

Agenda

Health and Well-Being Board

Tuesday, 26 February 2019, 2.00 pm
County Hall, Worcester

This document can be provided in alternative formats such as Large Print, an audio recording or Braille; it can also be emailed as a Microsoft Word attachment. Please contact Democratic Services on telephone number 01905 843579 or by emailing democraticServices@worcestershire.gov.uk.

Health and Well-Being Board

Tuesday, 26 February 2019, 2.00 pm, Council Chamber, County Hall

Membership

Full Members (Voting):

Mr J H Smith (Chairman)	Cabinet Member with Responsibility for Health and Well-being
Dr C Ellson (Vice Chairman)	South Worcestershire CCG
Dr R Davies	Redditch and Bromsgrove CCG
Catherine Driscoll	Director of Children, Families and Communities
Mr A I Hardman	Cabinet Member with Responsibility For Adult Social Care
Mr M J Hart	Cabinet Member with Responsibility for Education and Skills
Dr Frances Howie	Director of Public Health
Dr A Kelly	South Worcestershire CCG
Peter Pinfield	Healthwatch, Worcestershire
Dr C Marley	Wyre Forest CCG
Jo Melling	NHS England
Mr A C Roberts	Cabinet Member with Responsibility for Children and Families
Paul Robinson	Chief Executive, WCC
Simon Trickett	Redditch & Bromsgrove & wyre Forest Clinical Commissioning Group
Avril Wilson	Interim Director of Adult Services

Associate Members

Kevin Dicks	District Local Housing Authorities
Mr I D Hardiman	North Worcestershire District Councils
Cllr. Gerry O'Donnell	South Worcestershire District Councils
Mr J Sutton	Voluntary and Community Sector
Chief Supt. M Travis	Westmercia Police

Agenda

Item No	Subject	Presenter	Page No
1	Apologies and Substitutes		

Agenda produced and published by Simon Mallinson, Head of Legal and Democratic Services, County Hall, Spetchley Road, Worcester WR5 2NP

To obtain further information or a copy of this agenda contact Kate Griffiths, Committee Officer on Worcester (01905) 846630 or email: KGriffiths@worcestershire.gov.uk

All the above reports and supporting information can be accessed via the Council's website at <http://worcestershire.moderngov.co.uk/uucoverpage.aspx?bcr=1>

Date of Issue: Friday, 15 February 2019

Item No	Subject	Page No
2	Declarations of Interest	
3	Public Participation <i>Members of the public wishing to take part should notify Legal and Democratic Services in writing or by e-mail indicating the nature and content of their proposed participation on items relevant to the agenda, no later than 9.00am on the day before the meeting (in this case 9.00am on 25 February 2019). Enquiries can be made through the telephone number/e-mail address below.</i>	
4	Confirmation of Minutes	1 - 8
5	Autism Strategy	Elaine Carolan / Laura Westwood/ Owen Cave
6	Dementia Strategy 2019-2024	Carol Rowley / Jacinta Meighan- Davies
7	Children and Young Peoples Plan (CYPP) Strategic Partnership Update	Sarah Wilkins
8	Veteran Friendly Accreditation of GP Surgeries	Simon Trickett
9	Development Sessions <ul style="list-style-type: none"> - Proposed future topics and dates <ul style="list-style-type: none"> o Consideration of the new NHS long term plan o Update of Terms of Reference 	Frances Howie
10	Future Meeting Dates <u>Dates for 2019</u> Public meetings (All at 2pm) <ul style="list-style-type: none"> • 21 May 2019 • 24 September 2019 • 12 November 2019 Private Development meetings (All at 2pm) <ul style="list-style-type: none"> • 26 March 2019 • 30 April 2019 • 18 June 2019 • 16 July 2019 • 22 October 2019 	

Item No	Subject	Page No
	<ul style="list-style-type: none"> • 3 December 2019 	

Webcasting

Members of the Health and Well-being Board are reminded that meetings of the Health and Well-being Board are Webcast on the Internet and will be stored electronically and accessible through the Council's Website. Members of the public are informed that if they attend this meeting their images and speech may be captured by the recording equipment used for the Webcast and may also be stored electronically and accessible through the Council's Website.

This page is intentionally left blank

Health and Well-Being Board

**Tuesday, 13 November 2018, Council Chamber, County Hall
- 2.00 pm**

Minutes

Present:

Mr J H Smith (Chairman), Kevin Dicks, Catherine Driscoll, Ian Hardiman, Mr A I Hardman, Mr M J Hart, Frances Howie, Peter Pinfield, Mr A C Roberts, Jonathan Sutton, Simon Trickett, David Watkins and Avril Wilson

Also attended:

Tim Rice for Item 7.

511 Apologies and Substitutes

Apologies were received from Anthony Kelly, Clare Marley, Gerry O'Donnell and Paul Robinson.

David Watkins attended to represent the South Worcestershire District Councils.

512 Declarations of Interest

None

513 Public Participation

None

514 Confirmation of Minutes

The minutes of the meeting held on 25 September 2018 were agreed to be a correct record of the meeting and were signed by the Chairman.

The Board were informed that the private meeting scheduled for 23 October had been cancelled but it would take place immediately after the meeting. The private meeting scheduled for 4 December had been cancelled, therefore the next meeting would be the public meeting on 26 February.

515 SEND Improvement Plan

Following the joint CQC and Ofsted investigation in March 2018 which looked at education and health issues around Special Education Needs and Disabilities (SEND), 12 areas of weakness were highlighted and the CCGs and Local Authority had produced a joint statement of action and were working together to produce an improvement action plan. 5 work-streams had been identified and the SEND Improvement Board had been charged with producing and overseeing the action plan. In September the SEND Advisor said that the

improvement plan was fit for purpose and the improvement journey was moving in the right direction. Communications were important so that parents, families and schools fully understood the SEND offer.

It was emphasised that the organisations on the HWB had a clear leadership responsibility to ensure children with special educational needs got the support they needed in order to grow into productive adults. Everyone had a part to play and there was joint leadership of each work-stream. The Director of Children, Families and Communities gave credit to Families in Partnership, a voluntary organisation who supported the Parents and Carers of Children with special needs and a co-production event had been held which had helped professionals understand what life was like for families with SEND. Education needed to be more inclusive and a joint workforce development strategy had been put in place.

The next monitoring visit was due on 11 December 2018. Work programme 1 consisted of the 'Local Offer' and a website had been launched to give advice, information and resources. Twelve workshops were planned to launch the website to parents and professionals.

In the following discussion the following main points were made:

- The Cabinet Member for Education and Skills wished to endorse the work done so far and encourage the Improvement Board to continue their commitment to the work streams. There were financial pressures but the County Council needed to fulfil its statutory duty to meet the needs of those with SEND and provide appropriate services to meet those needs. Parents, carers and the community needed to be aware of what the local offer was and how to access it. He echoed that the County Council and Health needed to take joint responsibility for the work-streams and he was committed to the improvement journey
- The representative from Healthwatch endorsed the spirit of the report and the fact that parents and carers were being involved in the improvement programme but wondered what numbers were being dealt with and how the finances would cope in future
- It was explained that education needed to be more inclusive. A lot of children with SEND could be supported to succeed in mainstream schools but sadly that was not working consistently in

Worcestershire. There had been an increase in the numbers of Education, Health and Care (EHC) Plans, up to over 3000, and that rate of increase was greater in Worcestershire than nationally

- Parents thought they needed to get EHC Plans to access SEND services which showed that Worcestershire was not supporting SEND needs effectively
- Worcestershire was working with special school staff to organise visits to mainstream schools to pass on expertise and support
- Most requests for EHC plan assessments come from schools, in part because they were worried about having the resources to cope
- Local communities and voluntary groups had an important job in helping and supporting families with SEND and District Councillors had a Leadership role in the local area by supporting the services available and helping to communicate the information to those who needed it
- There were around 1000 children being home educated in Worcestershire – some because parents believed they could teach children themselves but some because they were at risk of being excluded. There was no legislation to rely on to intervene unless there were child protection concerns
- The County Council and Health had strategic duties to narrow inequalities; and education and employment were closely linked so it was important for the Board to hear about the Improvement Plan. The local offer was welcomed and supported. A further report should be brought back to the Board in future.

RESOLVED that the Health and Well-being Board:

- a) Noted the steps taken to address the key concerns identified in the Local Area SEND inspection in particular in relation to Local Area Leadership; and**
- b) Wished to inform the SEND Improvement Board that they endorsed the work done so far and encouraged the Improvement Board to continue their commitment to the work streams.**

Improvement Group Update

of the Health and Well-being Board. The meetings were well attended apart from the police due to operational pressures and the VCS who were in the process of appointing a representative.

The Group had considered various things:

- the annual update of the Joint Health and Well-being Strategy,
- the development and delivery of the Worcester City Plan – the delivery of courses to BAME groups such as cooking and finance; statutory services around homelessness and air pollution; the dementia dwelling grant pilot and community connectors scheme, where people could drop in and hear about local opportunities
- Redditch reported on entry level sports development, VCS grants, and mapping local assets
- Wychavon – Tesco Evesham events, dementia alliance in and narrowing health inequalities
- The Annual Report had been produced and showed that the Group was active but organisations needed to remain engaged
- The Dementia Dwelling Grant
- Warmer Worcestershire Partnership Group
- CCG update on neighbourhood teams
- Charter for Homeless Health

As agreed at the last Health and Well-being Board a Prevention Board would be set up and District Councils should have a role on that. Work was on-going on how the Board would look but it would concentrate on a community asset approach.

During the discussion the following main points were made:

- The title of the relevant Cabinet Member at Wychavon District Council had been changed and now included the phrase 'Health and Well-being' showing its importance was recognised
- The HIG provided a good opportunity for District Councils to become engaged in the operational work as they had a huge role to play in health and well-being with leisure centres and other well-being services
- The Cabinet Member for Education and Skills was pleased that the Secretary of State was now speaking about prevention, and was interested to see what decisions were made about how to fund prevention

- It was clarified that the Prevention Board came from the Director of Public Health Report where the three main strands were creating healthy places; helping people to help themselves and their communities; and prevention services. The scope of the Prevention Board was still being considered but it may meet once or twice to start a programme of work; it would not be an operational Board
- District input was important and would be needed on the Prevention Board around issues such as licensing and planning
- A query was raised about insulating houses with no cavities. Enquiries would continue outside the meeting.

RESOLVED that the Health and Well-being Board:

- a) Considered and commented on progress made by the HIG between April 2018 and October 2018;**
- b) Supported the scaling up of prevention activities in the priority areas and considered how the Prevention Board proposed within the DPH Annual report could work alongside district level achievements;**
- c) Agreed that each organisation represented by the Board should play an active part in the delivery of the Joint Health and Well-being Strategy and fully participate in providing the necessary updates and information for the reporting of progress.**

517 Health and Housing

The Health and Housing Group met in May 2018 and were looking at how to meet the objectives of the Memorandum of Understanding. The HWB had requested progress be made on Housing related needs assessments and also resources and commissioning. Various activities were on-going:

- A small group was considering the information already available to see how housing could support care and health. The findings would be brought back to the Board under the JSNA remit. Information would come from District Councils, health and social care, the BCF and people's lived experiences
- Work had started on looking at where resources and commissioning processes could be combined, for example the review of re-ablement services

being organised by the Director of Adult Services

- The Home Improvement Agency had been re-commissioned and delivered the Disabled Facilities Grant and various advice services. Housing representatives of the Council, District Councils and the CCG attended different meetings to ensure there was closer alignment of commissioning processes
- The One Public Estate Partnership looked at homes for life and were trying to influence planning policies to help make housing more accessible and adaptable in future
- Although housing colleagues were now working more closely together more could be done to improve effective working. A senior systems leaders meeting should be organised – including representatives from the Acute Trust to help areas such as hospital discharge and independence at home.

In the ensuing discussion the following points were made:

- It was agreed that there were lots of strands to be brought together. Tim was thanked for making sense of a difficult area
- The idea of a Leadership session was supported to complete an ownership gap analysis to ensure that the work which needs to be done was being organised. The Director of Adult Services would be happy to work with someone to organise the session
- The MoU in reality gives people permission to work together in Neighbourhood Teams to improve things for individuals. A direct service impact could be seen following on from the strategic discussions which happened at Board level
- There was a challenge for systems leaders to think of the individual rather than the needs of the organisation and make system changes when issues were uncovered.

RESOLVED that the Health and Well-being Board:

- a) Noted the progress across the system on embedding the principles of the MoU in Worcestershire and to practically support and**

co-ordinate as required; and

- b) **Agreed that a system review meeting should be jointly convened with senior officers in the NHS, WCC, and housing agencies to demonstrate best practice options and system change opportunities.**

518 Future Meeting Dates

Dates for 2019

Public meetings (All at 2pm)

- 26 February 2019
- 21 May 2019
- 24 September 2019
- 12 November 2019

Private Development meetings (All at 2pm)

- 26 March 2019
- 30 April 2019
- 18 June 2019
- 16 July 2019
- 22 October 2019
- 3 December 2019

The meeting ended at 3.10pm

Chairman

This page is intentionally left blank

HEALTH AND WELL-BEING BOARD

26 FEBRUARY 2019

All AGE AUTISM STRATEGY

Board Sponsor

Avril Wilson

Author

Laura Westwood

Priorities

Mental health & well-being

(Please click below
then on down arrow)

Yes

Being Active

No

Reducing harm from Alcohol

No

Other (specify below)

Safeguarding

Impact on Safeguarding Children

No

If yes please give details

Impact on Safeguarding Adults

No

If yes please give details

Item for Decision, Consideration or Information

Information and assurance

Recommendation

- 1. The Health and Well-being Board is asked to note the refreshed and updated All Age Autism Strategy**

Background

2. The Autism Act and Statutory Guidance mean the Worcestershire has to have an Adult Autism Strategy. During the drafting of the first 2015-18 Strategy the Health and Wellbeing Board agreed that the Worcestershire Strategy would be an All-Age Strategy.

3. This report presents an updated draft of the 2015-18 All-Age Autism Strategy to form Worcestershire's 2019-22 Autism Strategy. The vision and aims remain the same but the priorities have been streamlined. The Strategy works to align with the new NHS Long-Term Plan, Worcestershire's SEND Improvement Plan, build on the success of our Transforming Care Programme and respond to the recommendations in the Healthwatch Worcestershire Autism Report.

4. This Strategy has been developed through the Autism Partnership Board (membership from Adults Services Commissioning, Children's Services Commissioning, SEND, CCG, Voluntary and Community Sector, Carers and people with Autism Spectrum Conditions). There was also an engagement event and a local focus group.

5. The priorities within the Strategy are:

Priority 1: We will have a clear pathway for diagnosis and support for children, young people and adults with Autism Spectrum Conditions.

Priority 2: We will identify how to improve access to support for children, young people and adults with Autism Spectrum Conditions. This will include universal Health and Social Care services, voluntary and third sector services. We will publicise the wider pathway and links to available support.

