Dementia United

Greater Manchester's (GM's) dementia strategy

Autumn 2017

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The GM Health and Care System

- 12 Clinical Commissioning Groups (CCGs)
- 14 acute, community and MH Trusts & 1 ambulance Trust
- 500 GP Practices
- 450 General Dental Services
- 700 community pharmacies
- 300 community optometry services
- At least 300,000 carers
- 10 local Authorities
- 27 social housing providers
- 14,500 voluntary and community organisations
- GM Police
- GM Fire & Rescue Service
- And 2.8m residents

Facing Facts

11.4 million people aged 65 or over in the UK

40% have chronic conditions

850,000 have dementia

30,000 people in Greater Manchester have dementia

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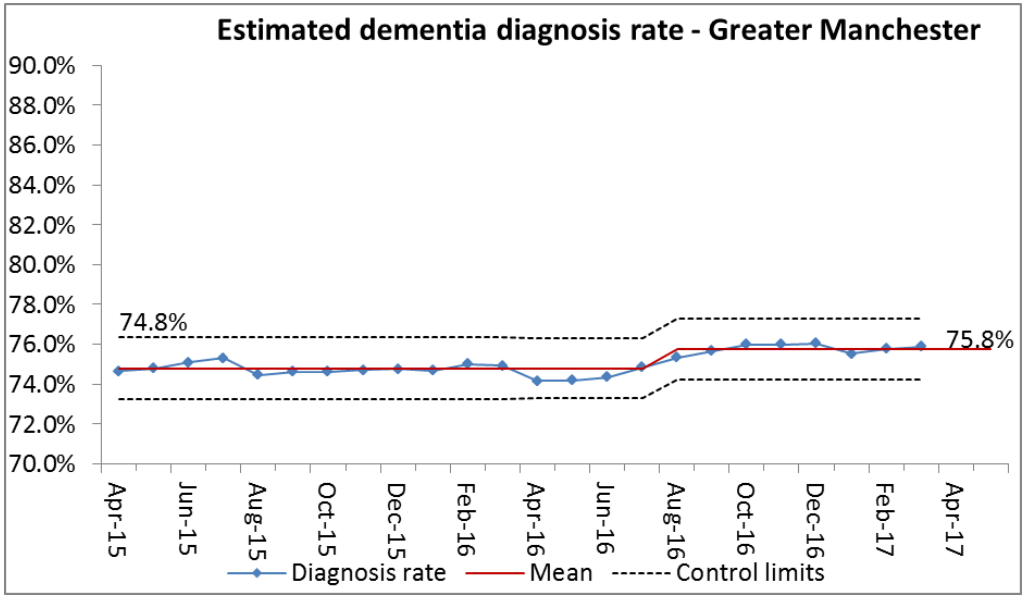

