

Public Document Pack

Late information for 24th April Scrutiny Board (Health and Well-being and Adult Social Care)

Page 1-6: Agenda item 8 – Leeds Dementia Action Plan 2012-13

This page is intentionally left blank

Leeds Dementia Action Plan 2012-13

DRAFT – 18th April 2013

Key:

	completed
	in progress, on track
	agreed, yet to commence

Priority areas covered in this plan:	abbreviations
<ul style="list-style-type: none"> - Population needs assessment - Improve diagnosis of dementia - Improve post-diagnosis support for ‘self management’ - Involving people and dementia-friendly Leeds - Supporting families and carers - Integrated care and the dementia journey - Emotional, psychological and physical well-being - Rights, risks, choice and control - The Right Care in general hospitals. - Specialist NHS Services - End-of-life care 	<p><i>CCG</i> – Clinical Commissioning Group</p> <p><i>CQUIN</i> – Commissioning for Quality and Innovation – NHS incentive scheme, part of providers’ contractual payments depends on achieving identified targets.</p> <p><i>GP</i> – General Practitioner – your doctor.</p> <p><i>KPI</i> – Key Performance Indicator.</p> <p><i>LCC</i> – Leeds City Council</p> <p><i>LCH</i> – Leeds Community Healthcare NHS Trust (NHS provider of community health services)</p> <p><i>LTHT</i> – Leeds Teaching Hospitals Trust (NHS provider of acute / general hospital services)</p> <p><i>LYPFT</i> – Leeds and York Partnership Foundation Trust (NHS provider of specialist mental health services)</p> <p><i>memory service</i> – specialist service which takes referrals from GPs for people with possible dementia. Provides diagnosis, prescribing and support.</p> <p><i>Primary care</i> – health services provided from your GP practice.</p> <p><i>WRVS</i> – Women’s Royal Voluntary Service</p>

Priority area	Action	Outcome from action	Lead person / agency	When	Use of funding / resources	Funding agreed / needed	Status
Population needs assessment	Research and report data as identified in strategy document.	To address gaps in understanding of local needs and service use.	Bernadette Murphy – Public Health	to be decided	Part of needs assessment work for long-term conditions / older people.	-	
Improve diagnosis of dementia	Memory pathway review	Understanding of patient experience and blocks on the pathway from awareness, through diagnosis, to early support.	Judy Beckett – independent researcher	July 2013	Research team to gather and analyse patient experience and staff views.	£30K	
	Agree local CQUIN incentive for Leeds Community Healthcare (LCH)	Increased detection and referral of people with possible dementia, who are already known to community health services.	Leeds S+E CCG	April 2013	-	-	
	Improve LYPFT memory service with new investment.	<ul style="list-style-type: none"> - Clearing of backlogs and reduced waiting times. - Coping with expected additional demand. 	Leeds North CCG + LYPFT	April 2013	Investment agreed across all CCGs. To recruit additional clinical staff in memory services.	£400K pa.	
	Redesign 'shared care' between primary care and memory service.	<ul style="list-style-type: none"> - Improve experience for people with dementia and carers. - More consistent services. 	Leeds North CCG – to lead Task Group.	December 2014	-	-	
	Local dementia awareness campaign	People in Leeds more likely to: understand help available; have positive attitudes to dementia; see GP with concerns.	Ayeesha Lewis, Public Health	to be decided	Costs of designing a campaign, events and publicity.	£30K	
	Pilot and evaluate pre-diagnosis support for south Asian older people.	Overcome barriers to seeking and obtaining diagnosis.	Touchstone Leeds	Sept 2013	support worker role.	£20 - £25K available	

