



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.

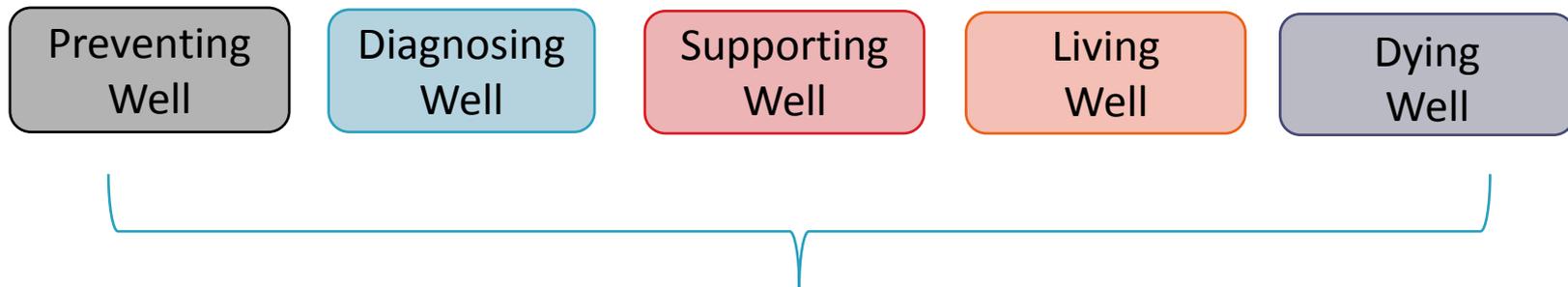
There is clear evidence that the earlier into the disease that dementia is diagnosed the better the outcomes for those with the illness and their informal carers, it will help with decision making and preparing the individual and their family for choices they will need to make in the future.

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

3. Vision, guiding principles and aim

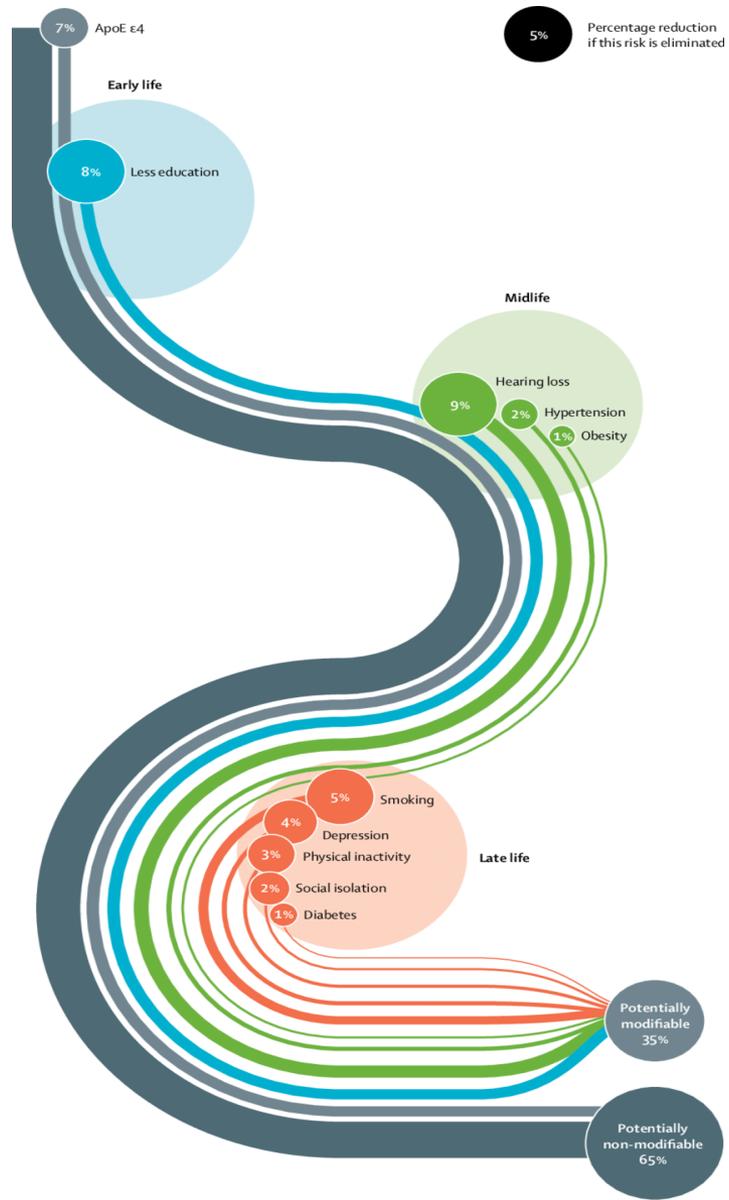
This strategy has been guided by principles developed by NHS England in their transformation framework. This 'Well Pathway for Dementia' is based on NICE guidelines, the Organisation for Economic Co-operation and Development framework for Dementia and the Dementia I-statements from The National Dementia Declaration.

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



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.

