North Tyneside Council Report to Cabinet Date: 16th April 2012

ITEM 6(b)

Title: Progress report on North Tyneside Joint Action Plan for the delivery of the National Dementia Strategy

Tel: (0191) 643 7317

Portfolio(s): Adult Social Care Cabinet Member(s): Councillor Leslie Miller

Report from Community Services

Directorate:

Report Author: Jacqui Old, Head of Adult

Social Care

Wards affected: All

PART 1

1.1 Purpose:

The purpose of the report is to update Cabinet on the progress made in relation to North Tyneside's Joint Action Plan for Delivery of the National Dementia Strategy, as requested by Cabinet on 13th June 2011.

The report also highlights the improvements made toward supporting people with dementia and their carers in North Tyneside including:

- The Dementia Adviser Service providing advice, information and signposting to people with dementia and their carers to provide opportunities for people with dementia to discuss their diagnosis and various aspects of living with dementia;
- Additional opportunities for stimulating social activity;
- The provision of a specialist community resource for people with dementia; and
- Improved opportunities for training people who care and support people with dementia.

1.2 Recommendation(s):

It is recommended that Cabinet:

- a) Note the further progress made in the development of services for people with dementia and their carers, as set out in this report.
- b) Receive an annual update regarding the progress of dementia support and services in North Tyneside through the Local Account. The Local Account is an annual report about Adult Social Care and the services the Council provides.

1.3 Forward Plan:

This report appears on the Forward Plan for the period 1st March to 30th June 2012.

1.4 Council Plan and Policy Framework

This is an update to Cabinet requested in June 2011 following work agreed in the 2011/12 Council Plan.

1.5 Background

1.5.1 Dementia

The term 'dementia' is used to describe a collection of symptoms, including a decline in memory, reasoning and communication skills, and a gradual loss of skills needed to carry out daily activities. These symptoms are caused by structural and chemical changes in the brain as a result of physical diseases such as Alzheimer's disease. Alzheimer's disease is the most common form of dementia.

Dementia can affect people of any age, but is most common in older people. One in six people aged over 80 years have a form of dementia and one in 14 people aged over 65 years have a form of dementia.

1.5.2 Local Picture

It is estimated there are approximately 2622 people in North Tyneside with dementia¹. This is expected to increase by 23% by 2022, which is lower than the expected increase of 28% in the North East and 29% nationally.

It is estimated that 1100 people with dementia in the borough have very high needs.²

1.5.3 National Dementia Strategy

In February 2009 the Government launched Living Well with Dementia, a National Dementia Strategy (NDS). This five-year plan set out objectives for improving health and social care services for everyone with dementia and their carers. The aim of the Strategy was to ensure that significant improvements were made to dementia services across three key areas:

- Improved awareness
- Earlier diagnosis and intervention
- Higher quality of care.

The Strategy identified 17 key objectives which, when implemented, would result in significant improvements in the quality of services provided to people with dementia and promote a greater understanding of the causes and consequences of the illness.

The government published an updated implementation plan in September 2010; Quality outcomes for people with dementia: building on the work of the National Dementia Strategy. Four priority objectives were identified within this plan:

¹ The estimated numbers of people with dementia was calculated by applying the prevalence rates established by Dementia UK in 2007, to the 2008-based population prevalence estimates.

² Personal Social Services Research Unit (PSSRU)

- good-quality early diagnosis and intervention for all;
- improved quality of care in general hospitals;
- living well with dementia in care homes; and
- reduced use of antipsychotic medication.

1.5.4 Local and regional work

Since the launch of the NDS, a considerable amount of work has been done locally to obtain the views of professionals working in this field and also with people with dementia and their carers.

During July 2009 a regional tool was developed using Red, Amber and Green (RAG) ratings, to assess the current position regarding support for people with dementia and their carers against 15 of 17 objectives in the NDS. Some objectives had several indicators.

As part of this process we involved a range of professionals from the Council, NHS and the Community and Voluntary sector. In addition to seeking the views of professionals, we also met with people with dementia and their carers to ensure their experiences and opinions were included.

Using the outcome of the original assessment, the tool then formed the basis of a joint action plan for North Tyneside. The plan outlined the key actions which were originally identified and the progress we were making toward addressing the objectives we set ourselves in 2009.

From our original assessment we continued to update the action plan every six months, to track progress and highlight any areas of concern. Following the February 2011 assessment we were pleased to report that we had continued to make progress in all areas, there were no red indicators and 14 of the 21 indicators were green.