Priority area	Action	Outcome from action	Lead person / agency	When	Use of funding / resources	Funding agreed / needed	Status
	Training and support for GP practices.	- Better understanding and more consistent response from GPs.	CCGs	Sept 2013	Training and 'backfill'	£40K available	
Improve post-diagnosis support and 'self management'	Improve access to dementia cafes and activities	More services and activities accessible to local communities.	Leeds Alzheimer's Society	throughout 2013-14	Cafe development post (temp). Additional capacity to develop singing groups; activity start-up costs.	£28K £15K	
Involving people and dementia-friendly Leeds	Launch the Leeds Dementia Action Alliance.	Local businesses and organisations commit to actions which make Leeds more dementia-friendly.	Leeds City Council	July 2013	Capacity to co-ordinate the Leeds DAA, and work with local businesses and groups.	£25K	
	Dementia awareness training for relevant Leeds City Council customer-facing staff.	People with dementia and carers have sympathetic approach from all Council departments.	Leeds City Council	next 1-2 years	To train / brief staff	to be assessed	
	Dementia awareness week event	Local publicity and contribution to national awareness week; opportunities to involve people.	Leeds Involving People / Leeds Alzheimers Society	May 2013	venue, publicity, lunch.	£2K	
	Support Dementia-friendly neighbourhoods.	Initiatives in Rothwell, Otley and across the local authority area have support and can share ideas and learning.	Leeds City Council / Dementia Action Alliance.	continuing	small grants to support campaigning and publicity.	c.£5K	
Supporting families and carers	Improved access to "Carers Information and Support Programme" (a 4 session course).	Improved ability to cope for at least 40 carers, including clearing current waiting list.	Carers Leeds	through 2013-14	Sessional staff, resources, room hire, evaluation report.	£15K - £25K	

Priority area	Action	Outcome from action	Lead person / agency	When	Use of funding / resources	Funding agreed / needed	Status
Integrated care and the dementia journey	Three liaison staff roles to develop health and social care team skills, over 12-18 months.	Better outcomes from work with people with high levels of need, linked to dementia with other health conditions.	Leeds Integrated Health + Social Care Programme	to start c. Sept 2013	Time-limited staff roles.	£250K	
	Analysis of hospital admissions linked to dementia.	Improved understanding of where to intervene to improve outcomes and reduce costs.	to be decided	September 2013 ?	-	-	
Emotional, psychological and physical well-being	Complete and issue local guideline for agitation, aggression, use of anti-psychotics	Support to offer person-centred care; improved reviewing of anti-psychotics; reduced inappropriate prescribing.	Leeds North CCG	July 2013	Capacity to produce guideline; dissemination costs across Leeds health and social care economy	c. £25K	
	Implement and review new specification for care homes liaison.	A more confident and capable care home sector.	Leeds North CCG	throughout 2013-14	Continue the funding for development project to sustain clinical staff roles.	£200K pa.	
The Right Care in general hospitals.	Achieving new dementia CQUIN scheme	<ul style="list-style-type: none"> - increased detection and diagnosis. - carers feel supported. - improved workforce and leadership 	LTHT	April 2013 – March 2014	-	-	
	Delirium and dementia pathway design	improved recognition of symptoms and better outcomes for patients.	LTHT	Dec 2013 ?	LTHT and LYPFT liaison staff	-	
	Implement "Know Who I Am" document on wards.	People with dementia will have better care because staff will refer to personalised information.	LTHT	to be confirmed	-	-	

Priority area	Action	Outcome from action	Lead person / agency	When	Use of funding / resources	Funding agreed / needed	Status
	Volunteer support with nutrition	People with dementia drink and eat better, when prompting / support needed.	LTHT / WRVS	TBC	-	-	
Specialist NHS Services	Environmental improvements to The Mount	Improved quality of patient experience, more settled at night.	John Needham, LYPFT	March 2014	improvements to bedrooms and ward environment.	TBC	
	Review of dementia services post-transformation	<ul style="list-style-type: none"> - Dementia care skills improved. - Better access to home-based treatment. 	LYPFT	through 2013-14	-	-	
End-of-life care	complete and disseminate local guideline for detection and management of symptoms at end of life.	better quality of care and dignity at end of life.	Specialist Palliative Care Services	Sept 2013	? dissemination costs	?	

This page is intentionally left blank