Priority 3: We will work to increase awareness of Autism and how to support children, young people and adults with Autism Spectrum Conditions. We will ensure that organisations/individuals know how and where to access autism training and information about the needs of people with Autism Spectrum Conditions.

Priority 4: We will publish good practice information and advice for people with Autism Spectrum Conditions and the organisations who work with them to help prepare for big life changes.

Priority 5: We will work with employers to improve employment opportunities and conditions for people with Autism Spectrum Conditions

Legal, Financial and HR Implications

6. The Autism Act 2009 and Statutory Guidance of 2015 sets out requirements for Local Authorities and the NHS. This Strategy sets out how Worcestershire will comply with the requirements.

Privacy Impact Assessment

7. A screening has been completed and full assessment is not required.

Public Health Impact

8. This Strategy will work to ensure that Making every conversation count is equally applicable to people with Autism Spectrum Conditions.

Equality and Diversity Implications

An Equality Relevance Screening has been completed in respect of these recommendations. The screening did not identify any potential Equality considerations requiring further consideration during implementation.

Contact Points

County Council Contact Points

County Council: 01905 763763

Worcestershire Hub: 01905 765765

Specific Contact Points for this report

Laura Westwood, Commissioning Manager

Tel: 01905 846739

Email: lwestwood2@worcestershire.gov.uk

Supporting Information

- Appendix 1 – All-Age Autism Strategy 2019-22
- Appendix 2 – Draft Action Plan

Background Papers

In the opinion of the proper officer (in this case the Director of Adult Services) there are no background papers relating to the subject matter of this report.

This page is intentionally left blank

Worcestershire Health and Well-being Board

Worcestershire's All-Age Autism Strategy 2019-22

Page 13

Page | 1

www.worcestershire.gov.uk/healthandwellbeingboard

1. Vision

Based on the vision within the national autism strategy update in 2014 – *Think Autism: Fulfilling and Rewarding Lives* - our vision is that:

All children, young people and adults with autism are able to live fulfilling and rewarding lives within a society which accepts and understands them. They can get a diagnosis and access support if they need it, and they can expect mainstream public services to treat them as individuals, helping them make the most of their talents.

This Strategy adopts a lifelong approach to supporting people with autism spectrum conditions, linking adult services with services for children and young people and their families.

Through its implementation, more people will have the opportunity to be diagnosed and be able to access support if they need it. Newly diagnosed children will be supported by appropriate education, health and social care services

Page | 2

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



with supported transition to appropriate adult services. Effective transition systems will enable a seamless experience for those people with autism spectrum conditions who need support to have fulfilling and rewarding lives.

2. Background

2.1 Definition

For the purpose of this strategy, autism is defined as:

"A lifelong condition that affects how a person communicates with, and relates to, other people. It also affects how a person makes sense of the world around them"

Source: National Autistic Society

Autism is known as a spectrum condition because of the wide range of ways in which Autism presents in different people. There are different terms that individual people and groups prefer to use, including people with autism or on the autism spectrum, autistic spectrum disorder, neuro-diversity and pervasive developmental disorder. For consistency, autism spectrum conditions is a term we will use throughout this strategy.

Page | 3

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



2.2 Why does Worcestershire need an Autism Strategy?

The Autism Act 2009 was the first and, so far, only specific condition Act in England. The Statutory Guidance for Local Authorities and NHS Organisations to support the implementation of the Adult Autism Strategy 2015 sets out requirements for Local Authorities and NHS to develop commissioning plans around Adults with Autism and review them annually. The Autism Partnership Board are encouraged to see new commitments for the NHS regarding Autism in the NHS Long Term Plan. This is a re-draft of Worcestershire's 2015-18 Strategy and sets out how Worcestershire will fulfill its statutory requirements, the commitments in the Long Term Plan and achieve its vision.

Worcestershire is required to have an Adult Autism Strategy but has committed to have an All-Age Strategy. This Strategy is for children, young people, and adults with autism spectrum conditions, their families and carers. The original strategy was developed with the Worcestershire Autism Partnership Board during 2014 and was consulted on in early 2015. During 2018 the Autism Partnership Group has worked with stakeholders to re-draft and renew the strategy to take it forward. The Autism Partnership Board consists of Adults with autism spectrum conditions, family carers, voluntary sector organisations, Health and Social Care Professionals for Children and Adults.

The quotes in this strategy all come from the engagement events held to re-draft this strategy.

Page | 4

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



.3 Aims

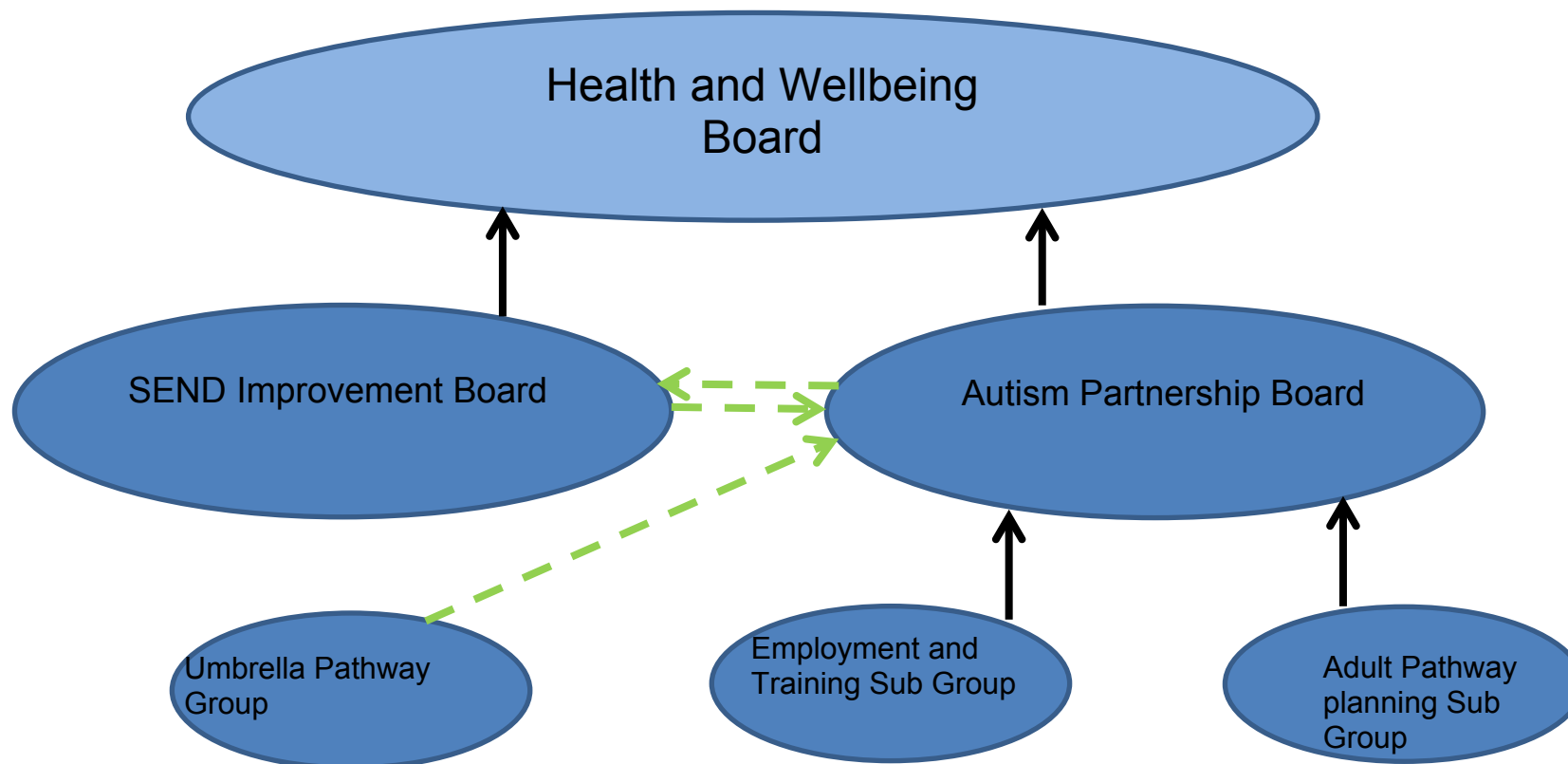
The Strategy aims to:

- Set out the objectives and outcomes for autism services and support in Worcestershire in line with the national strategy in response to the requirements set out in legislation, including Fulfilling and Rewarding Lives and the NHS Long Term Plan
- Outline an action plan and monitoring system to show how work will be taken forward in the next 3 years in key priority areas. The final action plan will clarify what actions we need to take, what success looks like and the timescale for each action.
- Demonstrate a shared understanding of the needs of people with autism spectrum conditions, the impact on people's lives and how to use available resources in the most efficient way to improve the outcomes for people with autism spectrum conditions
- Ensure that all staff and agencies working with people with autism spectrum conditions who may be at risk are aware of Worcestershire's safeguarding policies and procedures

Worcestershire's All-Age Autism Strategy 2019 - 2022

- Provide the strategic direction for education, health and social care organisations that support children, young people and adults with autism spectrum conditions.

3. Governance



Page 19

The Health and Wellbeing Board oversees the new system for local health commissioning. It leads on strategic planning and co-ordination of NHS, Public Health, Social Care and related Children's Services. The Board has representation from Elected Members, Clinical Commissioning Groups, Children's Services, Adult Services, Public Health, Healthwatch, NHS England, District Councils and West Mercia Police.

The Autism Partnership Board was established in advance of the last Strategy to develop the Strategy and monitor progress on the Action Plan. The Board has representatives from people with Autism Spectrum Conditions, Carers, Clinical Commissioning Groups, Worcestershire County Council Adult Commissioning, voluntary sector organisations and more recently Children's Services Commissioning and SEND. To deliver this strategy The Partnership Board is reviewing its terms of reference and looking to develop a more formal reporting system between the SEND Improvement Board and working Groups focused on the Umbrella Pathway. The Board also hopes to increase the involvement from people with Autism Spectrum Conditions, Family Carers, criminal justice and Health Providers. The Autism Partnership Board is also closely linked with the Learning Disability Partnership Board and there will be elements of joint working on some shared priorities.

The Autism Partnership Board is committed to further and engaging and co-producing with people with Autism Spectrum Conditions and their carers/families over the course of this strategy.

The Autism Partnership Board will continue to bring an annual update to the Health and Wellbeing Board.

Page | 8

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



4. What we know

4.1 National Guidance

The Adult Autism Strategy Guidance 2015 sets out requirements for Local Authorities and the NHS around Autism Training, care assessments, having an Autism Lead, having a clear pathway for diagnosis and having adequate data in order to commission services.

The NHS Long Term Plan now sets out new Commitments for people with Learning Disabilities and Autism:-

- action will be taken to tackle the causes of morbidity and preventable deaths
- the whole NHS will improve its understanding of the needs of people....and work together to improve their health and wellbeing
- reduce waiting times for specialist services (for Children and Young People)
- enable use of personalised health budgets
- increased investment in intensive crisis and forensic community support
- focus on improving the quality of inpatient care across NHS and independent sector

The SEND Code of Practice provides statutory guidance for organisations who work with children and young people with SEND.

Page | 9

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



4.2 National Research Facts

- According to data from the National Autistic Society, between 44% and 52% of people with autism spectrum conditions have a learning disability.
- The Mental Health of Children and Young People in England 2017 publication found that 1.2% of 5-19 year olds had an autistic spectrum condition. This is more common in boys (1.9%) opposed to girls (0.4%). The study gives evidence that 1 in 7 (13.9%) of children aged 5-19 with Special Educational Needs have Autism Spectrum Conditions.
- National Autistic Society data shows that only 16% of Autistic Adults are in full time employment and only 32% are in some kind of paid work.
- The Autistica Research Group states that "80% of Autistic Adults experience mental health issues during their lives".
- Research from the National Autistic Society shows that people with Autism Spectrum Conditions are 4 times more likely to be lonely and 79% of people with Autism feel socially isolated.

Worcestershire's All-Age Autism Strategy 2019 - 2022

- The Autistica Report into Early Death in Autism highlights that Autistic Adults with a Learning Disability are 40 times more likely to die prematurely due to a neurological condition. Autistic Adults without a Learning Disability are 9 times more likely to die from suicide.

4.3 Local guidance and research

- The vision of the Worcestershire Health and Well Being Strategy is that "*Worcestershire residents are healthier, live longer and have a better quality of life especially those communities and groups with the poorest health outcomes.*"
- In March 2018 Healthwatch Worcestershire published their Autism Spectrum Conditions Report, which provided feedback from people with Autism Spectrum Conditions and their carers in relation to the priorities within the All Age Autism Strategy. Recommendations were made about some specific areas where further improvements are still needed, including:
 - Increased staff awareness and understanding of Autism Spectrum Conditions across health services
 - Making adjustments to help people with Autism Spectrum Conditions to access health services
 - Access to information about services and support

Worcestershire's All-Age Autism Strategy 2019 - 2022

- Access to support, in particular mental health support for people with Autism Spectrum Conditions and their carers
 - Access to and waiting times for diagnosis for children via the Umbrella Pathway.
- .
- The Strategy is designed to complement the Worcestershire SEND OFSTED Improvement Plan and Worcestershire Strategy for Children and Young People with Special Educational Needs. It aimed that over the duration of this strategy there will be further alignment with plans for SEND 0-25 provision.
 - The 2017 Joint Strategic needs Assessment Summary report highlighted Autism Spectrum conditions as an emerging issue "The number of children with a Special Educational Needs (SEN) statement for ASD in Worcestershire has increased since 2010. For primary schools, the rate of 4 in 1,000 is lower than the national rate of 6.3 in 1,000 suggesting variation in diagnosis and/or recording practice."
 - The 2018 Joint Strategic Needs Assessment for Worcestershire states that "In January 2018, 868 children in Worcestershire were recorded as having ASD as a primary SEN (253 primary school pupils, 439 secondary school pupils and 176 children in special schools), which is a slight increase on 2017"
 - National data estimates that 1% of the population lives with Autism Spectrum Conditions. This would equate to 5830 people in Worcestershire.

4.4 Adult Social Care Data

In the data collected for the 2018 Autism Self-Assessment Framework 108 people with Autism Spectrum Conditions were recorded on the Adult Social system. All of the individuals had other recorded needs

101	Learning Disability
1	Mental Health
4	Physical Support
2	Support for Social Isolation

As at January 2019 85 individuals recorded as having Autism Spectrum Conditions are receiving services funded by Adult Social Care at a cost of just over £5 million per annum. They receive a range of services including day opportunities, replacement care, supported living, shared lives and residential care. Over half of the funding is spent on residential care.

5. Local Progress

Worcestershire's All-Age Autism Strategy 2019 - 2022

Progress has been made over the duration of the last All Age Autism Strategy:-

- The Adult Diagnosis service has been improved to include more support sessions. Funding has increased and has led to a reduction in Waiting times. Waiting times now meet NICE guidelines
- The Umbrella Pathway has been reviewed and has its own improvement plan
- Families in Partnership (carers group for children in education) has been established and is working with Children's Services
- The SEND Strategy and Improvement Plan have been developed
- Autism training has been delivered to 600 County Council and Health and Care Trust Staff
- An employment event was held in March 2018 to raise Autism Awareness among Worcestershire Employers and will be repeated in March 2019
- A specialist Autism Supported Living Service has been commissioned and built and will open in April 2019
- Worcestershire has performed well in the Transforming Care Programme (TCP) to support people out of Long Stay Hospitals.