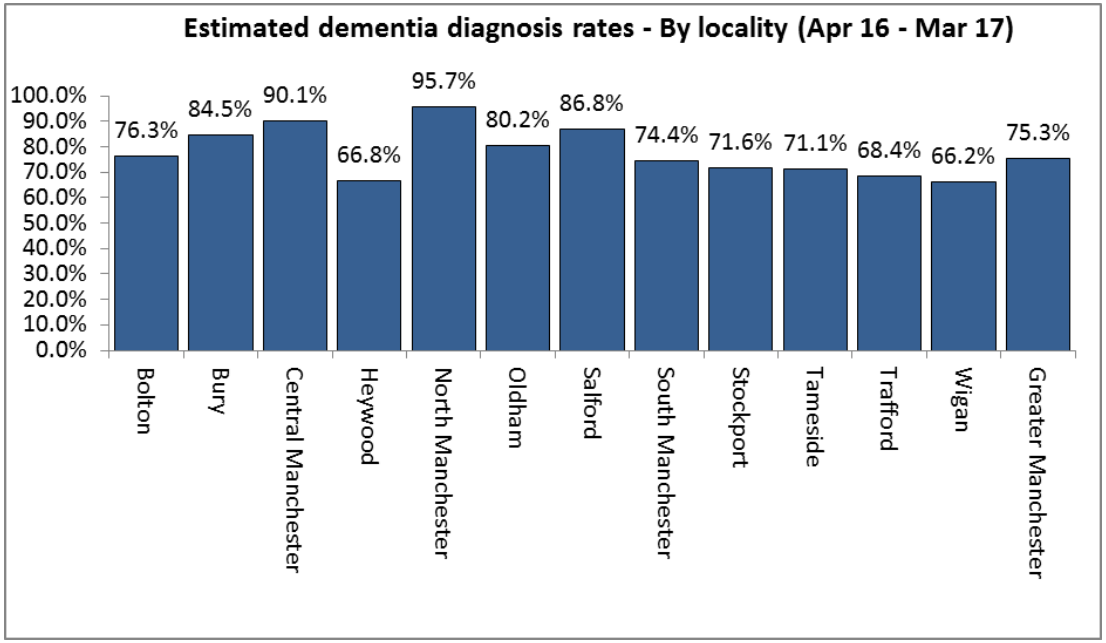

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NHS ENGLAND TRANSFORMATION FRAMEWORK – THE WELL PATHWAY FOR DEMENTIA

PREVENTING WELL

Risk of people developing dementia is minimised

"I was given information about reducing my personal risk of getting dementia"

STANDARDS:

Prevention[1]
Risk Reduction[5]

DIAGNOSING WELL

Timely diagnosis, integrated care plan, and review within first year

"I was diagnosed in a timely way"

"I am able to make decisions and know what to do to help myself and who else can help"

STANDARDS:

Diagnosis[1][5]
Memory Assessment[1][2]
Concerns Discussed[3]
Investigation [4]
Provide Information[4]
Care Plan[2]

SUPPORTING WELL

Access to safe high quality health & social care for people with dementia and carers

"I am treated with dignity & respect"

"I get treatment and support, which are best for my dementia and my life"

STANDARDS:

Choice[2][3][4]
BPSD[6][2]
Liaison[2]
Advocates[3]
Housing [3]
Hospital Treatments[4]
Technology[5]
Health & Social Services [5]

LIVING WELL

People with dementia can live normally in safe and accepting communities

"I know that those around me and looking after me are supported"

"I feel included as part of society"

STANDARDS:

Integrated Services[1][3][5]
Supporting Carers[2][4][5]
Carers Respite[2]
Co-ordinated Care[1][5]
Promote independence[1][4]
Relationships[3]
Leisure[3]
Safe Communities[3][5]

DYING WELL

People living with dementia die with dignity in the place of their choosing

"I am confident my end of life wishes will be respected"

"I can expect a good death"

STANDARDS:

Palliative care and pain[1][2]
End of Life[4]
Preferred Place of Death[5]

References: (1) NICE Guideline. (2) NICE Quality Standard 2010. (3) NICE Quality Standard 2013. (4) NICE Pathway. (5) Organisation for Economic Co-operation and Development (OECD) Dementia Pathway. (6) BPSD – Behavioural and Psychological Symptoms of dementia.

COMMISSIONING GUIDANCE:

- Develop commissioning guidance based on NICE guidelines, standards and evidence-based best-practice.
- Agree minimum standard service specifications, set business plans, mandate and resources.
- Work with ADASS, PHE & other ALBs on co-commissioning strategies to provide an integrated service.

MEASUREMENT:

- Develop Quality, Access and Prevention metrics to form the basis of the CCG scorecard.
- Identify data sources and agree with HSCIC, et al on the extraction processes.
- Set 'profiled' ambitions for each metric, to form the basis of the transformation plan.

TRANSFORMATION, RESEARCH, INNOVATION, TECHNOLOGY, PATIENT ENGAGEMENT AND BEST-PRACTICE:

- Transformation: using CCG scorecard to set & achieve a national standard for Dementia services.
- Intervention: Intensive Support Team to provide 'deep-dive' support and assistance for CCGs that fall short.
- Innovation: Intel from Research, Patient involvement, best-practice and technology to influence change.