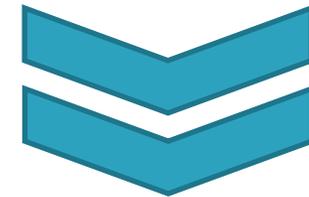
The priorities identified within this are:

- 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

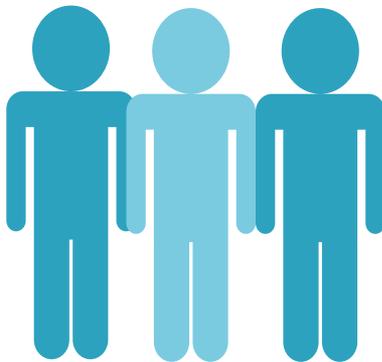
National picture

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%.

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

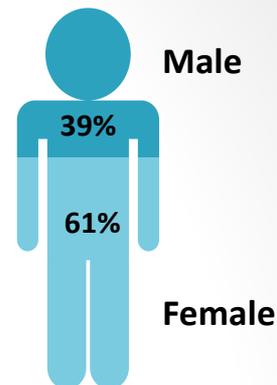
It is estimated that 1 in 3 people in the UK will care for someone with dementia in their lifetime



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.

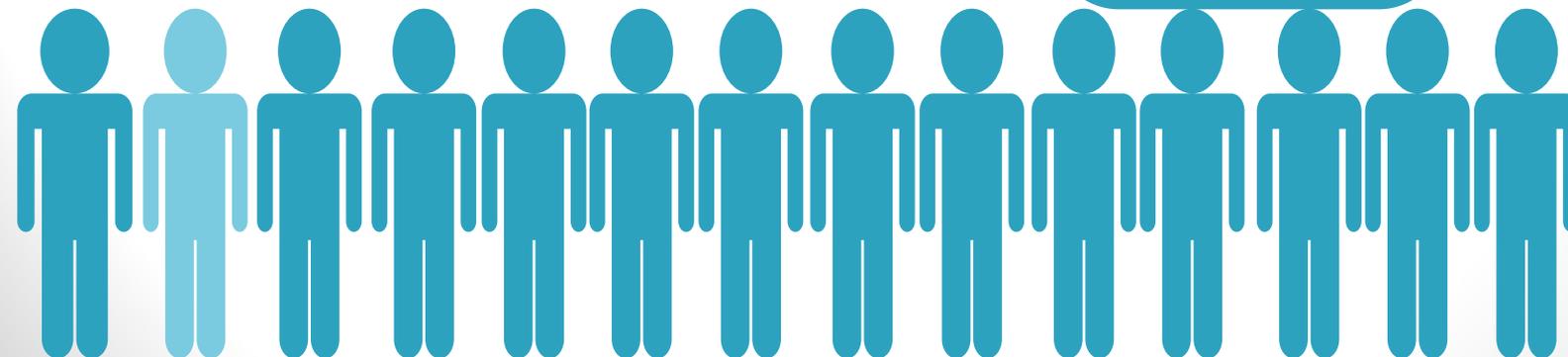
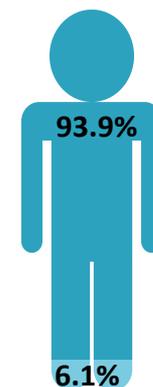
In the UK 61% of people with dementia are female and 39% are male. There are a higher proportion of women with dementia as women tend to live longer, however, this does reverse when considering the data for people with early-onset dementia.

