is not addressed directly within the Strategy. However, available resources will be reflected in individual organisational plans that will be developed by partners setting out their role in the delivery of the Strategy.
17. The Adult Social Care Strategy 2016-2020 is the key local document that will influence the delivery of the Strategy by the County Council.

Local Strategic Responses

18. The Better Care Together (BCT) Five Year Strategic Plan establishes the future shape of health and social care services across LLR. The Plan addresses demand issues in the system as the population is ageing and living longer with more complex, long term needs.
19. The BCT Plan sets out the actions that need to be taken across the health and care system in LLR over the next five years in order to improve health outcomes and ensure services are safe, of a high quality and within the financial resources available. The Strategy builds on the vision of the existing BCT programme to "Support you through every stage of life, helping children and parents so they have the very best start in life, helping you stay well in mind and body, and caring for the most vulnerable and frail and when life comes to an end."

Dementia Support in Leicestershire

20. The estimated number of people with dementia in Leicestershire is 9,642 of which 9,548 (99%) are over the age of 65. The total population of people aged 65 and

over in Leicestershire is some 139,400, so 6.8% of this cohort are living with dementia.

21. The dementia diagnosis indicator compares the number of people thought to have dementia with the number of people diagnosed with dementia. The target set by NHS England is that two thirds (67%) of people with dementia are diagnosed.
22. All CCG areas are meeting the 67% national target in relation to diagnosis rates and appropriate referrals are being made to memory assessment clinics, underpinned by a shared care agreement. As at November 2017, the overall diagnosis rate across LLR was 74%, with a relatively higher performance of 87% in Leicester City, 73% in West Leicestershire and 67% in East Leicestershire and Rutland.
23. General Practitioners (GPs) have been supported to understand and promote key preventative messages, as well as developing health checks and a dementia friendly GP toolkit.
24. The memory pathway is well embedded across the area with good connections between primary care, memory clinics, post diagnostic support services, and social care.
25. The total demand-led budget for 2017/18 to support people in Leicestershire whose primary need relates to memory and cognition is £6.77m and this provides for residential, domiciliary and other services commissioned to support such individuals. This includes brain injury and developmental disabilities but the majority will be spent upon people with a diagnosis of dementia. It must also be noted that some dementia support may be delivered within the cost of mental health and physical health support because dementia is not always identified as the primary support need. This does not therefore represent dementia support costs in their totality.
26. The jointly commissioned Dementia Support Service (health and social care across Leicester and Leicestershire) began in October 2017, offering a single point of access for people with dementia, carers and professionals. Total joint funding by the partners for this service is £495,000 per annum, of which the County Council's contribution is £281,000 from the Better Care Fund (approved by the Cabinet on 10 March 2017).
27. In addition to the Dementia Support Service, there is a range of support across Leicester and Leicestershire for people with dementia and carers. This includes advice, information, training and carer respite. Advocacy and safeguarding services are in place, assistive technology solutions are widely offered, and a variety of social opportunities such as activity groups, memory cafes and befriending are available to support people and carers to live well with dementia.
28. Contract monitoring is led by Leicester City Council (the lead commissioner and contract holder), involving and reporting to the contributing organisations' commissioners in order to ensure equitable provision across Leicester and Leicestershire, and to ensure people with dementia across all these areas are cared for and supported well.

29. Provision in Rutland is aligned to the Leicester and Leicestershire service, but operates separately to facilitate links with Peterborough hospitals used by many Rutland residents.
30. NHS and social care organisations offer staff training programmes, and strong links have been made with the local Dementia Action Alliance social movement to recruit dementia friends and work towards creating more dementia friendly communities.

Engagement

31. Engagement with people living with dementia and their carers has been undertaken across the area to understand their experiences of the health and social care system to inform future work.
32. Visits to dementia cafes, carers groups and activity groups in 2017 identified support for strengthening locality based approaches, working closely with both primary and secondary care services, and the importance of post diagnostic support.
33. Other issues which emerged during initial engagement with stakeholders were the importance of good links between the provider and primary care services, to ensure appropriate referral pathways are understood and used, the need for good, timely, accessible information, and the value placed upon peer support found in groups and dementia cafes.