It was noted however, that although we had made significant progress since 2009, there was still work to do. Some areas had been rated green as we had achieved the objectives that were originally set within the plan, however we were aware that further work was needed to ensure that we were making improvements that made a difference to people's lives and their experience of living with dementia. We therefore felt that we needed to carry out a more in-depth review of the services and support available in North Tyneside and produce a new plan of action.

1.5.5 Key developments since June 2011

1.5.5.1 Dementia Adviser Service

In 2009 North Tyneside was one of twenty-two Dementia Adviser (DA) sites chosen by the Department of Health (DH) to pilot this new service and evaluate its effectiveness. The primary aim of the Dementia Adviser service was to be the first point of contact for a person with dementia and their carer following a diagnosis of dementia. The service commenced in January 2010 and is delivered by Alzheimer's Society and supported by North Tyneside Council and North Tyneside Primary Care Trust. DH funding ceased in March 2010, however both organisations have continued to provide funding to support the Alzheimer's Society to continue to provide the service until 30th September 2012.

In May 2011 an evaluation of the service was carried out. Feedback from people with dementia and carers was collated through questionnaires and focus groups. Providers of services that referred into or accepted referrals from the Dementia Adviser Service were also given the opportunity to feedback via questionnaires.

Feedback clearly indicates that the users of the service found the DA Service to be beneficial, as the service fills a gap in need for the borough as identified through the National Dementia Strategy. There is currently no other service that provides this level of local information and support for people with dementia and their carers covering all health, local authority, community and third sector services.

The service has received 324 referrals up to 29 February 2012 and over 1500 contacts have been made to the service by phone, e mail, letter or face to face. The service has provided information and signposting to over 20 other agencies; this includes 104 referrals to the Department for Work and Pensions for benefits checks.

Part of the success of the project has been the close links and referrals to other services and support provided by the Alzheimer's Society, in particular to the Dementia Support Workers. The Support Worker undertakes a role offering support, information and guidance to a person with dementia and/or their carer, family members or friends. The Support Workers also facilitate groups to provide peer support. Feedback about the service and the support provided has been extremely positive, people clearly value the service and the help provided.

1.5.5.2 Diagnosis

North Tyneside ranks 47th out of 176 in the UK for diagnosis of dementia in local health and Strategic Health Authority (SHA) areas. Approximately 48% of the estimated number of people with dementia in North Tyneside have received a formal diagnosis (1265 of 2622)³. Although this is higher than the national average of 41% we recognise that further work is needed to improve this figure.

1.5.5.3 Taking Part Workshops

Taking Part Workshops (TPW) is a Community Interest Company that aims to increase health and wellbeing by using the arts. TPW have been running workshops for people with memory problems and the early stages of dementia and their carers to participate together. The full programme lasted for one year consisting of 4 workshops per 6 month period, 2 running at a time, every week.

The main aim of the workshops is to improve health and wellbeing for the carer and the person with dementia, improve the bond between carer and person with dementia, and help identify the person rather than the illness.

Overall there were 75 people who registered interest in attending the project however not all were able to complete the 6 month course. Reasons given for non attendance included carers saying they thought it was too much for their partner, the activities or location not being for them, and being too busy.

The activities that were chosen for the project in the first 6 months were film-making, drama, woodwork and creative writing. For the second 6 months the group decided they wanted more film-making and more drama.

³ Mapping the Dementia Gap 2011- Progress on improving diagnosis of dementia 2010-2011- February 2012

A pathway was developed to enable health and social care professionals to refer into the programme. Charities and care organisations were also welcomed to refer clients.

Feedback from participants shows that there has been an overall increase in the wellbeing of the people who attended the group, both by people with memory problems and their carers.

It is now intended to integrate the programme's referral pathway into the current social prescription service delivered by Taking Part Workshops and to increase the activities available to people with dementia and their carers by helping current providers on the Taking Part Workshops programme to identify their potential to support the client group in their own sessions.

1.5.5.4 Local Authority Support

Adult Social Care provides a wide range of support services to help people with dementia to continue to live in the community; these include in house and commissioned services.

At 30th November 2011 there were a total of 514 clients with 'Dementia' who were in receipt of a service with a cost to Adult Social Care.