Worcestershire's All-Age Autism Strategy 2019 - 2022

- A complex needs pathway is being developed to meet the needs of Adults with complex needs in line with the work completed on the Transforming Care Programme
- Worcestershire has made progress in the National Self-Assessment Framework (SAF) and has opted to complete the SAF in years when it has not been a requirement.

6. Priorities

The key priorities will be linked to an action plan to ensure that outcomes are clearly identified

Priority 1: We will have a clear pathway for diagnosis and support for children, young people and adults with autism spectrum conditions.

Priority 2: We will identify how to improve access to support for children, young people and adults with Autism Spectrum Conditions. This will include universal Health and Social Care services, voluntary and third sector services. We will publicise the wider pathway and links to available support.

Priority 3: We will work to increase awareness of Autism and how to support children, young people and adults with Autism Spectrum Conditions. We will ensure that organisations/individuals know how and where to access autism training and information about the needs of people with Autism Spectrum Conditions.

Priority 4: We will publish good practice information and advice for people with Autism Spectrum Conditions and the organisations who work with them to help prepare for big life changes. Examples of these changes may be:-

Starting school

Moving school

Page | 16

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



worcestershire
county council

Worcestershire's All-Age Autism Strategy 2019 - 2022

Starting College
Becoming an adult
Moving house
Family changes
Death of a relative
Starting Employment

Priority 5: We will work with employers to improve employment opportunities and conditions for people with Autism Spectrum Conditions

7. Priority 1: We will have a clear pathway for diagnosis and support for children, young people and adults with autism spectrum conditions.

7.2 What do we know about Priority 1

- Identification of a possible autism spectrum condition is the essential first step to effective support, even before a formal diagnosis. We recognise that diagnosis is not a goal in itself but part of the integrated process which should lead to people with autism spectrum conditions being able to access the support they need. This Strategy will ensure there is a clear and consistent pathway in all areas. We aim to support people with autism spectrum conditions to receive a diagnosis at the earliest opportunity.
- The NHS Long Term Plan sets out an ambition to work with Children and Young People Mental Health Services to test and implement the most effective ways to reduce waiting times for specialist services for people with Learning Disabilities and Autism.
- NICE Guidance Autism Quality Standard (Q51) requires *people with possible autism who are referred to an autism team for a diagnostic assessment have the diagnostic assessment started within 3 months of their referral.*

Page | 18

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



- The SEND Strategy sets out priorities for early identification and intervention and providing a graduated response.
- The majority of people who are diagnosed with autism spectrum conditions receive their diagnosis as children. Worcestershire will continue to encourage early identification of potential autism spectrum conditions in childhood and improve the transition from children's to adult services. This should support a reduction in the numbers of people with autism spectrum conditions who reach adulthood without a diagnosis. However it is not unusual for adults to be referred for an assessment of an autism spectrum condition. Work will be done to promote the adult diagnosis service more widely
- Adult Social Care is spending almost £5 million per year on individuals who have Autism Spectrum Conditions and Complex Needs

7.2 What are we going to do to achieve Priority 1

Work will be done to increase awareness of diagnosis services, maximising the online presence and literature published about these services.

Commissioners will continue to monitor waiting times for diagnosis, views of people using the services and feedback to the Autism Partnership Group

Commissioning plans will be developed based on the work done to map the Autism Pathway (described in Priority 2).

Adult Social Care and NHS will work to develop the Worcestershire Complex Needs Pathway to meet the needs of those with complex needs.

We will look to provide structured intervention for people on the Autism Spectrum to develop problem solving skills, build resilience and achieve positive, sustainable change to enable them to address and overcome the difficulties that have led to them being at risk of breakdown and prevent further escalation thus resulting in a fulfilling independent life without requiring long term support.

8. Priority 2: We will identify how to improve access to support for children, young people and adults with Autism Spectrum Conditions. This will include universal Health and Social Care services, voluntary and third sector services. We will publicise the wider pathway and links to available support



8.1 What do we know about Priority 2

- There are a number of community and voluntary sector organisations providing support for Children, Adults and families living with Autism Spectrum Conditions in Worcestershire. Many of these organisations rely on charitable funding and do not have public sector contracts.
- Support is given to children in school via their teachers or SENCO
- Many people with autism spectrum conditions and their families already offer peer support to each other at meetings within the community, often reducing the need for professionally run and organised services.
- The County Council Local Offer Pages aim to provide information for Children, Young People and Families and include Autism Specific services and support. The vision underpinning the SEND Strategy is that Children, Young People and families "have the information and support they need to make positive informed choices and decisions about their lives.
- The feedback gained from the Healthwatch Worcestershire report showed that people with Autism Spectrum Conditions find that going to the Doctors or to Hospital is a difficult experience for them. It also showed that people find it difficult to find the support that they need and that there are issues with accessing mental health services

- Under the Care Act 2015, everyone is entitled to an assessment of need. Our 2018 Autism Self-Assessment highlighted that care assessments and carer assessments are not routinely offered to people going through the current Adult Pathway.

8.2 What are we going to do to achieve Priority 2

Work will be done over the course of this Strategy to help schools to achieve Autism Friendly Schools Standard.

We aim to develop partnerships with other agencies to build on the current local support services in Worcestershire, including housing, education, employment services and the Criminal Justice System

Work will be done to promote Autism Awareness training to other community groups.

Work will be done to map support available, establish any gaps in provision and barriers to success. Findings will be used to inform future commissioning decisions.

Details of this work will be published on the County Council and Local Offer web Pages

The Adult Pathway Planning Group will consider all the Healthwatch recommendations regarding: accessing the GP, accessing hospital, accessing support and Mental Health services.

Page | 22

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



The Autism Partnership Board will maintain an overview of the Autism Market: all services that provide support and help to people with Autism Spectrum Conditions, including its sustainability and risks

This Strategy will ensure that eligibility for a Social Care Assessment is promoted to those with Autism Spectrum Conditions. Also that Carers Assessments are promoted to families of those with Autism Spectrum Conditions.

9. Priority 3: We will work to increase awareness of Autism and how to support children, young people and adults with Autism Spectrum Conditions. We will ensure that organisations/individuals know how and where to access autism training and information about the needs of people with Autism Spectrum Conditions.

9.2 What do we know about Priority 3

- The NHS Long Term Plan states that

"The whole NHS will improve its understanding of the needs of people with learning disabilities and autism, and work together to improve their health and wellbeing. Following a consultation on the options for delivering awareness training⁹⁴, NHS staff will receive information and training on supporting people with a learning disability and/ or autism. Sustainability and Transformation Partnerships (STPs) and integrated care systems ICSs will be expected to make sure all local healthcare providers are making reasonable adjustments to

Page | 23

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



Worcestershire's All-Age Autism Strategy 2019 - 2022

support people with a learning disability or autism. Over the next five years, national learning disability improvement standards will be implemented and will apply to all services funded by the NHS. These standards will promote greater consistency, addressing themes such as rights, the workforce, specialist care and working more effectively with people and their families. By 2023/24, a 'digital flag' in the patient record will ensure staff know a patient has a learning disability or autism. We will work with the Department for Education and local authorities to improve their awareness of, and support for, children and young people with learning disabilities, autism or both. And we will work with partners to bring hearing, sight and dental checks to children and young people with a learning disability, autism or both in special residential schools."

- Feedback from parents, carers, pupils and professionals makes it clear – all staff working with people with autism spectrum conditions should have access to at least basic information and training and this is a key priority for this strategy.
- Worcestershire County Council has co-produced a training course for staff and contracted providers; this has now been attended by approximately 600 staff.
- The Autism Partnership Board previously produced a GP Training Pack which worked well to raise Autism Awareness. This is due to be updated.
- Babcock offers Autism Awareness training and more detailed Autism Training for Schools.

- The Worcestershire Autism Self-Assessment Framework highlighted that there were some gaps in Autism Awareness Training across some Public Sector Organisations and the Healthwatch Worcestershire report showed that there were some gaps in knowledge across the NHS

9.2 How are we going to achieve Priority 3

We will update the Autism GP Pack and look at how it can be adapted for other settings e.g. other NHS settings, schools, voluntary sector organisations.

We aim to increase the uptake and monitoring of training to health, social care and partner organisation staff, over the next 3 years. This will ensure that professionals who come into contact with children, young people and adults with autism spectrum conditions have the right skills and expertise to support them.

Data on progress on training from all organisations will be regularly collected and reviewed.

We will promote Autism Awareness training to other voluntary sector organisations and community groups and monitor both the uptake of training and other organisation' progress towards Autism Friendly awards.

Autism Training for other bodies particularly Health, Ambulance Services, housing, Probation, Police, Criminal Justice and Advocacy Services will be promoted

Page | 25

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



Worcestershire's All-Age Autism Strategy 2019 - 2022

More specialised training should be undertaken by staff that hold key roles in assessment and support planning and we will make sure this is available for organisations to access.

10. Priority 4: We will publish good practice information and advice for people with Autism Spectrum Conditions and the organisations who work with them to help prepare for big life changes.

10.1 What do we know about Priority 4

- People with autism spectrum conditions can find change very difficult and are often unable to visualise what life might be like in the future. Transitions can happen at all ages, and the transition from children's to adult services can be a particularly traumatic time for young people and their families, often associated with high levels of anxiety. Becoming an adult can be daunting for any young person. The aim of the strategy is to enable support to prepare for adulthood to be accessed through ordinarily available services as well as specialist services where this is needed.
- Some children will not require the same level of service when they are an adult, and some will require more. The level of service will be determined by an assessment of need. We aim to have a clear pathway for those young people who may require more specialist support from social care services as adults.

Worcestershire's All-Age Autism Strategy 2019 - 2022

- Social workers are linked with schools to identify children who may need this additional support as early as possible, and to plan the transition with the young person and their family.
- A "Transition Toolkit" for children and young people with autism spectrum conditions (both for Early Years and school age) has been produced and used to support successful transitions. Each child and young person going through transition has a plan and providers of early years, schools and post 16 provision have access to the toolkit. This will be reviewed as a priority and include information that would also support successful transition for adults with autism spectrum conditions.
- Young people with autism spectrum conditions need to be supported through education so that they can maximise their potential and gain the qualifications they are capable of. Educational settings need to make reasonable adjustments to reduce barriers in completing courses, attaining qualifications and the social aspects of college life.
- Worcestershire is committed to continuing to develop a continuum of educational provision that recognises different levels of specialism, experience and expertise in provider settings, and enables specialist advice and support to be made available.

10.2 How are we going to achieve Priority 4

Page | 28

www.worcestershire.gov.uk/healthandwellbeingboard



Wyre Forest
Clinical Commissioning Group



South Worcestershire
Clinical Commissioning Group



Redditch and Bromsgrove
Clinical Commissioning Group



This Strategy will build on the work already underway through the SEND Improvement Plan and the Worcestershire County Council Young Adults Team to ensure that people have the information and support they need to manage big life changes. This fits with priority 4 of the SEND Strategy and the two Boards will work together to deliver positive outcomes for people with Autism Spectrum Conditions.

Wherever possible, the Worcestershire Autism Partnership Group will work to influence other organisations, providers and public services to develop their understanding of autism spectrum conditions, to make reasonable adjustments to offer more effective support and, in particular, to help people experience successful and seamless transitions between services and placements.

11. Priority 5: We will work with employers to improve employment opportunities and conditions for people with Autism Spectrum Conditions

11.1 What do we know about Priority 5

- 'Fulfilling and Rewarding Lives' (March 2010) says that the ability to get, and keep, a job and then to progress in work is the best route out of poverty, and is a central part of social inclusion.

Worcestershire's All-Age Autism Strategy 2019 - 2022

- The National Autistic Society publication *Don't Write me off* explains that "success in employment starts by ensuring that children and young people have their needs identified and met in school. Work experience opportunities should be matched to a young person's strengths and interests and awareness training for work experience providers will support successful placements."
- Adults with autism spectrum conditions often need support with building skills and overcoming barriers to work and Worcestershire wants to help people with autism spectrum conditions make the most of their talents by getting the same opportunities to employment as everyone else. This will include working with some employers in order to raise their understanding of autism and what reasonable adjustments they can make.
- For young people with an Education, Health and Care Plan, transition reviews in school from Year 9 onwards should support planning for further education, employment or training. This will include apprenticeships and supported internships.
- The Chartered Institute of Personnel and Development 2018 Neurodiversity at Work Guide states that "Through our case study research, it's clear that adjustments made to enable neurodivergent individuals to thrive at work benefit everyone. Most are low cost and easy to implement – and can make a significant difference to an individual's working life, their potential to contribute to the organisation and to build a lasting career."
- Worcestershire is planning a further employment event with Worcestershire Employers in partnership with the Chartered Institute of Personnel and Development and Fortis Living in March 2019

11.2 How are we going to achieve Priority 5

Currently there are developments across both mental health and learning disabilities services regarding employment support and the aim is to ensure that adults with autism spectrum conditions are fully included in any developments as this strategy is implemented.

We will share good practice guidance with employers and share the findings from the next Worcestershire Autism Employment event with the local business community.

Education Health and Care Plans will include employment plans where appropriate. This will be audited by the Autism Partnership Board.