The draft LLR Living Well with Dementia Strategy

34. The development of the draft Strategy has been overseen by the LLR Dementia Programme Board. It has been guided by principles developed by NHS England in its transformation framework, the “Well Pathway for Dementia”, based on NICE guidelines, the Organisation for Economic Co-operation and Development Framework for Dementia, and the Dementia “I” statements from the National Dementia Declaration.
35. The “Well Pathway for Dementia” has five key aims:
 - Preventing well: the risk of people developing dementia is minimised.
 - Diagnosing well: timely, accurate diagnosis, care plan, and review within the first year
 - Supporting well: access to safe, high quality health and social care for people with dementia and carers
 - Living well: people with dementia can live normally in safe and accepting communities
 - Dying well: people living with dementia die with dignity in the place of their choosing.

The draft LLR Strategy Delivery Plan

36. The Strategy Delivery Plan identifies key activity under each of the five “Well” headings, with the responsible lead agency (pages 11-13).

37. Each member of the LLR Dementia Programme Board will reflect these delivery actions in their own organisational plans and the needs of under-represented groups will be considered in all of the actions listed.
38. With regard to 'Preventing Well', work is ongoing to develop dementia friendly GP practices and the promotion of health checks in Primary Care.
39. Promoting the memory pathway, developing a process to increase the number of people being diagnosed within six weeks of referral and working with care homes to pilot the dementia diagnosis toolkit are all key aspects of the 'Diagnosing Well' theme.
40. Within 'Supporting Well', raising awareness of dementia amongst housing providers, together with focusing on improving in-patient experience and discharge are two of a number of important initiatives.
41. Supporting work to improve care for people with complex dementia in care homes and reviewing care and support standards across LLR together with a number of other strands of work form the 'Living Well' with dementia theme.
42. Finally, with regard to 'Dying Well', stronger links have been formed with the Sustainability and Transformation Partnership (STP) End of Life workstream to highlight the needs of those with dementia.
43. The delivery plan will be refreshed on an annual basis to ensure its relevance.

Consultation

44. Formal consultation would assure the partnership that the draft Strategy fairly reflects the priorities from all stakeholder perspectives and supports the development of a more detailed implementation plan for Leicestershire.
45. Subject to approval from all partners, it is intended that the consultation will be undertaken for a minimum of six weeks.
46. The consultation will seek the views of the general public, carers, service users, stakeholders and partners through an online questionnaire and targeted consultation with carers, particularly those currently accessing support from the Council.
47. Staff will be actively encouraged to participate through the online survey.
48. Outcomes of the consultation will determine the final version of the Dementia Strategy for the next three years; establish future implementation plans across the partnership and specific actions for Leicestershire and inform the approach to support and guide future commissioning decisions.

Background Papers

Report to the Cabinet – 5 February 2016 - Adult Social Care Strategy 2016-2020
<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4599&Ver=4>

Report to the Cabinet – 10 March 2017 – Better Care Fund Plan 2017/18 – 2018/19

<http://politics.leics.gov.uk/ieListDocuments.aspx?CId=135&MId=4859&Ver=4>

List of Appendices

- Appendix A – Draft Leicester, Leicestershire and Rutland Living Well with Dementia Strategy 2019 – 2022
- Appendix B – Equalities and Human Rights Impact Assessment

Equalities and Human Rights Implications

49. A joint Equalities and Human Rights Impact Assessment (EHRIA) screening, including improvement actions to address equalities issues already identified, has been undertaken (attached as Appendix B). This was considered by the Adults and Communities Departmental Equalities Group on 19 February 2018.
50. The EHRIA noted that dementia is seen primarily as an illness affecting older people, and that attention must be paid to the needs of younger people to ensure opportunities to engage in consultation and contribute to future service developments, and to ensure availability of age-appropriate services.
51. The EHRIA has not identified any unlawful discrimination against anyone with a protected characteristic, and reached the conclusion that the strategy should have a positive impact. It did, however, highlight the need for proactive engagement with people with protected characteristics where it is known they have a higher risk of developing dementia or a lower take-up of services, to ensure equity of access and provision of support appropriate to their specific needs.
52. Robust monitoring of protected characteristics by all partners, in relation to delivery of both the strategic action plan and dementia services, is required to ensure equality issues are addressed, and this will be overseen by the Dementia Programme Board at its bi-monthly meetings.
53. The outcome of the consultation will assist in identifying any further Equalities and Human Rights impacts and these will be reported to the Cabinet.

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