In house services and external providers report the increased frailty of people accessing their services and we are aware that although many of the people using services may not have had a formal diagnosis of dementia, they do have a cognitive impairment which may indicate that the person has dementia.

The use of telecare solutions for people with dementia continues to make a positive impact on people's lives, and to support them to remain independent and ease the burden on the role of the carer.

1.5.5.5 Day Opportunities for people with Dementia

The new Day Opportunities Framework became operational in December 2010. The services include specialist dementia care. Extended opening hours between the hours of 8am and 8pm are a feature of the service and also the additional provision of care at weekends. The contracts for day service provision now include a range of measures which will ensure that providers who deliver day services to people with dementia, are appropriately trained and also that the physical environment of the service is suitably adapted to meet the needs of this particular client group.

The final part of this procurement exercise is the provision of a Community Resource Service which will operate from the two extra care schemes - Rowan Croft and Linskill Park. The provider appointed to deliver these services is Age UK.

Linskill Park will initially operate as a building based day service for up to 15 people with dementia per day, who require a high level of specialist support. The centre has had a number of adaptations made to ensure that the space is 'dementia friendly' and follows best practice guidance for dementia design.

The service users who have been using the day service facility at Dorset House will be moving to Linskill Park in April 2012. Families have been invited to a coffee morning at Linskill Park to have a chat about what the new service will offer. Key workers have been identified for each service user and visits to their own homes have been offered

to ease the transition between services. Staff who will work in the centre are being recruited with a minimum of 1 year working with people with dementia and an NVQ2. Families of people who will attend the centre have also been given the opportunity to be part of the interview panel.

Age UK will develop the service to become a specialist community resource for people with dementia and will provide:

- Extended opening hours from 7am 10pm, to provide the opportunity for carers to take a break from their caring role
- A range of stimulating activities for people with dementia which maintain skills
- Use of the garden for outdoor activity
- Information and signposting to services and support networks for people with dementia and their carers
- A bathing service
- Support to access the on-site hairdressing service

In addition to the specialist day service provision of 15 places per day, the resource centre will be responsible for finding creative and flexible solutions for day opportunities for people wishing to use their own Personal Budgets, to ensure the best possible outcomes and supporting them to live a full life and make a positive contribution to society.

During consultation with older people, we have been told that there is a need for a Short Break Booking Service. Age UK will develop a breaks/respite booking service by sourcing both local and national respite provision and will also assist with arranging and booking breaks which meet service users' requirements.

Age UK will also manage Individual Service Funds (ISF) for people who do not want to manage their own Personal Budgets. The ISF money is restricted for use on providing care and support services for the individual which meet the criteria set out in their support plan; however the individual decides how they want the money spent.

1.5.6 Workforce Development

1.5.6.1 Social Care Training and Development

North Tyneside Council Social Care Training and Development Team have provided 4 full day dementia awareness sessions since April 2011. To date 46 delegates from Adult Social Care have been trained.

The evaluation of these sessions has been very positive and the use of a carer as a co-facilitator has been well received.

Additional training dates are available for the foreseeable future, however work on an accredited course has also commenced.

1.5.6.2 Tyne and Wear Care Alliance

Tyne and Wear Care Alliance is supporting a project which will see 20 staff from residential care homes in North Tyneside, become a Dementia Liaison and Coordination Champion (DLCC). The aim of the DLCC is to support staff to improve the lives of people living with dementia.

A major part of the Dementia Strategy is ensuring people living with dementia receive person centred care. Therefore, to support the DLCC, it has been agreed to arrange a training programme for Activity Coordinators.

1.5.6.3 North East Dementia Alliance

The North East Dementia Alliance has identified workforce development as a key cross-cutting theme to the effective delivery of the National Dementia Strategy in the region.

The Alliance has appointed Aligned Consultancy Ltd to produce a suite of resources and reports which will provide information and solutions to support the North East Dementia Alliance in developing a detailed action plan. This will deliver the appropriate workforce competencies, development and training for those involved in caring for those with dementia in all health and social care settings. It includes:

- Identifying appropriate education and training organisations/individuals that can provide effective learning opportunities to support staff working with people with dementia and their carers in the North East
- Produce a catalogue of current resources available to support the delivery of education and training in relation to dementia across all levels of the workforce
- Identifying sources of funding to support the delivery of dementia education and training across health, social care and the community and voluntary sector with relevant contact and access information
- Develop sample person specifications for the key job roles working with dementia, including the value base that will support recruitment of individuals with appropriate behaviours and attitudes.