This page is intentionally left blank

Autism Strategy Draft Action Plan

To deliver the strategy

Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Review terms of reference for Autism Partnership Board (including core membership)	Participation in the Board	Autism Partnership Board	Health and Wellbeing Board	March 2019
Establish terms of reference for Adult Pathway Planning Group (including core membership)	Participation in the group	Autism Partnership Board	Autism Partnership Board	March 2019
Review terms of reference for Employment and Training Group (including core membership)	Participation in the Group	Employment and Training Group	Autism Partnership Board	May 2019
Set up highlight reporting system between linked groups (including SEND and Autism Board)	Regular highlight reports at Autism Partnership Board	Adult Commissioning Rep SEND Rep	Autism Partnership Board	April 2019
Increase engagement from Autism Community and Carers	Participation in the Partnership Board	Autism Partnership Board Members	Autism Partnership Board	October 2019
Improve data collection	Highlight reports to the Board	Autism Partnership Board Members	Autism Partnership Board	October 2019

Priority 1

Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Increase awareness of the Adult Diagnosis Service	Review referral rates Customer feedback	Provider	Adult Pathway Planning Group	March 2020
Increase awareness of the Umbrella Pathway	Review referral rates	Children's Services Umbrella Pathway Group		March 2020

Develop plans based upon pathway planning/gap analysis work	Feedback to groups	CCG Social Care Adult Pathway Planning Group	Sub-groups and Autism Partnership Board	March 2020
Develop a Complex Needs Pathway	Feedback to Groups	Complex Needs and Social Care Commissioning		September 2019
Priority 2				
Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Roll out Autism Friendly Schools Standard	Review numbers of Autism Friendly Schools	Education & Skills with Babcock Prime as part of Workstream 2 of SEND Improvement Plan	SEND Improvement Board	September 2020
Build Partnerships with Housing, Education, Employment, Criminal Justice	Participation in Autism Partnership Board	Co-Chairs	Autism Partnership Board	September 2019
Map support available and establish gaps	Support Mapping	Adult Pathway Planning Group SEND Improvement Board	Adult Pathway Planning Group SEND Improvement Board Autism Partnership Board	December 2019
Publish links to Support Available	Review of online information	CCG Adult Social Care SEND Children's Services	Autism Partnership Board	December 2019
Consider all the Healthwatch recommendations regarding: accessing the	Review steps taken to improve access Customer surveys	CCG Healthwatch Pathway planning group	Pathway Planning Group Autism Partnership Board	December 2019

GP, accessing hospital, accessing support and Mental Health services.				
Review ability to access Mental Health	Healthwatch report Support mapping	Healthwatch Pathway Planning group	Autism Partnership Board	April 2020
Social Care Assessments to be promoted to those with a diagnosis	Monitor Social Care Assessments from those with a diagnosis	Diagnosis services CCG	Pathway Planning Group	August 2019
Carers assessments to be promoted to people caring for those with a diagnosis	Monitor Carers Assessments	Diagnosis Services CCG	Pathway Planning Group	August 2019
Priority 3				
Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Update the GP Pack	Pack produced Survey GPS	Pathway Planning Group/Employment and Training Group task group	Pathway Planning Group	September 2019
Look at how the Pack can be used in other organisations	Reports at meeting	Employment and Training Group	Autism Partnership Board	December 2019
Improve Autism Awareness in GP Services	Monitor number of GPs accessing Autism Training Monitor number of GPS who have GP pack	CCG	Pathway Planning Group Employment and Training Group	April 2020
Improve Autism Awareness in acute services	Monitor number of Acute staff accessing Autism Training	Acute Services	Employment and Training Group	September 2020

Increase Autism Awareness in other services (e.g. housing, education, criminal justice, ambulance services)	Monitor training data from partner agencies	Partner agencies Employment and Training Group	Autism Partnership Board	September 2020
Promote free training and resources	Monitor online information	Employment and Training Group	Employment and Training Group	April 2020
Priority 4				
Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Produce Transition Pack		SEND Young Adults Team		
Review Transition pack in terms of what more is required for Autism		Autism Partnership Board	Autism Partnership Board	September 2020
Priority 5				
Action	How will we monitor	Who will deliver	Who will oversee	Timescales
Publish good practice guidance with employers	Guide Produced	Employment and Training Group	Employment and Training Group	December 2019
Develop system to record numbers of people in employment	System produces	Employment and Training Group DWP	Employment and training group	December 2019
Publish results of Autism Employment Event	Guide produced	Employment and Training Group	Employment and Training Group	June 2019
EHCP Plans cover employment (where appropriate)	Review of plans			April 2020
Join up with Public Health and Learning Disability work around employment		Autism Lead with SEND Service post 16 team and Young Adults Team	Autism Partnership Board.	June 2019

HEALTH AND WELL-BEING BOARD 26 FEBRUARY 2019

DEMENTIA STRATEGY 2019- 2024

Board Sponsor

Name

Authors

Carol Rowley, Delivery Programme Manager Worcestershire and
Jacinta Meighan-Davies Clinical Programme Manager Herefordshire

(Please click below
then on down arrow)

Priorities

Mental health & well-being	Yes
Being Active	No
Reducing harm from Alcohol	No
Other (specify below)	

Safeguarding

Impact on Safeguarding Children
If yes please give details

No

Impact on Safeguarding Adults
If yes please give details

No

Item for Decision, Consideration or Information

Information and assurance

Recommendation

1. The Health and Well-being Board is asked to note the content of the strategy and feedback any comments prior to the final version being presented to the STP Board in February and then launched at an event on 12 March 2019 where workshops with the key stakeholders who have contributed to the actions in the strategy will set the timescales for completion.

Background

2. Over the last 5 years the delivery of dementia care in Herefordshire and Worcestershire has evolved into a multi-agency approach. The 2019-2024 strategy reflects the priorities identified during recent engagement survey and workshops. It will build upon the successes of our local dementia partnerships delivered by a wide range of local stakeholders who are key to supporting people with dementia, their family and friends and communities they are living in. As strong as our foundations are we know that we have more to do to ensure we provide timely diagnosis and that people with dementia and their carers get the right support whatever their individual

circumstances. We must also continue to strive towards becoming more dementia friendly as a community. Our ambition is to ensure that people at whatever stage of their condition are given the best opportunity to live well, remaining active, feel valued and connected within their family and community.

3. A new element of the strategy is a focus on preventing well. Opportunities will be created to raise public awareness of the link between vascular health and dementia risk and how adopting a healthy lifestyle can also have a positive impact on the brain helping to prevent some types of dementia.

4. The strategy endorses continuation of the collaborative approach that exists in our counties to build dementia friendly communities. By both, continuing to work on improving dementia care from diagnosis to end of life, while at the same time developing more dementia aware and supportive communities, we aim to improve the lives of people with dementia and their carer's. A fundamental challenge is to address local stigma and negative image of dementia which is creating fear and a sense of hopelessness within our aging population.

5. The strategy includes actions to improve the support offered to family and friends (informal carers) of people with dementia, to assist them in their caring role and support their own health and wellbeing.

6. The strategy also focuses on identified gaps in our current local dementia care delivery model. In particular there is a focus on improving dementia care provided in care homes, improving care provided in people's own homes and improving care for people with more advanced dementia living at home.

7. The scale of the challenge is great with an estimated 12,456 people currently living with dementia in H and W including more than 592 people with young onset dementia. We must respond to the growing number of older people who are developing dementia later in life, many of whom often have another significant chronic condition. More care needs to be delivered within our communities however we also need to ensure that palliative care and end of life care services for people with dementia are flexible and responsive to individual need. Building on the progress made around provision of support after diagnosis and throughout the course of the illness we need to ensure that support is truly person-centred and flexible to take account of personal needs and circumstances.

8. We are committed to working together to achieve the strategy aims and encourage you to join us in meeting this challenge by understanding our strategy and working with us to deliver it over the next five years.

Reporting and Governance

9. The strategy will run 2019-2024 with a delegated action plan within each county, reviewed quarterly by the Dementia Programme/Partnership Board. An annual dementia dashboard and highlights report will be produced for the Health and Wellbeing Boards. Leadership for the strategy implementation will be supported within each county by a LA Lead and Clinical Lead who together will champion work being taken forward.

10. The strategy is based upon key messages we heard from people with dementia, their carer's, wider public and organisations delivering care and support to people with dementia and their carers via our strategy engagement workshops and survey.

11. We received over 90 responses via our engagement survey which included people with dementia and their carer's, members of the public, volunteers, professionals and organisations involved in research, education and the care and support for people affected by dementia. The strategy also reflects detailed feedback captured during a series of workshops and presentations with partners which was attended by over 80 people.

12. Key messages

- Focus on prevention – greater emphasis on primary prevention of dementia
- Continue to build dementia-friendly communities in collaboration with key partners in localities and neighbourhoods
- Identify passionate multi-agency leaders and champions who will work together to support delivery of this strategy within locality and neighbourhood teams
- Support the expansion of the Meeting Centre Model which nurtures community partnership to support user-led dementia friendly community facilities
- Endorse and support the Dementia Action Alliance movement to address stigma and fear
- Greater support for Carers to enable them to fulfil their role
- Build on identification and diagnosis – including underrepresented groups
- Greater recognition of palliative care needs and improved dementia end of life in the community

13. Key Challenges

- Stigma and Fear about dementia
- Increasing demand due to aging population
- Complexity owing to co-morbidities
- Capacity pressures in home care and care home market
- Financial constraints across health and social care
- Third sector financial constraints
- Engagement with wider community and underrepresented communities
- Pressure for affordable respite care

Legal, Financial and HR Implications

14. There are no legal financial and HR implications.

Privacy Impact Assessment

15. A privacy impact assessment has been completed in respect of these recommendations. The screening did not identify any potential privacy considerations requiring further consideration during implementation

Equality and Diversity Implications

16. An Equality Relevance Screening has been completed in respect of these recommendations. The screening did not identify any potential Equality considerations requiring further consideration during implementation.

Contact Points

County Council Contact Points

County Council: 01905 763763

Worcestershire Hub: 01905 765765

Specific Contact Points for this report

Carol Rowley Transformation Delivery Programme Manager Worcestershire

Tel: 01527 482923

Email: carol.rowley5@nhs.net

Jacinta Meighan-Davies Clinical Programme Manager Herefordshire

Tel: 01432 383778

Email: jacinta.meighan-davies@herefordshireccg.nhs.uk

Supporting Information

- Appendix **Dementia Strategy Final Draft**

Background Papers

In the opinion of the proper officer (in this case the Director of Adult Social Care) the following are the background papers relating to the subject matter of this report:

- **Living Well with dementia consultation paper – Background Paper 1**
- **Dementia Strategy Survey Results Summary – Background Paper 2**

Herefordshire and Worcestershire's Living Well with Dementia Strategy 2019-2024



1. Introduction

Early diagnosis and access to support for those living with dementia and their carers remains a priority for Herefordshire and Worcestershire. Our Strategy sets out the Herefordshire and Worcestershire ambition to support people to live well with dementia.

It reflects the national strategic direction outlined in The Prime Minister's Challenge on Dementia which details ambitious reforms to be achieved by 2020.

The Strategy is informed by what people have told us about their experiences either as a person living with dementia or as a carer and is written for those people; specifically those with memory concerns, those with a dementia diagnosis, their families and carers, communities and organisations supporting them.

1. Introduction

Hereford and Worcestershire's Living Well with Dementia Strategy 2019-2024 has been developed in partnership with local health, social care and the voluntary and community sector. An important focus of our strategy is to move towards delivery of personalised and integrated care.

We have used the NHS England Well Pathway for Dementia to give us a framework that puts the individual and their carer at the centre of service development and implementation across health and social care. As a partnership, we are committed to minimising the impact of dementia whilst transforming dementia care and support within the communities of Herefordshire and Worcestershire, not only for the person with dementia but also for the individuals who support and care for someone with dementia.

We want the well-being and quality of life for every person with dementia to be uppermost in the minds of our health and social care professionals. <https://www.england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/03/dementia-well-pathway.pdf>

2. What is dementia?

‘Dementia describes a set of symptoms that include loss of concentration and memory problems, mood and behaviour changes and problems with communicating and reasoning. These symptoms occur when the brain is damaged by certain diseases, such as Alzheimer’s disease, a series of small strokes or other neurological conditions such as Parkinson’s disease’ **‘Prime Minister’s Challenge on Dementia 2020’**

Prime Minister’s Challenge on Dementia 2020

Dementia is most common in people over the age of 65 but there are also a smaller cohort of people who develop ‘young onset’ or ‘working age’ dementia from as young as 35.

For most people the cause is unknown but there are some known causes or risk factors such as:

- Diseases and infections that affect the brain e.g. Alzheimer’s disease or meningitis
 - Pressure on the brain e.g. brain tumour
- Lack of blood and oxygen supply to the brain e.g. stroke and head injuries
 - Cardiovascular insufficiencies.

There is clear evidence that the earlier into the disease that dementia is diagnosed the better the outcomes for those with the illness and their informal carers, it will help with decision making and preparing the individual and their family for choices they will need to make in the future.

Links to further information about the different types of dementia are provided at the end.

3. Vision, guiding principles and aim

This strategy has been guided by principles developed by NHS England in their transformation framework. This 'Well Pathway for Dementia' is 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.

Our vision is that in Herefordshire and Worcestershire people with dementia can live well through the following guiding principles:



Page 57

Preventing
Well

Diagnosing
Well

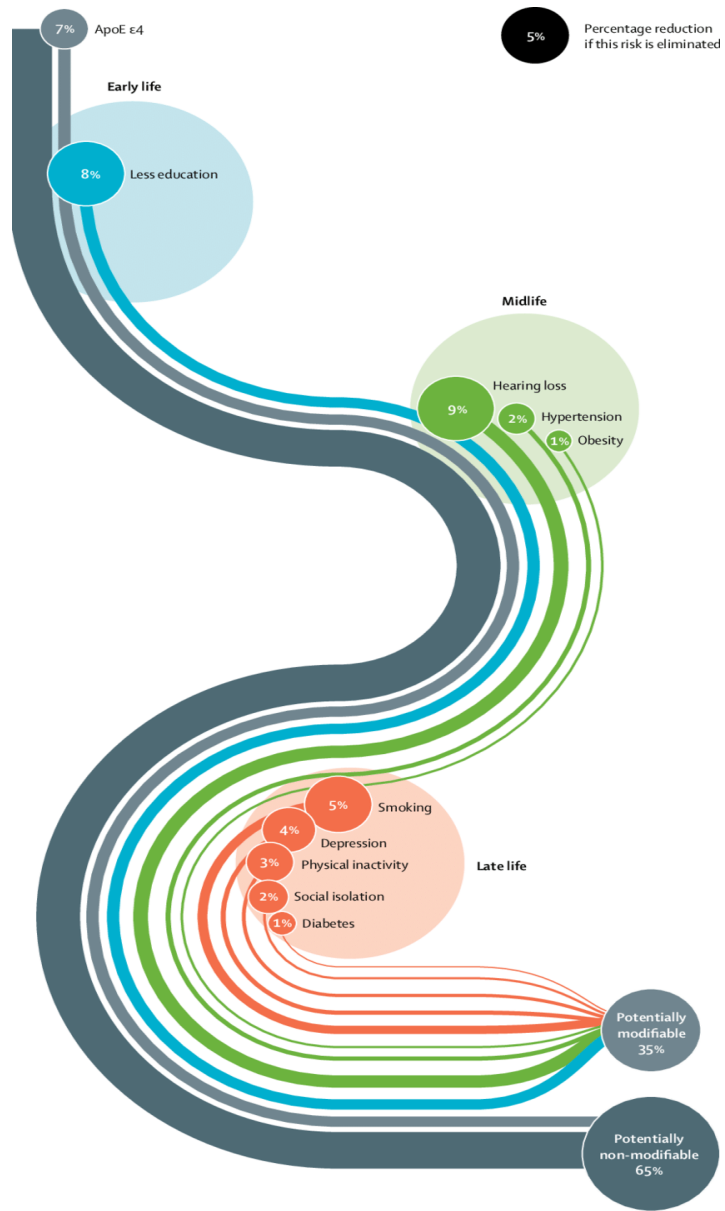
Supporting
Well

Living
Well

Dying
Well

Our new strategy focuses on people and patients so that every person with dementia, their carers and families have access to and receive compassionate care and support not only before diagnosis but after diagnosis and through to end of life.