Time for Action

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Aims to:

1. *Improve the lived experience for people with dementia and those who care for them*
2. *Increase independence by reducing dependence on health and social care*
3. *Decrease variation in access to and quality of services for people with dementia and those who care for them*

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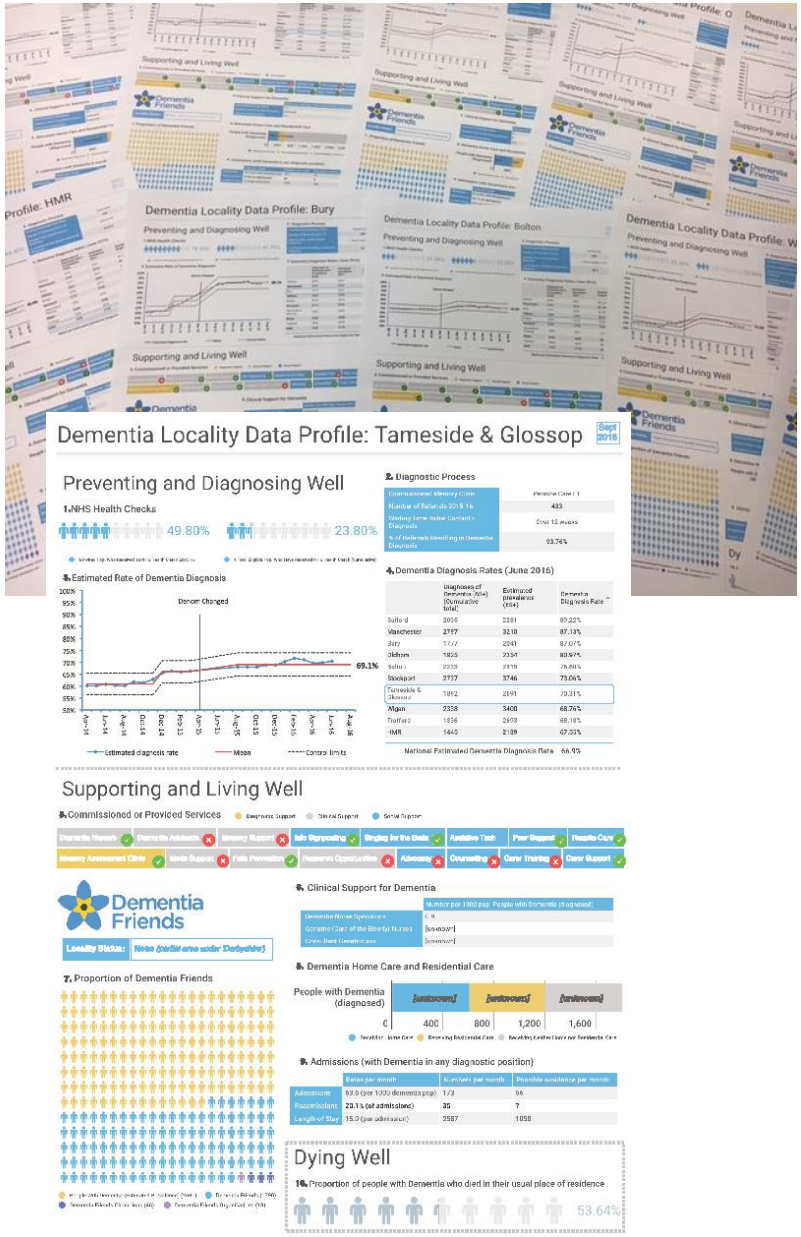
What are we aiming for?



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GM DRAFT STANDARDS – PRODUCT 1

Dementia United seeks to improve the lived experience for people living with dementia and their carers, making GM the best place to live.

This set of standards is intended as a tool for making progress on Dementia United pledges and offer GM an opportunity to collectively, as well as locally, make improvements for people with dementia and their carers. Itis not a comprehensive list of everything that is happening to deliver or improve dementia care.

To date, there is no established holistic measure of the lived experience, which asks people what it is like for them to live with dementia. GM has a unique opportunity to develop a measure which will monitor the lived experience and use the findings to co-produce and redesign the system in a way which is meaningful and required. Dementia United aims to develop a Lived experience Barometer, which will be developed, tested and piloted within the Financial Year 2017-2018.

Whilst some of the GM Standards will require an agreed measure, within year one (Financial Year 2017-2018) we suggest the use of 5 measures, one from each domain of the Living well pathway, which could constitute a dashboard to monitor progress.