1.5.7 Mapping out the dementia pathway

An update of dementia support was presented to the Long Term Conditions Partnership Board on 9th June 2011. The Board agreed that commissioners from the Primary Care Trust (PCT) and Adult Social Care carry out a joint comprehensive piece of work, to understand the current pathway and services available to people with dementia and their carers in North Tyneside. Part of the process involved obtaining detailed information to help us to understand how the pathway currently operates and interlinks.

Events for professionals were held in October 2011 and February 2012. These events gave professionals the opportunity to give their views about current support for people with dementia across the pathway and how this could be improved.

People with dementia and their carers were also invited to attend a separate event in February 2012, to discuss their experience of accessing services and support in North Tyneside. In addition to this, people with dementia and their carers attended a listening event with a commissioner from the PCT in January 2012.

Meetings were arranged with Northumbria Healthcare NHS Foundation Trust and Northumberland, Tyne and Wear NHS Foundation Trust, to help us to understand in more detail, the services that they provide and the service improvements they have planned.

This work has enabled us to scope the services already provided, understand what is working well and identify any duplication or gaps, in line with what people with dementia and their carers have told us that they want and national policy requirements.

1.5.8 North Tyneside Dementia Action Plan 2012/13

The updated local plan builds on the work since the launch of the National Dementia Strategy and meets Objective 17 of the Strategy, which is the effective local implementation of the Strategy. Local commissioning and planning mechanisms have been used to jointly determine the services needed for people with dementia and their carers and how best to meet these needs as required in Objective 14.

Our local action plan priories incorporate those nationally identified in 2010, in addition to four other local themes.

- 1. Increasing early diagnosis
- 2. Improving the quality of care for people with dementia in care homes
- 3. Improving dementia care in general hospitals
- 4. Reducing the inappropriate use of antipsychotic medication
- 5. Improving end of life care
- 6. Supporting the person with dementia and their carer through their journey with dementia
- 7. Workforce development
- 8. Dementia pathway development

The draft plan was presented to the North Tyneside Joint Commissioning Executive on the 13th March and the Long Term Conditions Partnership Board on the 22nd March. Comments on the plan are currently being collated and the finalised plan will be published in April 2012.

The draft Action Plan can be found in Appendix 1.

1.5.9 Future plans

1.5.9.1Memory Support Service

Building on the successes of the Dementia Adviser Service we now have plans to tender for a Memory Support Service. The specification for the service will incorporate all the elements of the current Dementia Adviser Service; however it will be broadened to include people who have not yet had a diagnosis of dementia. People who are worried about their memory will be able to contact the service where they will be encouraged to contact their GP for tests and potential referral to the Memory Clinic for an assessment.

The service will also incorporate the element of emotional and peer support currently provided by the Dementia Support Workers.

Agreement to jointly fund the service between the Council and the PCT was agreed by the Joint Commissioning Executive on the 13th March.

The service will be tendered in April 2012 and will begin in October 2012, when the funding for the current Dementia Adviser Service ends.

1.5.9.2 Quality Outcomes Framework

Quality Outcomes set out a framework for assessing providers of residential and nursing care for older people in North Tyneside. The Quality Outcomes are measured through a system of on-site monitoring visits and desktop reviews using a number of evidence based measures to establish performance against 7 main outcomes.

The assessment for 2012 has been strengthened to include best practice in supporting people with dementia including obtaining evidence of:

- dementia training and awareness
- the use of 'inclusive' design, which tries to ensure that the environment does not present barriers to those who use it
- providing opportunities to take part in failure free activities which help reinforce self-esteem while relieving boredom and frustration
- encouraging residents to positively participate in the day to day running of the home and participation in any jobs or activities to develop or sustain independent skill levels e.g. helping with laying the tables and cleaning.

Reducing the use of antipsychotic medication in residential care will also be a focus of our work during 2012 and we will be working closely with colleagues in the PCT implement this.

We hope that these measures will continue to raise the quality of the care we expect for all residents, particularly for those living with dementia.

1.5.9.3 Carers Strategy

A steering group has been established to oversee the development of a Carers Strategy for North Tyneside.

The strategy and action plan, which will be launched during Carers Week in June 2012, is aiming to raise the profile of all carers in North Tyneside and will include a range of measures to ensure that carers feel better supported and valued.