3.1 Preventing Well - Risk Factors to Dementia



4. National context and background

There are a number of national drivers that shape and influence the way the UK should address dementia as a condition

Prime Minister's Challenge on Dementia 2020

In February 2015, the Department of Health published a document detailing why dementia remains a priority and outlined the challenges the UK continues to face in relation to dementia.

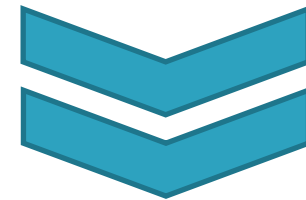
The priorities identified within this are:

- 1) To improve health and care
- 2) To promote awareness and understanding
- 3) Research

Legislation

Care Act 2014

Equality Act 2010



Context

Living Well with Dementia
2009

Dementia 2015

NHS & Adult Social Care
Outcomes Frameworks

Fix Dementia Care 2016

National picture

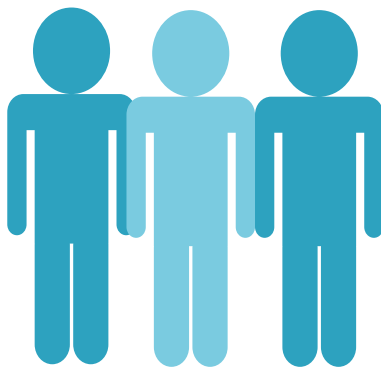
There are currently 850,000 people living with dementia in the UK. 42,325 of these have early onset dementia.

The number of people with dementia is forecast to increase to 1,142,677 by 2025 – an increase of 40%.

Page 60

1 in every 14 of the population over 65 years has dementia

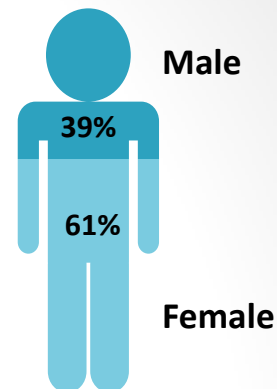
It is estimated that 1 in 3 people in the UK will care for someone with dementia in their lifetime



1 in 3 people who die over the age of 65 years have dementia. Dementia now accounts for 11.6% of all recorded deaths in the UK.

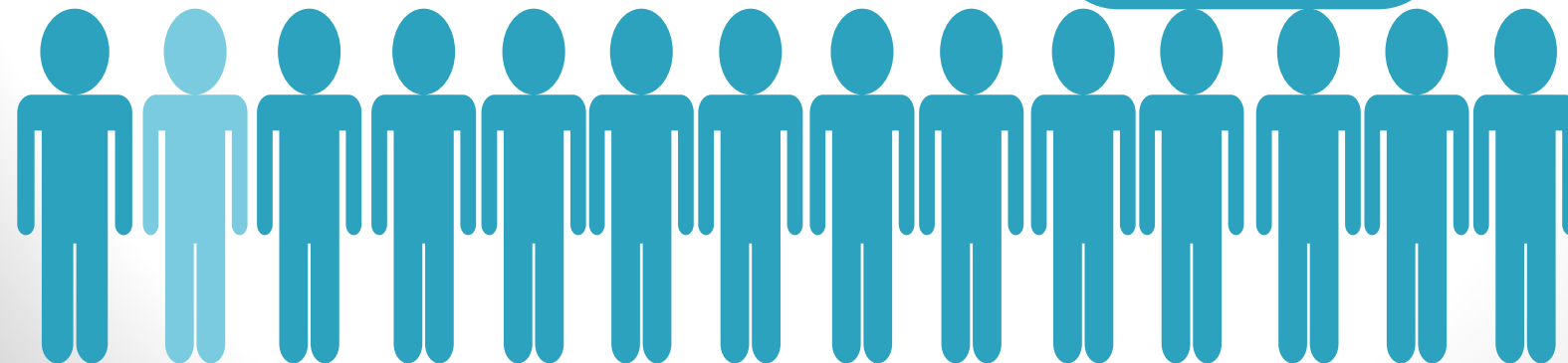
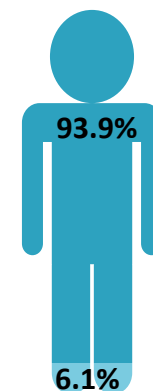
In the UK 61% of people with dementia are female and 39% are male. There are a higher proportion of women with dementia as women tend to live longer, however, this does reverse when considering the data for people with early-onset dementia.

Gender



It is estimated that there are 11,392 people from black and minority ethnic (BME) communities who have dementia in the UK. 6.1% of all those are early onset, compared with only 2.2% for the UK population as a whole, reflecting the younger age profile of BME communities.

Dementia and Ethnicity



Herefordshire and Worcestershire Living Well with Dementia Programme 2019-2024

National Outcomes

1. PM's Dementia Challenge 2020 Visit

- Reducing Risk
- Improved Health + Social Care
- Awareness + Social Action
- Research

2. NHSE Well Framework/Pathway

- Prevent well
- Diagnose well
- Support well
- Live well
- Dying well

H & W Outcomes

- **Driving STP wide culture change** through raising awareness and understanding
- **Early Dementia Diagnosis** and access to support
- **Supporting people** affected by dementia ensuring they have choice and control in decisions affecting their care and support
- **End of Life**
Ensure person living with dementia dies with dignity and their families/carers experience compassionate support

Primary Drivers

Priorities:

- Increase Dementia Diagnosis Rates (DDR)
- Integrated Community Dementia Pathway via Neighbourhood/locality teams
- Dementia Awareness & Support

NHSE

- Ambition DDR 67%
- 6 week referral to treatment by 2020
- Improved post diagnostic support
- Reduced inequalities
- Increased Advanced Care Plans (ACP)
- Proactive case finding
- NICE 2018

Dementia Strategy and Programme 2019–2024

- 5 Core outcomes:
- Prevent well
 - Diagnose Well
 - Supporting Well
 - Living Well
 - Dying Well

Secondary Drivers

Increase DDR

- Pro-active case finding
- Improve coding in primary care (Data Quality Toolkit 2017)
- Harmonisation of GP register and specialist mental health
- DiADeM and DeAR GP Tools

Care Homes

- Collaborative approach to support Care Homes

Neighbourhood Locality Teams

- Place based approach
- Integrated community team

Communication and Engagement

- Shared vision and Campaigns
- **Education and Workforce Development**
Education Strategy to build dementia friendly practice across pathway delivery including Advanced Care Planning and End of Life care

DDR

- DDR Recovery Plan
- IST findings/action plan
- Referral**
- MAS pathway review to improve patient flow
- Steps to diagnosis
- Diagnosis of dementia (care homes)

Learning Disability (LD)

- Increase awareness & inclusion of LD in dementia services
- Align with LD strategy

Mild cognitive Impairment (MCI)

- Pathway in collaboration with WMSCN
- Pilot (locality)

Shared Care protocol to support medicines prescribing

Joint delivery plan across all partners

Workforce Development

Align with Frailty (ICOPE)

Dementia friendly Community

- Dementia Action Alliance
- Dementia Partnership
- Community resilience and capacity; Meeting Centre; Singing for The Brain, Dementia Cafés, Carers Support, Dementia Voices, young on-set
- Dementia Friends
- Dementia Connect and WISH
- IST Work Programme

5. Local context and background



Page 62

The Sustainability and Transformation Partnership (STP) in H&W is a partnership committed to improving health and social care to enable us to plan and be responsive to the needs of the whole population. This includes a dementia work stream to deliver the Well Pathway for Dementia



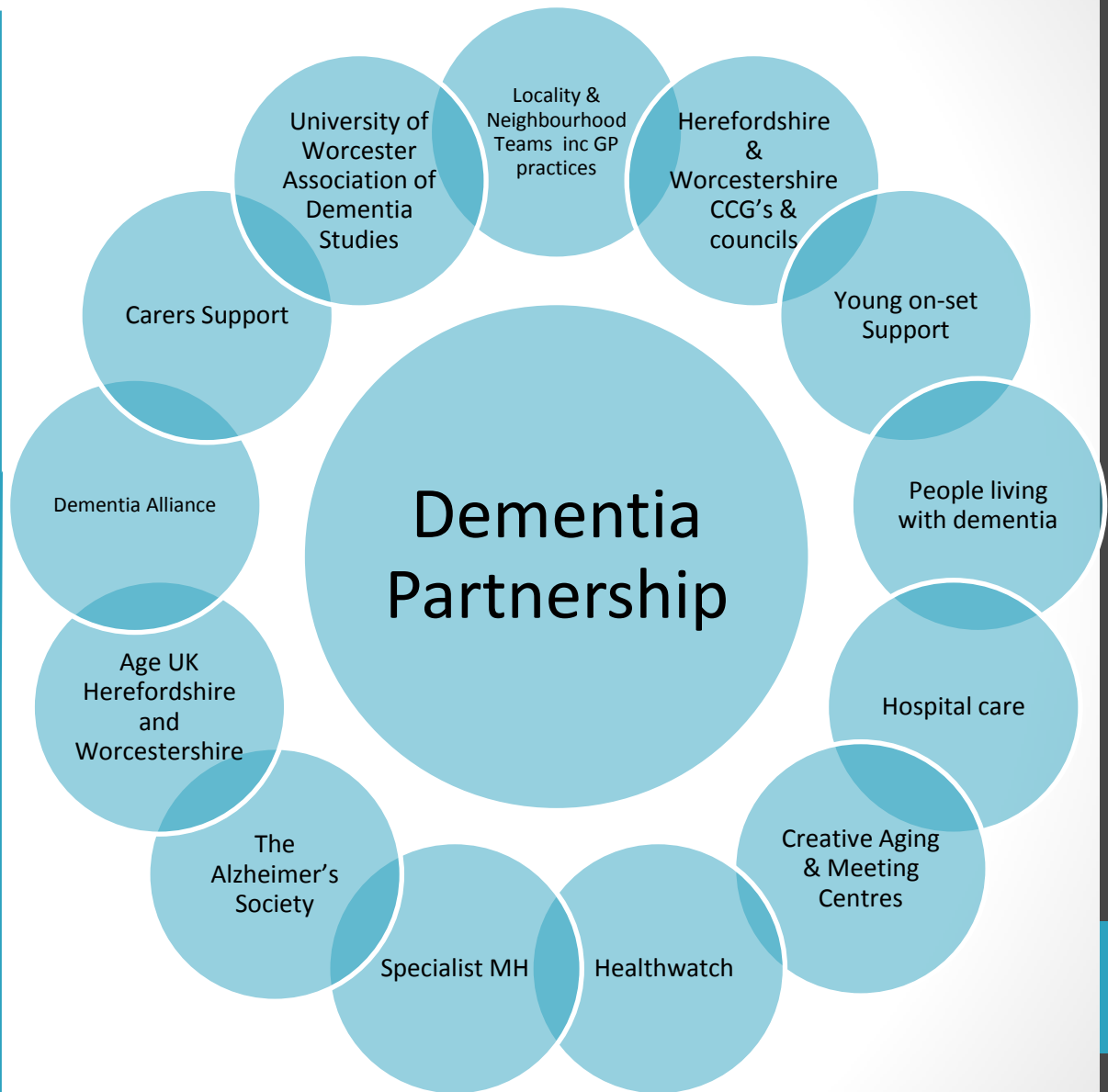
Local Dementia Delivery Plans reflect the key findings and recommendations of a dementia review undertaken by NHSE Intensive Support Team 2017
A further review was undertaken Oct 2018



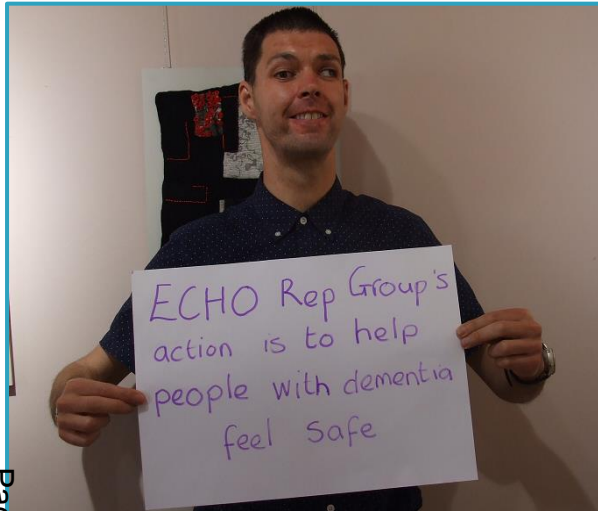
5. Local context and background

Each county has a Dementia Partnership Programme Board overseeing the development of a refreshed strategy and high-level delivery plan. The multi-agency partnership works to ensure that interdependencies are identified including but not limited to:

- Integrated locality Neighbourhood teams
- Carers Support
- Primary care
- Community and voluntary organisations
- Secondary Care
- Urgent and emergency care
- Planned care
- Mental health
- Prevention
- Medicines Management
- Learning disabilities
- End of life
- Continuing health care and personal budgets
- Information and support- WISH, ART



5. Local context and background



Page 64



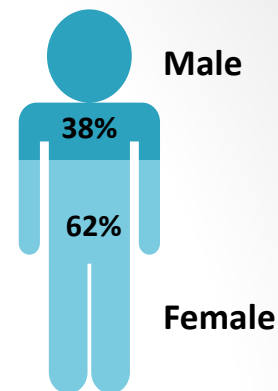
“Having contact with the Dementia Adviser Service has helped me to continue to be part of my community by enabling me to participate in the Focus on Dementia Network” (a local service user).

Local picture

There are currently 12,456 people living with dementia across Herefordshire and Worcestershire (this number is set to increase to 18,669 by 2035).
592 of these people have early onset dementia.

Across H&W 62% of people with dementia are female and 38% are male. This reflects the national trend.

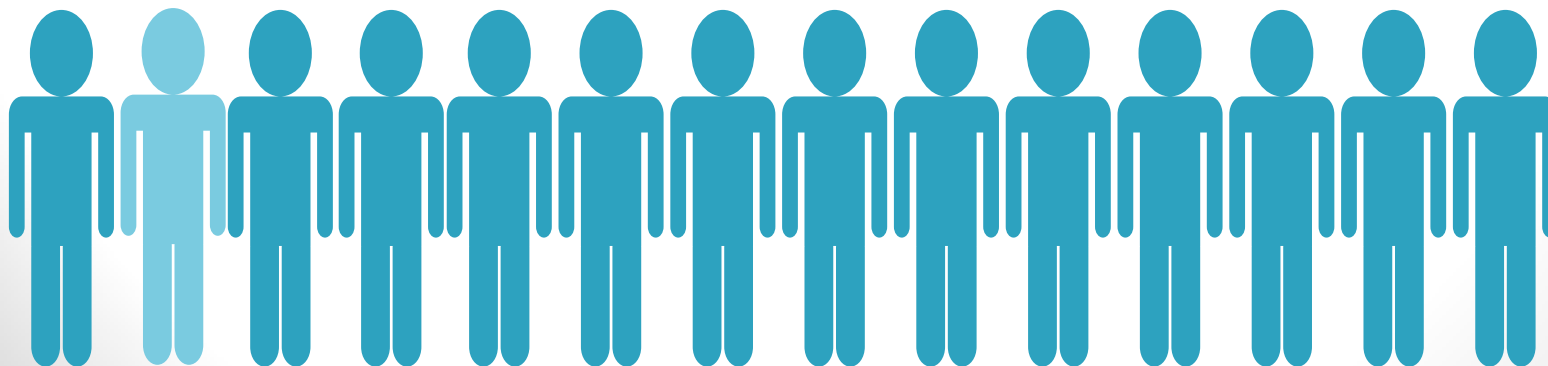
Gender



Page 65

1 in every 15 of the population of H&W over 65 years has dementia, reflective of the national trend

It is estimated that there are 84985 carers across H&W.
For further information relating to carers, see the draft H&W Carers Strategy.