The proposed standards will be regularly monitored and reviewed, initially every twelve (12) months. The purpose of this is to ensure that the Standards are reflective of current practice and include the most up to date national guidance.

Further information about the rationale, consultation process and evidence base of the GM Draft Standards please see below;

Living Well Pathway Domain	Standard*	Potential Year 1 Measure
PREVENTING WELL	1. Each locality will achieve uptake of NHS health checks comparable with the top 20% nationally and dementia screening will be specifically documented in these checks	*Measure* • Health Checks Offered • Health Checks Uptake *Source* Public Health England, Quarterly (http://fingertips.phe.org.uk/profile/nhs-health-check-detailed/data)
DIAGNOSING WELL	2. Each locality will achieve dementia diagnosis rates comparable with the top 20% nationally 3. People receiving an initial assessment and diagnosis will feel this is timely 4. People will receive a comprehensive assessment of mental and physical health issues as part of the diagnostic process and at regular intervals subsequently 5. People will be offered medication in line with	*Measure* Dementia Diagnosis *Source* NHS England, Monthly (https://www.england.nhs.uk/mentalhealth/dementia/monthly-workbook/)

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The journey so far……

Description	Timeframe
Programme Scoping & Stakeholder Engagement	June 2015 – September 2016
Programme Design Phase & Continuation of Stakeholder Engagement	October 2016 – December 2016
Soft Launch	November 2015
Locality Lead Engagement	January 2016 – September 2016
Social Finance Feasibility Study	December 2015 – April 2016
Cost Benefit Analysis Modelling	January 2016 – March 2016 & January 2017 – February 2017
Presented Programme Outline to AGG & JCB	April 2016 & September 2016
First draft Greater Manchester dementia standards and locality profiles developed	September 2016
Locality programme modelling workshop	September/October 2016
'The Journey continues event'	November 2016
Dementia strategy (Dementia United) developed and reviewed through the GM Health and Social Care Partnership governance system	December 2016 – January 2017
Application submitted to the GM Transformation Fund	March 2017
Implementation planning and engagement underway	July 2017

18 months

Dementia United

Dementia United is comprised of four work programmes (WP's) which have been designed to support localities to deliver improvement to dementia care, supported by regional architecture.

WP1

- LOCALITY DELIVERY
- describes the delivery system within localities and improvements that can be made through learning, collaboration and challenge

WP2

- REGIONAL SUPPORT
- describes the regional support infrastructure offered to support localities and staff within them to make improvements

WP3

- INTELLIGENCE
- describes the opportunities to use data and information to drive forward change

WP4

- INNOVATION, RESEARCH AND EVALUATION
- describes the opportunities to work collaboratively with the excellent research and innovative organisations in Greater Manchester and beyond

This structure gives GM a clear road map for what it wishes to achieve and the deliverables from Dementia United are an integral part of the Greater Manchester Investment Agreement. This marks a move from focusing on diagnosis to more broadly the experience of care, post diagnostic support and healthcare utilisation.