A draft action plan was presented to the Joint Commissioning on 13th March 2012. This was agreed and will support the development of a Carers Health and Wellbeing Fund which will be jointly funded by the Council and the PCT.

1.5.9.4 Domiciliary Care

A domiciliary care commissioning exercise is underway. The existing contracts come to an end in February 2013. As part of the commissioning exercise a number of different operating models will be considered. Consideration will be given to the need for any specialist support or services, such as dementia. Service specifications will include specific measures to ensure that people with dementia receive appropriate care to meet their needs.

1.5.9.5 Reablement

Some focussed work on dementia training for the Reablement Team has been identified as a key priority.

1.6 Decision options:

This report is for information only, in response to Cabinet's request for a further report on progress made at its meeting of 13th June 2011.

1.7 Reasons for recommended options:

Cabinet are asked to note the progress made toward improving and developing services for people with dementia and their carers. Also acknowledge the Draft Dementia Action Plan 2012/2013 which will continue to direct the improvements for people with dementia in North Tyneside.

1.8 Appendices:

Appendix 1: Draft North Tyneside Joint Dementia Action Plan

1.9 Contact officers:

- Sheila Watson, Strategic Commissioning Manager Older People and Physical Disability, tel: 0191 643 7007
- Susan Meins, Commissioning and Procurement Manager (Older People and Physical Disability), tel: 0191 643 7940
- Alison Campbell, Finance Business Manager, tel: 0191 643 7038

1.10 Background information:

The following background papers/information have been used in the compilation of this report and are available at the office of the author:

- a) Adult Social Care Services Service Plan 2011-2014
- b) Living Well with Dementia A National Dementia Strategy Department of Health, February 2009
- c) Quality outcomes for people with dementia: building on the work of the National Dementia Strategy, September 2010
- d) North Tyneside Joint Action Plan update February 2011

PART 2 - COMPLIANCE WITH PRINCIPLES OF DECISION MAKING

2.1 Finance and other resources

As the average life expectancy of residents of the borough increases and the demands on the service grow, more and more people are requiring assistance from the Council to support them with their increased care needs, which arise as a result of dementia.

Council agreed growth of £50k for 2011/12. This funding, along with existing resources, has been used to support the delivery of the Dementia Strategy and to assist in meeting

the increased pressure on the Adult Social Care service budget as a whole, as a result of the rise in the number of clients presenting with dementia.

We are looking to improve the range of services that we provide including enhanced day opportunities and a Community Resource Service which will be funded within existing day service budgets. The development of the role of Dementia Adviser into the new Memory Support Service will continue to use the growth funding agreed in 2011/12 but is also subject to final agreement with the PCT on a share of the costs with Health.

It is anticipated that reinvestment in community based services for those with dementia, will help to contain pressure on care costs as we can keep more individuals out of residential care and in their own homes with appropriate services to support them to maintain their independence.

2.2 Legal

There are no legal implications directly arising from this report.

2.3 Consultation/community engagement

Since the launch of the National Dementia Strategy, a considerable about of work has been done locally to obtain the views of professionals working in this field and also with people with dementia and their carers.

An initial mapping exercise was carried out in July 2009, to identify and rate existing services for people with dementia and their carers in North Tyneside. This involved a range of professionals from the Council, NHS and the Community and Voluntary sector in this process. In addition to seeking the views of professionals, we met with people with dementia and their carers to ensure their experiences and opinions were included in the assessment. The outcome of this exercise was the production of a Joint Dementia Action Plan for North Tyneside.

In 2010, four major listening and engagement exercises were carried out in the North East, these included people from North Tyneside. The most common themes people referred to are around early diagnosis, training, awareness of dementia and appropriate person-centred care at all stages of their journey for the person with dementia and their carers.

North Tyneside was one of twenty-two pilot Dementia Adviser sites chosen by the Department of Health to pilot this new service and evaluate its effectiveness. The Service commenced in January 2010. In May 2011 an evaluation of the service was carried out. Feedback from people with dementia and carers was collated through questionnaires and focus groups. Providers of services that referred into or accepted referrals from the Dementia Adviser Service were also given the opportunity to feedback via questionnaires.

During 2011 the PCT and Council began a comprehensive joint piece of work to understand the current pathway and services available to people with dementia and their carers in North Tyneside. As part of the process we obtained detailed information to help us to understand how the pathway currently operates and interlinks.