Local picture

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 for at least two thirds of people with dementia to be diagnosed (67%). The national prevalence of dementia is 1.3% of the entire UK population equating to approximately 850,000 individuals.

Local NHS Diagnosis Rates

Herefordshire

57.05%

South Worcs CCG

56.7%

Redditch & Bromsgrove CCG

64.4%

Wyre Forest CCG

59.6%

(Percentages represent the proportion of people living with dementia that have a formal diagnosis as of November 2018)

Herefordshire

- Total Population 187,878
- 3116 individuals thought to be living with dementia
- 2966 of these are 65 years or over
- 150 individuals living with Young Onset Dementia
- The total population of people aged 65 years or over is 46,102 which equates to 6.43%* of this cohort of the population living with dementia

Worcestershire

- Total Population 607,971
- 8,748 individuals thought to be living with dementia
- 8306 of these are 65 years or over
- 442 individuals living with Young Onset Dementia
- The total population of people aged 65 years or over is 127,811 which equates to 6.5%* of this cohort of the population living with dementia

Local picture - What people tell us

*The well-being and quality
of life for every person
with dementia to be
uppermost in the minds of
all health and social care
professionals*



Local picture

"Having support from a DA has reduced my anxiety and made me feel that I am not so dreadfully alone"

"memory clinic referral went smoothly along with appointment was an overview of what to expect .. experience was good, ongoing support excellent we have a remarkable CDN"

Person attending a Memory Morning Drop In
"It was a friendly setting where I was able to talk freely about my concerns without family members talking for me."

"Thank you so much for all the help you have given over the years. We would have been lost without you."



"As always your support and advice is very much appreciated. You are such a help for people like us as individuals, and for the community as a whole"

"People really like the meeting centre as it runs for a good amount of time. For one gentleman, it gave his wife (carer) a break and he wishes there was more things like it where he could go on other days of the week."

Person with LD and dementia
"I do like the signs and I want to put my photo on my bedroom door."

Family carer of person with LD
"There is a definite change where my learning disabled daughter lives. I observe the person who has learning disability and dementia now listening to music through headphones, and the environment is dementia friendly. The rugs and patterns are all gone; the carers have really embraced the learning. The impact on other people who have a learning disability who live there is that they are more relaxed. They have stopped telling her to be quiet."

Local picture

The things we still need to improve on

Dementia Adviser Service user -
"We find the amount of paperwork we receive from other services to be overwhelming – please continue to talk to us rather than give us paperwork ."

Lots of groups in the area but not much coordination between them, for example, everything seems to happen at the same time/day.



Carer - *"professionals need to understand dementia can make people intolerant of waiting; noisy places but few have taken this on board"*

"Dementia Friendly ongoing support is not really understood at surgeries ..."

"Hard to find affordable, short-term, ad hoc respite – mother is settled at home and it would be better if someone could come to the home even if it was just for a few hours." - Family member

A daughter of a lady with dementia who lives away has found it extremely difficult to find support services over the internet. She hasn't been in the area to come across things on noticeboards etc so has needed to just rely on the internet.

Dying Well

Living Well with Extra Care and Support

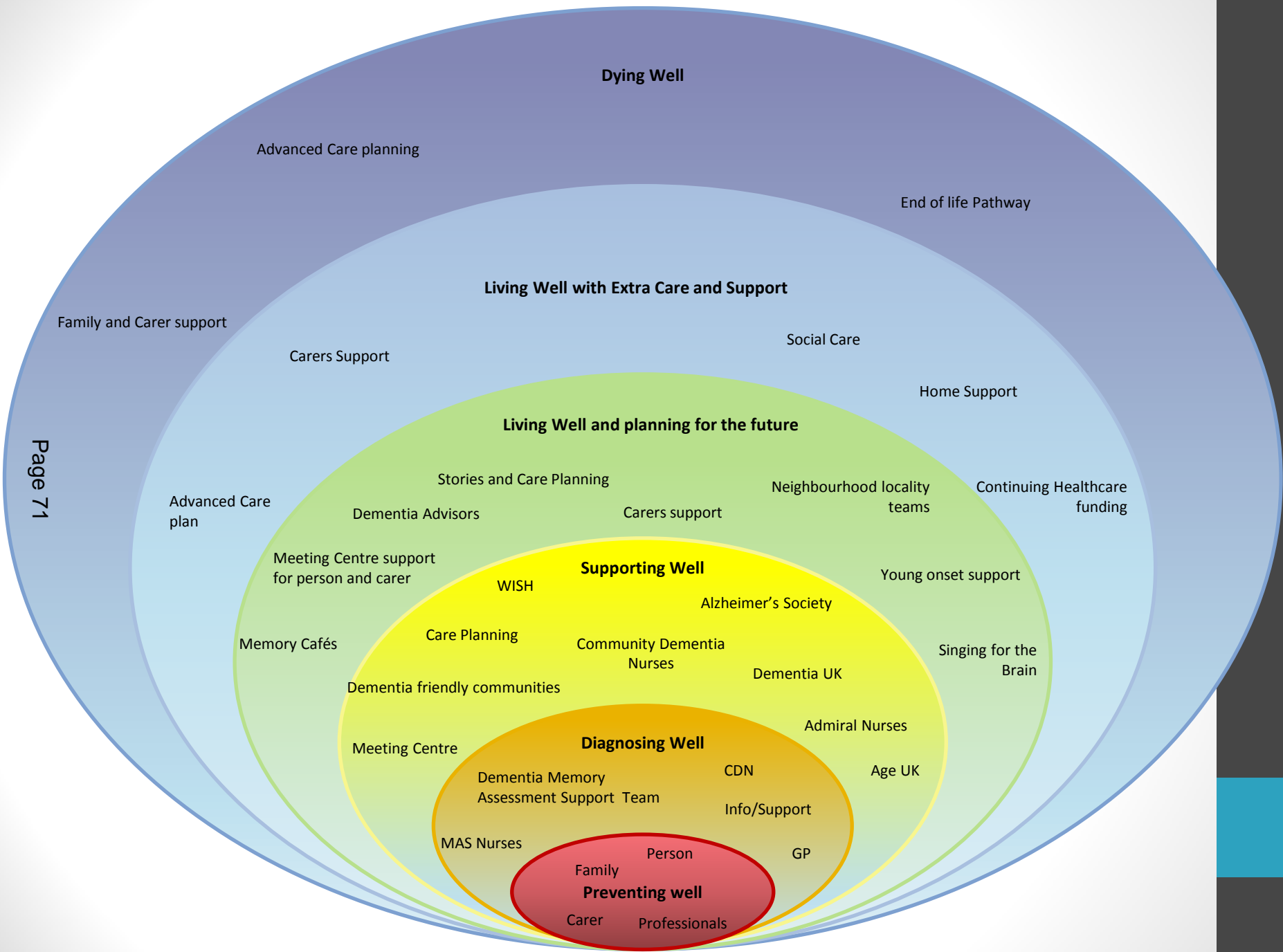
Living Well and planning for the future

Supporting Well

Diagnosing Well

Preventing well





7. Achievements of the previous Worcestershire Strategy 2009-2016

GP's have been supported to understand and promote key preventative messages as well as developing health checks and a dementia focused GP toolkit.

The memory pathway is well embedded across the area with good connections from primary care, an award winning memory clinic, post diagnostic support services through the voluntary and community sector and adult social care.

There has been a modernisation of the older adult mental health services to ensure that key objectives are met and to ensure that specialist services can complement the more generic development of health and social care services across the county. A new community and hospital based Dementia Pathway has been developed with a single point of access for people with dementia, carers and professionals

Worcestershire has a fully integrated personalised approach to dementia support, including an Admiral Nurses who have specialist dementia nursing expertise

Models of Peer Support have been developed to increase access to services.

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

Awareness raising has been undertaken by the Voluntary and Community Sector in the form of pop up road shows, GP training.

7. Achievements of the previous Worcestershire Strategy 2009 – 2016

Carers are supported through specific services, including advice, information, training and respite

Worcestershire has many Dementia Action Alliances and a number of dementia friendly practices.

The Johns Campaign has been adopted by all hospital trusts in all hospital settings

The Dementia CQUIN for assessment has been embedded in all hospital settings

A bespoke group has been set up specifically for people with Young Onset Dementia for PWD carers their family and professionals to meet

A Dementia training programme for Care Homes, Domiciliary Care and the wider community has been completed.

8. Achievements of the previous Herefordshire Strategy

Herefordshire Dementia Integrated Care Pathway promotes a person centred approach and is well embedded across the county with effective team working across GP practices, Memory Assessment Service and community dementia support offering post diagnostic support in collaboration with voluntary and community sector and adult social care.

Herefordshire continues to strive towards the 67% national target in relation to diagnosis rates with appropriate referrals being made to memory assessment services, underpinned by a shared care agreement

A review of our strategic approach helping to facilitate effective participation and involvement across programme board; partnership and alliances to maximise impact and productivity

There has been extensive work to improve clinical coding (DQT), data reconciliation across stakeholders within the pathway helping to improve communication and information sharing and ensure people have access to and receive timely diagnosis, information and support.

Expert voice of people living with dementia raising awareness of Living Well with dementia contributing to society and changing perceptions.

Auditing public services and spaces suggesting improvements which have been implemented Old Market, Cathedral.
Working on GP audit tools; participating in service improvement audits; staff development days & Co-facilitating dementia friends sessions

Carers are supported through specific services, including advice, information, training and respite care. Carers attend cafes and Singing for the Brain along with the person who has dementia. Dementia Advisors support the partnership of carer and cared for.

Significant Awareness raising has been undertaken via Dementia Partnership and Dementia Alliances and Dementia Friendly communities who work diligently to help build a dementia friendly Herefordshire. Herefordshire Dementia Action Alliance achieved Dementia Friendly Status in January 2017.

8. Achievements of the previous Herefordshire Strategy

Meeting Centre at Leominster and Ross on Wye offering a membership model where carers and people with dementia are enabled to be actively involved and included in their community

Partnership working has enabled the roll out and buy in to Dementia Friends at strategic level with people living with dementia actively involved in the delivery. There are over 5,000 dementia friends across the county helping to promote awareness and support communities and businesses to take actions towards a dementia friendly Herefordshire. A number of GP practices are already working to become dementia friendly practices

A partnership commitment to building awareness has led to a county wide communication network approach which continues to promote events; news; opportunities and strengthening links between WISH and Alzheimers Society Dementia Information and Support web pages

Listening to people living with dementia and their carers to understand their experiences of the health and social care system to inform future work. Engagement with rural communities and older people via Healtwatch continues to help inform our delivery plan

A bespoke support group has been set up specifically for people with Young Onset Dementia for people with dementia; carers; family and professionals to meet

Reaching into Under-participating groups: Learning disability and dementia a project led by Alzheimers Society has helped build awareness and understanding across stakeholders and actions to improve experience of people living with LD and dementia and their ability to live well for longer

Memory Mornings – reaching into rural communities where people worried about their memory can talk access support in a non-clinical setting.

Building resources and continuous shaping of support for people affected by dementia. Admiral nurses are a new resource for Autumn 2018. A Dementia training programme for Care Homes, Domiciliary Care and the wider community has been completed along with clinical updates for various professional groups of staff.

Launch of supportive assessment tools to support diagnosis (DiaDem) and care planning (ReSPECT) to ensure we establish early diagnosis and plan care more effectively in partnership with person and care/ family

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

To monitor achievements an annual dementia dashboard and highlights report will be produced for the Health and Wellbeing Board

The most important outcome of Herefordshire and Worcestershire Dementia Strategy is to ensure more people with dementia are able to live safely and with as good a quality of life as possible at home or in a homely setting for as long as they and their family wish.

To achieve this we have a key over-arching action to ensure there is good information, advice and support for people living with dementia and for their carers and families so that people are more confident that they can live well and independently with dementia and have access to appropriate support and services when required

Prevention	Diagnosis	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
x	x	x	x	x	Strengthen leadership and accountability for delivery of the strategy	LA/CCG and Partnership	Dementia partnership programme board includes clinical and executive level leadership and accountability	
Page 76	x	x	x	x	Undertake forward planning to ensure diagnosis and post-diagnostic support is designed to meet growth in dementia prevalence in over 65s and aligns with relevant strategies (Housing Frailty and EoL Strategy)	LA/CCG and Partnership	There is a regular programme of joint strategic needs assessment between LA and CCG commissioners which is communicated to all partners to inform local dementia service planning	
	x				Strengthen dementia risk reduction messages in NHS Health Checks and within public health & wellbeing opportunities /initiatives; schools and workplace	Public Health /LA/CCCG	Increased prevention opportunities offered to people at risk of developing dementia Raised dementia awareness leading to timely diagnosis Public Health take a lead role in the Dementia Partnership Programme Board	
	x	x	x		Improve referral pathway and partnership working between MAS and healthy lifestyles services to expand risk reduction opportunities offered to people diagnosed with dementia	Public Health/Memory Service/Community Dementia	Increased uptake of lifestyle services by people with dementia (especially vascular dementia) and people diagnosed with MCI Healthy Lifestyle services links and participation in drop-ins and post diagnosis support groups	
	x	x	x	x	Dementia and inequalities: Addressing equalities around accessing a dementia diagnosis and services is a key strand of our pathway work and fundamental to early diagnosis and support Work with partners to continue to ensure clearly signposted, robust culturally competent and locally informed services and post-diagnostic support pathways Promote opportunities to participate in research to people living with dementia and their carers throughout the entire dementia pathway	LA/Public Health/CCG & Dementia Partnership Dementia Programme Board	An engagement and empowerment approach adopted by all partners to reach and include BME, rural and unrepresented communities (LD, Farming and travellers) Increased awareness and understanding of signs and symptoms of dementia among all of our counties population groups Contracts with providers include a commitment to facilitate access to research opportunities People with dementia and their carers participate in national and local research opportunities Research Opportunities are discussed at Partnership meetings	