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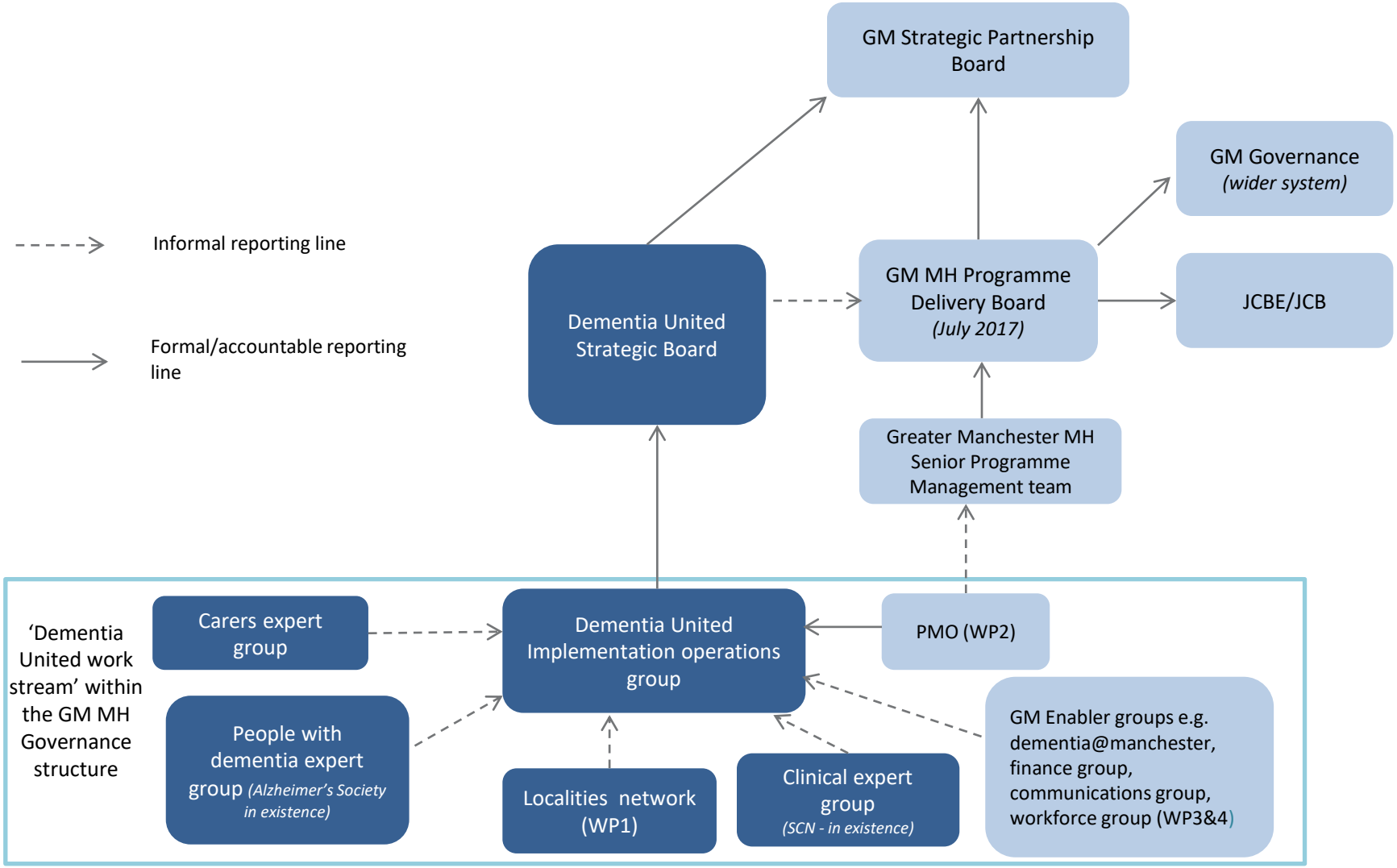

Implementation Governance structure

Nov 2017

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Where are we going…..?

We are hearing from the localities about:

- *Aspirations and vision for supporting people with dementia and those who care for them*
- *Alignment of current/planned work to the Greater Manchester dementia standards*
- *Financial and non financial resource commitment to dementia currently and proposed*
- *Governance within the locality for dementia*
- *2 main challenges faced*
- *Key focus for next 12 months, 2 and 5 years*

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Work plan

The strategy/implementation plan provides an outline of how localities across Greater Manchester can work together, with external organisations, in partnership to deliver and meet the GM dementia standards.

The visits will provide us with a rich picture of dementia work that is taking place as well as giving us an opportunity to see where and how improvements could be made which will be shared as GM strives to be the pinnacle of the best dementia care in the UK.

Examples of the opportunities are:

- Developing clear leadership and Governance across GM for dementia
- Localities strengths analysis undertaken and improvement plans developed
- Initiatives such as Quality mark programme, Peer review process and fellowship programme
- Running collaborative activity to move the system at pace and scale
- Developing and continuing targeted work on specific clinical areas
    - Diagnosis, Delirium, Mild Cognitive Impairment ,Research, Toolkit
- Update and development of the GM dementia standards, with focus on prevention and post diagnostic support
- Lived Experience Barometer developed, tested and rolled out
- Evaluation

Plus lots, lots more which will develop as challenges are faced and improvements are made ……..

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Questions?

And

Thank you

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