Events for professionals were held in October 2011 and February 2012. These events gave professionals the opportunity to give their views about current support for people with dementia across the pathway and how this could be improved.

People with dementia and their carers were also invited to attend a separate event in February 2012 to discuss their experience of accessing services and support in North Tyneside. In addition to this, people with dementia and their carers attended a listening event with a commissioner from the PCT in January 2012.

Meetings were arranged with Northumbria Healthcare NHS Foundation Trust and Northumberland, Tyne and Wear NHS Foundation Trust, to help us to understand in more detail, the services that they provide and the service improvements they have planned.

The work has enabled us to scope the services already provided and to identify any duplication or gaps, in line with what people with dementia and their carers have told us that they want and national policy requirements.

2.4 Human rights

The proposals and actions contained in this report support the following Human Rights principles:

Article 5: Right to liberty and security

Article 8: Right to respect for private and family life

Article 9: Freedom of thought, conscience and religion

Article 10: Freedom of expression

Article 14: Prohibition of discrimination

2.5 Equalities and diversity

A person who has a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities has a disability for the purposes of the Disability Discrimination Acts 1995 and 2005 (DDA1995/2005)

A person with dementia is a "disabled person" for the purposes of the DDA 1995/2005.

The measures outlined in this report raise awareness, provide support and services and will have a positive impact on people with dementia and their carers.

2.6 Risk management

Any significant risks will be considered during the process of contracting, discussed with the Risk Champion, and evaluated and actioned as appropriate.

2.7 Crime and disorder

There are no crime and disorder issues directly arising from this report.

2.8 Environment and sustainability

There are no environment and sustainability issues directly arising from this report.

PART 3 - SIGN OFF

•	Strategic Director(s)	Χ
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- Mayor/Cabinet Member(s)
 X
- Chief Finance Officer X
- Monitoring Officer
 X
- Strategic Director with responsibility for Community Engagement

North Tyneside Dementia Action Plan 2012/13

This local plan builds on those developed since the launch of the National Dementia Strategy, Living Well with Dementia (2009) to meet Objective 17 which is the effective local implementation of the Strategy. Local commissioning and planning mechanisms have been used to jointly determine the services needed for people with dementia and their carers, and how best to meet these needs as required in Objective 14.

In 2010, Objective 2 - Improving early diagnosis; Objective 8 - Improved quality of care for people with dementia in general hospitals; and Objective 11 -Living well with dementia in care homes, along with a new objective - Reduce the inappropriate use of anti-psychotic medication were prioritised.

Our local priories incorporate those nationally identified along with 4 other local themes.

<u>Theme</u>	Our Action	How	By When	By Who	Links to Policy &
<u> </u>	<u> </u>	2011	<u> </u>	<u> </u>	Guidance
1. Increasing early diagnosis	 Increasing awareness of dementia with public and professionals Improving access to diagnosis through Increasing GP understanding of the importance of early diagnosis and the development of GP dementia registers 	Establishing a service specification for a Memory Support Service which will include - Awareness raising - Case finding - Information & advice across the pathway - Emotional support - Peer support Education sessions and access to specialist advice	Plan to award tender September 2012 March 2012 ongoing	PCT & LA Commissioners	NDS Objectives 1, 2, 3, 4, 5, 6, 7, 13, 14 & 16 NHS Outcomes Framework 2012/13 GP QOF (Quality and Outcomes Framework) National NHS CQUIN (Quality and Innovation) implementation

	 Redesign of the diagnostic pathway in North Tyneside 	PCT and Local Authority	April 2012	PCT & LA Commissioners	
	 Increasing the capacity within the Memory Clinic 	PCT has allocated additional investment into POAS and is working to agree a model to deliver this	May 2012	PCT Commissioners & POAS	
	- Increased awareness and identification of people with dementia in hospital through CQUIN and supported by Psychiatric Liaison Team	PCT has allocated additional investment into POAS to develop the Liaison Team and funds are attached to successful delivery of the CQUIN by Northumbria Healthcare FT	April 2012	PCT Commissioners & Northumbria FT	
2. Improving the quality of care for people with dementia in care homes	Delivery of a Challenging Behaviour Team to support the person with dementia to remain in their own environment whilst providing care staff with the understanding and skills to appropriately manage the situation.	North West Locality Provided by NTW FT Whitley Bay, Wallsend & North Shields Localities Investment already made by PCT to be provided by POAS	In place May 2012	Complete	NDS Objectives 1, 2, 3, 4, 6, & 11 NDS Reducing the inappropriate use of anti-psychotics
	 Support through Community Mental Health Team to work into Care Homes to support people with dementia living in care homes, their carer's 	North West Locality Function provided within Locality CMHT by NTW FT Whitley Bay, Wallsend & North Shields Localities	In place May 2012	Complete	