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

Prevention	Diagnosing	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
	x	x			<p><i>Find, treat and support:</i> further reduce the diagnosis gap by</p> <ul style="list-style-type: none"> Delivering a timely diagnosis in line with national ambition and patient wishes Promoting memory pathway and use of supportive diagnostic tools Ensuring care home residents with dementia are included on dementia registers and by working with professionals looking after patients with vascular related conditions to identify memory problems earlier 	<p>Dementia Partnership</p> <p>CCG/2g</p> <p>Admiral Nurses & CCG Quality Care Home Team</p>	<p>Dementia Diagnosis rates in H. and W. are in the top 20% performing CCG in England</p> <p>An established proactive case-finding culture across services and a referral pathway between MAS and Long-term condition services (diabetes, heart failure, Parkinson’s disease, MCI, stroke service, Learning Disability and expert patient programmes) is developed and implemented for seamless transition to dementia pathway.</p> <p>DeAR GP tool supports care home staff and enhances communication between care homes and GP practices</p> <p>DiaDem Tool supports community diagnosis</p> <p>Number of people with LD and LTCs diagnosed with dementia is comparable with national standards</p>	
			x	x	Strengthen links with carers support, frailty and End of Life work streams	Dementia partnership programme board	<p>Advanced Care Planning is embedded in all elements of the pathway and all partners are clear on their role and responsibility</p> <p>The provision of responsive services is comparable with those for people with terminal physical health conditions with hospice standard care</p> <p>Carers receive EoL and bereavement support</p>	
					Address local stigma and negative image of dementia which is creating fear and a sense of hopelessness within our aging population	LA/CCG and Partnership	<p>Communities are empowered to champion the benefits of early diagnosis</p> <p>Neighbourhood/Locality support is available for people who are reluctant to be assessed and receive diagnosis</p> <p>All partnership members are dementia friends</p> <p>Communication and engagement strategy established to achieve consistent language used to describe dementia</p> <p>Local Media are partners in Dementia communication and engagement delivery</p> <p>Patients and carers participate in promoting positive messages about living with dementia</p> <p>Herefordshire and Worcestershire are dementia friendly counties with local supportive communities</p>	
x	x	x	x	x	GP practice are supported to become a recognised dementia friendly practice	CCG	<p>Dementia Friendly GP practices established with a dementia champion identified at each surgery</p> <p>% sign up by ?</p> <p>% working towards Dementia friendly status</p>	

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

Prevention	Diagnosing	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
Page 78	x	x	x	x	Workforce Development to ensure a focus on high levels of expertise throughout the dementia pathway Increased training and support for informal carers to support them in their carer's role and to facilitate improved health and wellbeing for carers	STP One Herefordshire Education/Workforce Development Dementia Partnership Carers Support	Improved and increased education, training and opportunities for skills development for all (including informal carers) who are involved in the care and support for people affected by dementia. Training opportunities are available and aligned to the different stages of dementia progression Carers programme offering specific support for people caring for someone with dementia Assessment, management and support for people living with dementia and their carers is delivered in accordance with NICE Guidelines (NG97)	
	x	x	x	x	Maintain effective engagement processes with people living with dementia and their carers	Dementia Partnership Programme Board	There is an established model which partners follow to support patient and carer involvement and participation in pathway design and service improvement processes Patient and carer feedback is utilised to inform service improvement and enhance patient/carer experience Partners collaborate creating shared opportunities facilitating patient and carer involvement and participation	
			x	x	Expansion of memory drop-ins across the counties delivered collaboratively by dementia professionals and volunteers developed in partnership with people with dementia	Dementia Partnership and Specialist community dementia team (CDN/DA) Alzheimer's Society Admiral Nurses	Quality local peer support offered across both counties reaching into and tailored to rural and BME communities, meets the needs of people with dementia and their carers and where volunteers feel supported in undertaking their role. A network of facilitators to exchange good practice and share challenges are a mobile resource across localities and neighbourhoods Opportunities for dementia be-friending exists across our counties	

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

Prevention	Diagnosing	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
x	x	x	x	x	Continue to build and extend dementia friendly communities through the contribution of community and partnership working	<p>LA Education Dementia Partnership</p> <p>CCGs & Dementia Partnership</p> <p>All Providers</p> <p>Dementia Action Alliance</p>	<p>An established protocol to support organisations to become dementia friendly</p> <p>There is greater awareness and involvement by the community in local drop-ins</p> <p>A Dementia Friendly Housing Charter and guidance toolkit in place with all housing partners signed up</p> <p>Dementia friendly local environments (Hairdressers) to support people to remain connected to their local community</p> <p>Schools/Colleges are participating in dementia friends training and intergenerational Activities to promote dementia awareness and understanding</p> <p>A network of dementia friendly community pharmacists, podiatrist, dentists, opticians supporting people with dementia linking in with drop-ins to help with sign-posting and earlier recognition for diagnosis and support</p> <p>An increase in the number of organisations, businesses, Council departments and community groups signed up to the local Dementia Action Alliance working together to achieve dementia friendly status</p>	
x	x	x	x	x	Develop pro-active dementia support model within Locality and neighbourhood teams	<p>Locality /neighbourhood teams (GP clinical leads; clinical/care leads across partner organisations)</p>	<p>Locality and neighbourhood teams have received dementia friends training and have access to tools and approaches to be pro-active in providing care and support to people affected by dementia</p> <p>Increased use of contingency & ACP planning in care plans</p> <p>ReSPECT Tool implemented to guide ACP process across professionals and teams</p> <p>Shared care pathway</p> <p>Increased update and use of assistive technology</p>	

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

Prevention	Diagnosing	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
Page 80		x	x	x	Review and promote dementia information and support to ensure it includes prevention, diagnosis, living well, supporting well, and planning for end of life with appropriate signposting to local community support opportunities /groups Develop Information and advice resources to be made available for people attending peer support groups (e.g. drops-ins; Meeting Centres)	CCG, Memory Assessment and community dementia teams with Dementia Partnership	There is an established consistent approach to ensure everybody affected by dementia has timely access to information advice and support A road map signposts people to local dementia information, care and support MAS and Hospital and provider services use standardised information packs for people who are newly diagnosed and carers packs for their family/friends Standardised welcome/Information packs are also issued community support including cafes, drop ins and meeting centres	
			x	x	Continue to create responsive community services which promote re-ablement and effectively manage crises for people affected with dementia either at home or in a care home	Locality Teams In-reach team; CCG quality nursing team; Admiral palliative care team	Neighbourhood and Locality teams have access to <ul style="list-style-type: none"> Hospital avoidance service (out-reach support) Specialist advice and support when managing a crisis Good Quality flexible home care services available to help dementia patients maintain independence and reduce social isolation A network of support for care homes facilitates advanced dementia care planning including palliative care and End of Life care	
	x	x	x	x	Work collaboratively to achieve a co-ordinated pathway across partners	LA/CCG and Partnership	Patients and carers are partners in care planning Partners collaborate to achieve a seamless pathway which promotes and respects patient and carer choice and control	
					Improve provision of residential care for people living with advanced or complex dementia	LA/CCG	People living with advanced or complex dementia have access to a range of local care options	
					Ensure carer support is tailored to their needs	LA/CCG and Partnership	Carers participate in contingency and ACP planning (ReSPECT) Respite care is available when needed to support carers in their carer role Carers have access to information, advice and support to assist them in their caring role, enabling them to look after their own health and wellbeing	

9. H&W Dementia Strategy Delivery Plan 2019 – 2024

Prevention	Diagnosing	Supporting	Living	Dying	High Level Actions	Lead	Outcomes	Timeframe
x	x	x	x	x	Continue to improve standard of data recording and completeness across dementia diagnosis and care pathways	Health and social care partners	There is evidence of <ul style="list-style-type: none"> Robust data recording and reporting across partner organisations A rolling programme of data harmonisation and peer reviews in place across all pathways 	
Page 81	x	x	x		Review local Pathways to include Mild Cognitive Impairment	CCG and providers/Memory Assessment Services Community Dementia Service	A recognised and fully supported pathway in place to Identify, code and review MCI patients	
	x	x	x	x	Continue to focus on improving the in-patient experience and hospital discharge pathways	LA/CCG and Partnership	Hospital wards and departments are dementia friendly environments Dementia Champions are identified and work collaboratively to increase dementia awareness Patient experience questionnaires confirm patient choice and control is respected	
	x	x	x		Develop the post diagnostic pathway to include the provision of and access to appropriate IAPT services for people living with dementia , those with a non-dementia diagnosis (MCI) and their carers	CCG/Specialist MH provider	IAPT opportunities are routinely offered, where appropriate to people living with dementia and those with MCI and their carers IAPT workforce and services are trained and skilled to provide interventions which support people with dementia and MCI and their carers	

10. Useful websites

Context

NHS England Well Pathway for Dementia: [england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/03/dementia-well-pathway.pdf](https://www.england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/03/dementia-well-pathway.pdf)

Further information about the different types of dementia: [nhs.uk/conditions/dementia-guide/Pages/dementia-choices.aspx](https://www.nhs.uk/conditions/dementia-guide/Pages/dementia-choices.aspx) and [alzheimers.org.uk/info/20007/types_of_dementia](https://www.alzheimers.org.uk/info/20007/types_of_dementia)

Prime Ministers Challenge on Dementia: [gov.uk/government/publications/prime-ministers-challenge-on-dementia-2020](https://www.gov.uk/government/publications/prime-ministers-challenge-on-dementia-2020)

Living Well with Dementia: [gov.uk/government/uploads/system/uploads/attachment_data/file/168221/dh_094052.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/168221/dh_094052.pdf)

Dementia 2015 – Aiming Higher to Transform Lives (report by the Alzheimer’s Society): [alzheimers.org.uk/info/20093/reports/253/dementia_2015](https://www.alzheimers.org.uk/info/20093/reports/253/dementia_2015)

NHS Outcomes Framework & Adult Social Care Outcomes Framework

<https://www.england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/03/dementia-well-pathway.pdf>

<https://www.gov.uk/government/publications/adult-social-care-outcomes-framework-handbook-of-definitions>

Fix Dementia Care 2016: <https://www.alzheimers.org.uk/our-campaigns/fix-dementia-care>

NHS Digital Patients Registered at GP Practice (as of 1st November 2018): <https://digital.nhs.uk/data-and-information/publications/statistical/patients-registered-at-a-gp-practice/november-2018>

Application of prevalence rates from Dementia UK 2014 Update: <https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-uk-report>

A guide to the support people should get from local services in England if they or someone they know have been diagnosed with dementia <https://www.gov.uk/government/publications/after-a-diagnosis-of-dementia-what-to-expect-from-health-and-care-services>

Legislation

Care Act 2014: <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

Equality Act 2010: <https://www.gov.uk/guidance/equality-act-2010-guidance>

Local Policy

Herefordshire Council Health and Wellbeing Strategy 2015-2019:

https://www.herefordshire.gov.uk/download/downloads/id/3677/health_and_wellbeing_strategy.pdf

Worcestershire County Council Health and Wellbeing Strategy 2016-2021

<http://worcestershire.moderngov.co.uk/documents/s8318/Health%20and%20Well-being%20Strategy.pdf>

Herefordshire Carers Strategy: https://www.herefordshire.gov.uk/directory_record/3416/carers_strategy

Worcestershire Carers Strategy:

<http://worcestershire.moderngov.co.uk/documents/s5437/6b%20Carers%20Strategy%20Draft%20Final%20DRAFT%2030%204%202015.pdf>

10. Useful websites

Local Policy

Herefordshire Housing Strategy:

https://www.herefordshire.gov.uk/download/downloads/id/8436/interim_housing_strategy_2016-2020.pdf

https://www.herefordshire.gov.uk/directory_record/4808/homelessness_review_and_prevention_strategy

Herefordshire Learning Disability Strategy: <http://councillors.herefordshire.gov.uk/ieDecisionDetails.aspx?ID=5164>

Herefordshire JSNA: <https://factsandfigures.herefordshire.gov.uk/understanding-herefordshire>

Worcestershire JSNA: http://www.worcestershire.gov.uk/info/20122/joint_strategic_needs_assessment

This page is intentionally left blank

HEALTH AND WELL-BEING BOARD
26 FEBRUARY 2019**Children and Young People's Strategic Partnership Update**

Board Sponsor

Catherine Driscoll/Frances Howie

Author

Sarah Wilkins

Priorities

Mental health & well-being

(Please click below
then on down arrow)

Yes

Being Active

Yes

Reducing harm from Alcohol

Yes

Other (specify below)

Outcomes for children and young people across Worcestershire

Safeguarding

Impact on Safeguarding Children

No

If yes please give details

Impact on Safeguarding Adults

No

If yes please give details

Item for Decision, Consideration or Information

Information and assurance

Recommendation

1. **The Health and Well-being Board is**
 - a) **asked to note for information the update from the first two meetings of the newly formed Children & Young People's Strategic Partnership**
 - b) **The Health and Well-being Board receives a full bi-annual report from the Strategic Partnership including its activities and progress against the dashboard going forward.**

Background

2. The Children and Young People's Strategic Partnership (CYP SP) has been established to develop and help implement Worcestershire's Children and Young People's Plan (CYPP), and further support and underpin the all age Joint Health and Wellbeing Strategy.
3. The partnership is a sub-group of Worcestershire's Health and Wellbeing Board (see Appendix 1) and has been tasked to bring together senior/strategic leaders from agencies and organisations to take a whole-system response to improving outcomes

for children and young people. The Partnership will have the required oversight of the Troubled Families Programme, SEND and Education Strategies and our approach to Prevention and Early Intervention. The Partnership will focus on the 11 priorities outlined in the Children and Young People's Plan (CYPP). The Partnership will act to provide the local oversight and governance as the children and young people's workstream of the NHS Sustainability & Transformation Plan (STP). The intention is this workstream will also reflect the priorities for the NHS Long Term Plan going forward for children and young people.

4. The Partnership met for the first time on 19th October 2018 and the first of four meetings scheduled for 2019 took place on 6th February. Future meeting dates are as follows:

Friday 3 May 2019
Friday 13 September 2019
Friday 8 November 2019

5. Representation has included the local authority, Heart of Worcestershire College, Hereford & Worcester Fire & Rescue Service, West Mercia Police and the Deputy Police & Crime Commissioner, Worcestershire Health & Care Trust, District Councils, Voluntary & Community Sector, schools and a councillor who chairs a local Children's Trust. The draft terms of reference for the group are attached in Appendix 2.

6. Listed below are the key agenda items and updates from the meetings:

- a) **Children and Young People's Plan** – the new interactive [CYPP Dashboard](#) was shared at the last meeting. The dashboard consists of nationally validated data which is live and inputted daily. It includes the priorities from the CYPP and agreed key performance indicators (KPIs). Strategic groups have been identified against each indicator to take ownership of improving performance and outcomes
- b) **Troubled Families Programme** – a self-assessment of service transformation and data maturity for the programme has been completed and the delivery plan was submitted to MHCLG in December 2018. An update was given at the first meeting and a further update on performance and progress is scheduled for the May meeting. Children Families and Communities Leadership Team (CFCLT) has monthly oversight of the programme through highlight reports which include a performance dashboard
- c) **SEND Strategy & Improvement Plan** – following the SEND inspection in 2018, there is now a Written Action Plan in place with a programme of five outcomes:
 - Local Offer
 - Graduated Response
 - Assessment & Planning
 - Joint Commissioning & Leadership
 - Workforce Engagement

A key challenge is engaging the participation of parents, carers and children in the design of services for 12,000 children currently in a "category" of SEND

in Worcestershire. It was agreed for the CYP SP to have oversight of the SEND Strategy & Improvement Plan so updates will be provided to the Partnership at future meetings

- d) **Prevention and Early Intervention** – a refresh of the Early Help Needs Assessment (EHNA), completed three years ago, has been undertaken as part of the Joint Strategic Needs Assessment. It will inform the commissioning of 0-19 Prevention & Early Intervention services this year as well as wider strategic and commissioning activity. The outcomes in the EHNA are linked to the KPIs from the CYPP. Funding has been awarded by DWP to undertake a series of partnership events and deliver a series of training modules addressing parental conflict. The newly formed Early Help Partnership met for the first time in January. The Partnership is a sub-group of the CYP SP and has been established to ensure a whole system approach to prevention, early intervention and early help
- e) **Mental Health & Emotional Wellbeing Transformation Plan** – it was agreed the partnership would have strategic oversight of the following priorities set out in the plan:
- Increase the number of children and young people receiving help for emotional wellbeing and mental health needs
 - Reduce waiting times for mental health and emotional wellbeing services
 - Monitoring impact and effectiveness of services
 - Enable schools and colleges to meet their responsibility to support emotional wellbeing and mental health in children and young people
 - Improve emotional wellbeing and mental health knowledge and skills of the children's workforce
 - Preventing inappropriate hospital admissions & facilitating effective discharge from hospital including operation of urgent care pathway
 - Children and young people and other stakeholders are involved in the planning, design and review of services
- f) **Sustainability & Transformation Partnership** – the CYP SP has agreed to be the strategic governance forum for the Worcestershire children's workstream of the Herefordshire and Worcestershire STP. The STP has delegated this to the CYP SP in each county. Many of the key areas of work for the STP are reflected in the recently published NHS Long Term Plan. The priorities in the plan emphasis a stronger start in life for children and young people through:
- Maternity and neonatal services
 - Children and Young People's Mental Health services
 - Learning disabilities and autism
 - Children and young people with cancer
 - Redesigning other health services for children and young people

Contact Points

County Council Contact Points

County Council: 01905 763763

Worcestershire Hub: 01905 765765

Specific Contact Points for this report

Name, Sarah Wilkins

Tel: : 01905 846082

Email: swilkins@worcestershire.gov.uk

Liz Altay

Tel: 01905 846503

Email: laltay@worcestershire.gov.uk

Supporting Information

- Appendix - Terms of Reference

Children and Young People's Strategic Partnership

Terms of Reference 2018

Subject to Annual Review

Draft October 2018

1. Purpose

The Children and Young People's Strategic Partnership has been established to develop and help implement Worcestershire's Children and Young People's Plan (CYPP), and further support and underpin the all age Joint Health and Wellbeing Strategy.

The partnership is a sub-group of Worcestershire's Health and Wellbeing Board and has been tasked to bring together senior/strategic leaders from agencies and organisations to take a whole-system response to improving outcomes for children and young people. The Partnership will have specific oversight required of the Troubled Families Programme, SEND Strategy and our approach to Prevention and Early Intervention.

2. Scope

The scope of The Partnership is defined by section 10 of the Children Act. *The local authority is under a duty to make arrangements to promote cooperation between itself and organisations and agencies to improve the wellbeing of local children. This co-operation should exist and be effective at all levels of an organisation, from strategic level through to operational delivery¹.*

The approach of The Partnership is the added value that can be achieved not through monitoring business as usual activity but through developing effective partnership working and the efficiency of how partners work together as a *whole system*. Partnership members are *systems' leaders*, collectively accountable for the impact of the system as a whole and not just for the individual priorities of their own organisations.

The Partnership has agreed to focus on 11 priorities outlined in the CYPP:

1. Help children live in safe and supportive families and communities
2. Promote safe, healthy and positive relationships
3. Support children to have the best start in life and be ready for learning
4. Provide access to a quality and appropriate education/learning experience for all
5. Prepare young people for adult life

¹ Working Together to Safeguard Children, A guide to inter-agency working to safeguard and promote the welfare of children (July 2018)

6. Improve outcomes for our most vulnerable children and young people
7. Increase young people's voice in community life, participation and engagement in developing services
8. Increase access to safe and affordable activities and places to go outside of school
9. Increase physical activity and healthy eating
10. Improve social, emotional mental health & wellbeing outcomes
11. Support young people, parents and carers to overcome the barriers to sustained employment

3. Principles and Responsibilities

The Partnership will operate in accordance with the following principles, keeping children, young people and families at the heart of everything we do:

- Creating a health promoting environment
- Encouraging and enabling people to take responsibility for themselves their families and their communities
- Providing clear information and advice
- Commissioning prevention services (based on evidence of effectiveness and within funding available)
- Ensuring services are targeted to the people who would benefit the most

4. Membership

Membership of the Strategic Partnership Board will represent those agencies or organisations which have significant strategic influence over the wellbeing of children, young people and families. These are:

Name	Role	Organisation
Catherine Driscoll	Director of Children, Families & Communities	WCC
Frances Howie	Director of Public Health	WCC
Avril Wilson	Director of Adult Services	WCC
Sarah Wilkins	Interim Assistant Director of Early Help & Commissioning	WCC
Liz Altay	Public Health Consultant	WCC
Nick Wilson	Assistant Director, Education & Skills	WCC



Worcestershire Children
At the heart of everything we do

Judith Willis	Head of Community Services	Redditch & Bromsgrove Borough & District Councils
Lloyd Griffiths	Managing Director	Worcester City Council
Ian Miller	CEO	Wyre Forest
Fran Oborski	Chair – Children's Trust	Wyre Forest
Stephen Gabriel	Joint Head of Housing and Communities	Malvern & Wychavon
Susan Harris	Director of Partnerships	Worcestershire Health and Care Trust
Lucy Noon Mari Gay	Director of Corporate Affairs Chief Operating Officer R&B CCG	Worcestershire CCGs
Sarah Smith	Director of Strategy	Worcestershire Acute Trust
Nathan Travis	Chief Fire Officer	Herefordshire and Worcestershire Fire and Rescue Authority
Kevin Purcell	Chief Superintendent	West Mercia Police
Keith Barham	Head of Service	West Mercia Youth Offending
Ann Williams	Senior Employer & Partnership Lead	Department of Work and Pensions
Stephen Cox	Headteacher, Middle Schools	Aston Fields Middle School
	Primary/First Schools	
Deb Rattley	Headteacher, Special Schools	Chadsgrove Special School & Sports College
Julia Breakwell	Assistant Principal Information Systems and Student Experience	Heart of Worcestershire College
Michael Hunter	Chair of Worcestershire Voices	Voluntary Community Sector
Judy Chadwick	Skills & Investment Group Manager	Local Enterprise Partnership
Tracey Onslow	Deputy Police & Crime Commissioner	West Mercia PCC
Geoff Taylor-Smith	Chair	Redditch Community Wellbeing Group
John Godwin	Chair	Bromsgrove Community Wellbeing Theme Group

Board members should be at Director or equivalent level and have the authority, remit and resource to act as a systems leader. They should be able to speak, make decisions and where appropriate commit resources to the work of the Partnership, on behalf of their organisation/sector.

The Partnership should make arrangements to maintain links with other relevant bodies and organisations not specifically represented on the Board but who still have a significant role to play in the children's/families' agenda such as the wider community and voluntary sector, provider organisations and adult services.

The Partnership will be chaired initially by the Director of Public Health, A Vice-Chair will be appointed from amongst the Board membership.

Expectations of Board members:

- Represent and speak on behalf of their agency, while also, through their Board membership, accepting a dual collective responsibility for the whole of the children's system
- Actively commit to championing the role of the Board and delivering its collective responsibilities; this should be evidenced within their own organisations and when attending other partnership meetings
- Appropriately communicating Board discussions / decisions throughout their own organisations
- Members representing a number of agencies (for example in the case of district, borough and city councils and CCGs) should establish suitable feedback, consultation and communication arrangements with component organisations, ensuring concerns are raised and addressed
- Proactively support the work of the Partnership and be prepared to either lead or support agreed activity/action
- Attend meetings unless non-attendance is unavoidable, in which case a substitute should be nominated who has sufficient authority and understanding to make an active contribution to the meeting
- Agree in advance with the Chair, additional attendees at meetings beyond the agreed membership

- Advise the Partnership in advance of any proposed or likely changes to their provision of services, their ability to fulfil their remits or functions, or of any identified risks, to enable a collective discussion about potential impact
- Commit to provide information that is requested and agreed to be provided, including that needed to enable the Board to collate and analyse data to inform the performance framework

Any instances of a Board member not complying with these expectations will be raised by the Chair with their agency at the highest level

5. The Plan

The Children and Young People's Strategic Plan ('The Plan') is a multi-agency plan agreed by the members of the Children and Young People's Strategic Partnership. It sets out the outcomes and a set of priorities, how these will be achieved and the intended difference these will make to children and young people. The Plan has been informed by an extensive process of engagement and consultation not only with children and young people but also parents and carers and those who work with and for children and young people. It will continue to be informed by performance information and local intelligence about key issues of concern on a county and locality basis.

The plan is a document, periodically updated and supported by key identified action plans, which focus on activity that needs to be undertaken at a strategic level and locality level. An aligned performance management framework will be used to monitor progress and the impact.

6. Funding

The delivery of the Children and Young People's Plan at county or locality level will be through member agencies using, aligning or combining existing resources or through seeking additional funding through, for example, social finance or grants. It is expected that all agencies will make contribution in kind to the Partnership, including enabling their staff the time to attend and support meetings and to contribute to the activity required to implement the Plan.

7. Sub-Groups

The Board does not have a standing sub-group structure, it may however establish sub-groups or task and finish groups as deemed necessary for the delivery of the Plan, any group established should have a 'named sponsor' on the Board.

8. Frequency of meetings

Meetings will be held four times per year. Dates of meetings will be set a year in advance.

9. Administration of meetings

Agendas and supporting documents will be issued electronically at least one week before the meeting. All member agencies should proactively contribute to setting the agenda. Minutes will be produced and circulated within two weeks of the meeting. Worcestershire County Council will provide administrative support for the Board.

10. Accountability

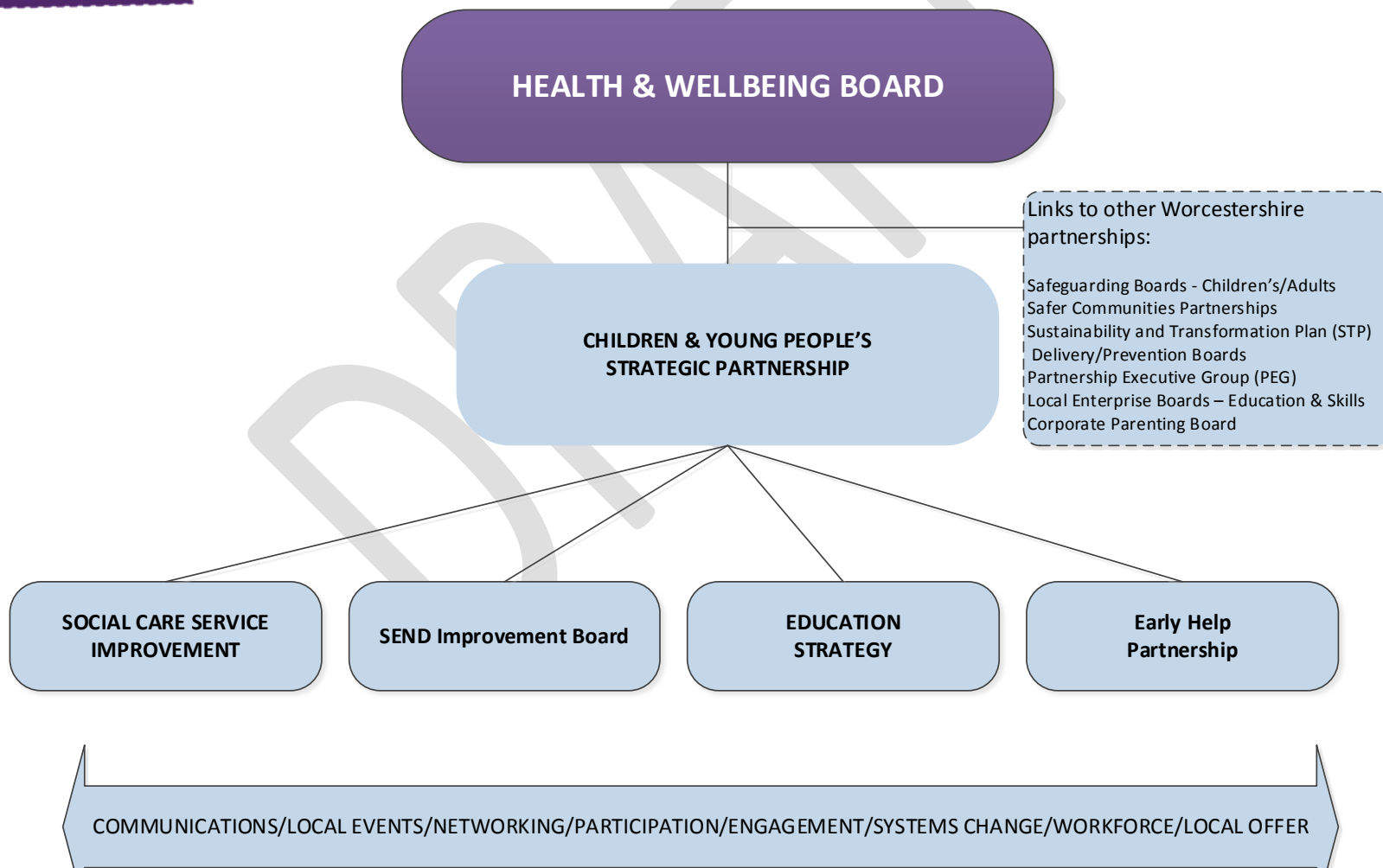
The Children and Young People's Strategic Partnership will be accountable to the Health and Wellbeing Board with reporting frequency to be determined by the Health and Wellbeing Board.

The Partnership is not directly accountable to any other partnerships, but appropriate alignment will be sought with the plans and strategies of other relevant partnerships. This will occur through the Partnership establishing an effective influencing and advisory role in relation to other partnerships; through it taking into account other strategic frameworks and plans when setting its own Plan; and through the Partnership consulting with these other partnerships when establishing its Plan and on other relevant matters.

The Partnership does not have any powers to direct member agencies or other organisations however, member agencies of the Children and Young People's Strategic Partnership Board will be accountable to the Health & Wellbeing Board for acting in accordance with the agreed principles and responsibilities, including for delivering the Children and Young People's Plan. The Chair of the Partnership will raise at a senior level any concerns the Partnership has about actions of members or other organisations which are not effectively contributing to the wellbeing of children and young people.



Children & Young People’s Plan and Troubled Families Governance Model



This page is intentionally left blank