	and staff	Specialist Team being developed by POAS. Investment already made by PCT			
	 Include quality outcomes in relation to dementia appropriate care and environments into the Local Authority Quality Monitoring to trigger higher payment level 	Environmental and dementia friendly outcomes added to the Local Authority Quality Payment Process	April 2012	LA Commissioning	
3. Improving dementia care in general hospitals	 Provide specialist psychiatric advice and support to the medical teams within the hospital 	Extension of the Psychiatric Liaison Team working into North Tyneside General Hospital	May 2012	POAS	NDS Objectives 1, 2, 3, 4,& 8 NHS Outcomes Framework 2012/13
	Ensure clinical staff understand the needs of people with dementia	Roll out of the accredited dementia training developed within Northumbria FT for clinical staff	Ongoing	Northumbria FT	National NHS CQUIN (Quality and Innovation) implementation
	 Audit and improve ward environments to be dementia appropriate/ friendly 	Provision of specialist training from Dementia Services Development Centre Stirling for Dementia Leads	September 2012	SHA Directors of Nursing Group	NDS Reducing the inappropriate use of anti-psychotics

CONT

4. Reducing the inappropriate use of	 Development of non- pharmacological support 	Development of Challenging Behaviour Teams	See 2 above	See 2 above	NDS Objectives 1,2,3,44,6,8,&11 NDS Reducing the
antipsychotic medication	 Audit of current use of anti- psychotic medication and development of protocols to improve practice of initiation, review and discontinuation 	To include GP's, Community Pharmacists and Specialist Services	September 2012	PCT Lead	inappropriate use of anti-psychotics
5. Improving end of life care	Ensure all people with dementia who need support at the end of their life receive it through the End of Life Project	People with dementia living in nursing homes will be offered the opportunity to develop an advanced care plan which sets out their wishes for treatment and care options and their choice of place to die	March 2013	PCT Commissioning	NDS Objectives 1, 3, 4, 6, 8, 11, & 12 End of Life Care Strategy - promoting high quality care for all adults at the end of life
	Establishment of Admiral Nurse posts to provide specialist advice and support around dementia working with the End of Life Project	Investment already made by PCT North West Locality 0.5wte to be provided by NTW FT Whitley Bay, Wallsend & North Shields Localities 1.0wte to be provided by POAS	June 2012	PCT Commissioning with NTW & Northumbria FT's	
6. Supporting the person with dementia and	 Provide a seamless service which supports a person with dementia and their carer throughout their 	Remodelling of the current services to develop an improved Memory Support Service which builds on	See 1 above	See 1 above	NDS Objectives 1, 2, 3, 4, 5, & 7 National Carers

their carer through their journey with dementia	dementia journey which includes: - Awareness raising with public and professionals - Case finding - Information & advice across the pathway in a seamless way - Emotional support - Peer support - Skills to aid managing your memory - Coping with caring	the Dementia Adviser and Dementia Support Worker roles and supports people throughout their journey			Strategy Recognised, valued and supported NHS Outcomes Framework 2012/13
7. Workforce development	Work with all agencies to improve the skills of those working with people with dementia and their carers	Work with the Dementia Alliance to identify the training and resources available to providers to enable them to access training for their staff	June 2012	NE Dementia Alliances	NDS Objectives 1, 2, & 13
		Work with the Tyne & Wear Care Alliance who are providing training for 20 Link Workers to cascade training into Care homes through the Dementia Services Development Centre	September 2012	Tyne & Wear Care Alliance	
8. Pathway development	Specialist Services	Develop a service specification to ensure that specialist dementia services commissioned deliver the national	September 2012	PCT Commissioning with NTW & Northumbria FT's	NDS Objective 14

	dementia strategy and quality standards			
Day Services funded by PCT	Review of function and model of services commissioned by the PCT	September 2012	PCT Commissioning	
Review Process	When receiving support services, people with dementia can experience over 10 reviews over the year. Task and Finish Group to be established to identify where this duplication can be improved	March 2013	PCT & LA Commissioning	