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



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

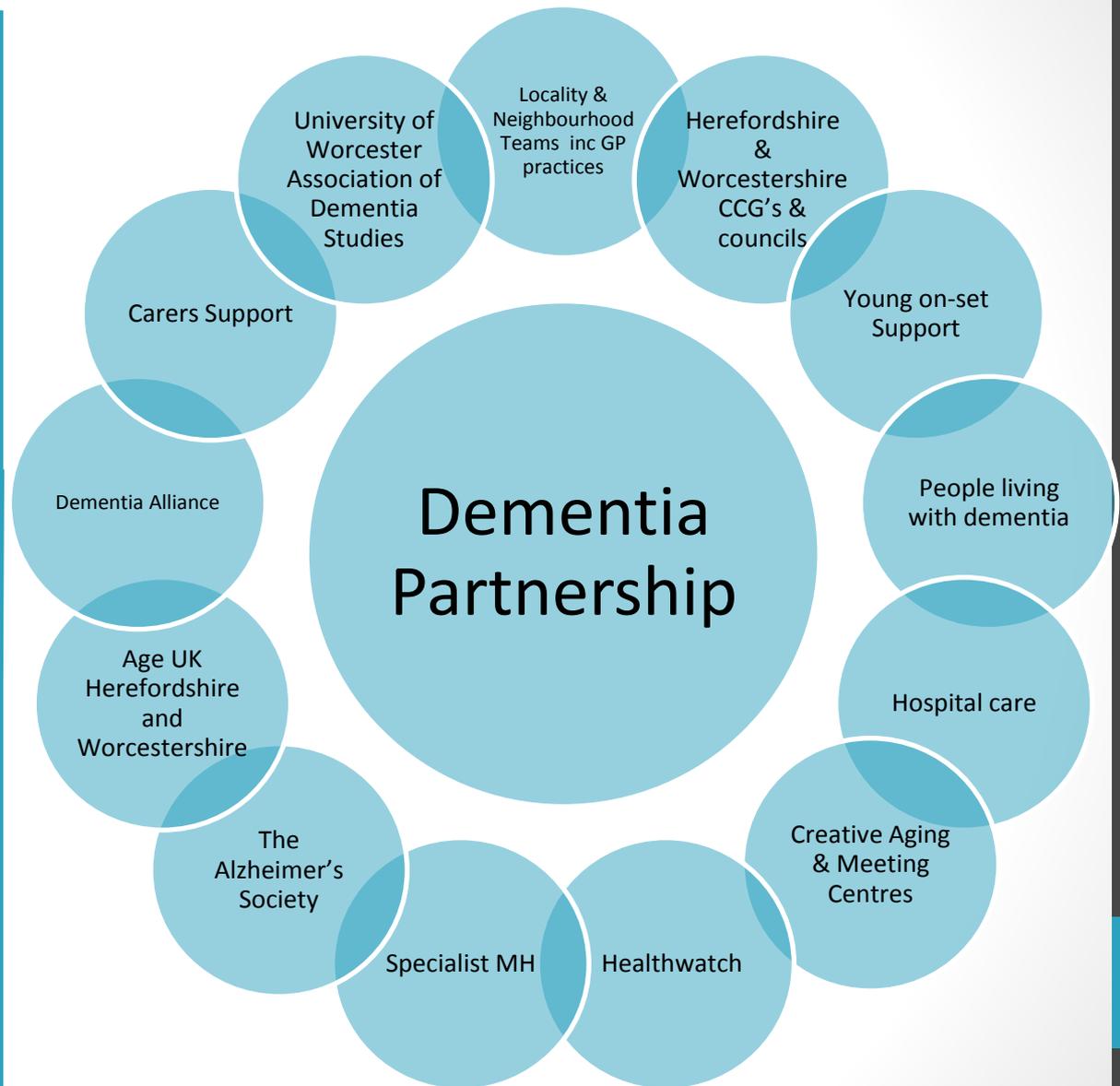


Local Dementia Delivery Plans reflect the key findings and recommendations of a dementia review undertaken by NHSE Intensive Support Team 2017
A further review was undertaken Oct 2018

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



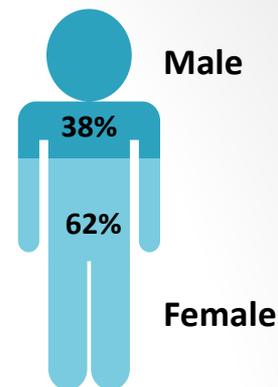
“Having contact with the Dementia Adviser Service has helped me to continue to be part of my community by enabling me to participate in the Focus on Dementia Network” (a local service user).

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.

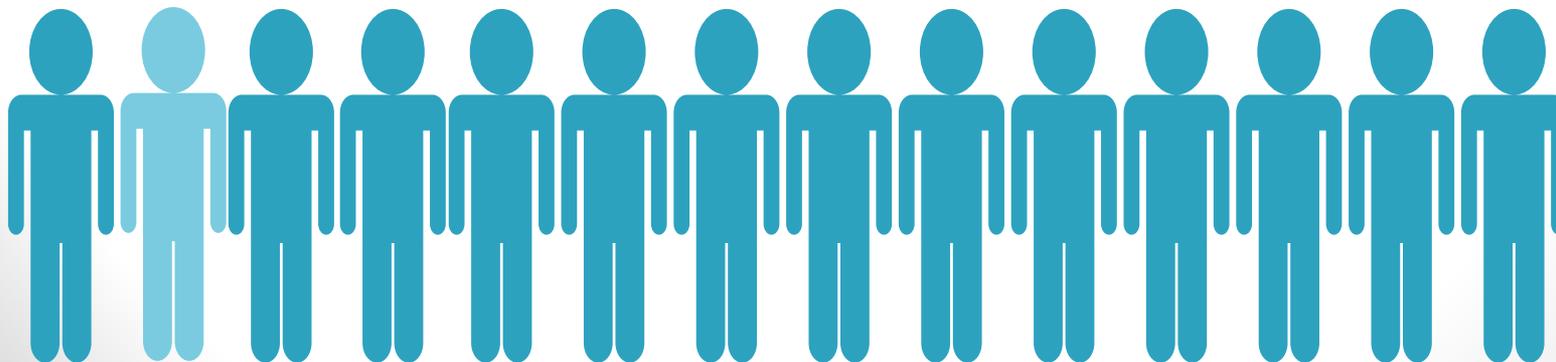
Across H&W 62% of people with dementia are female and 38% are male. This reflects the national trend.

Gender



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 84,985 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

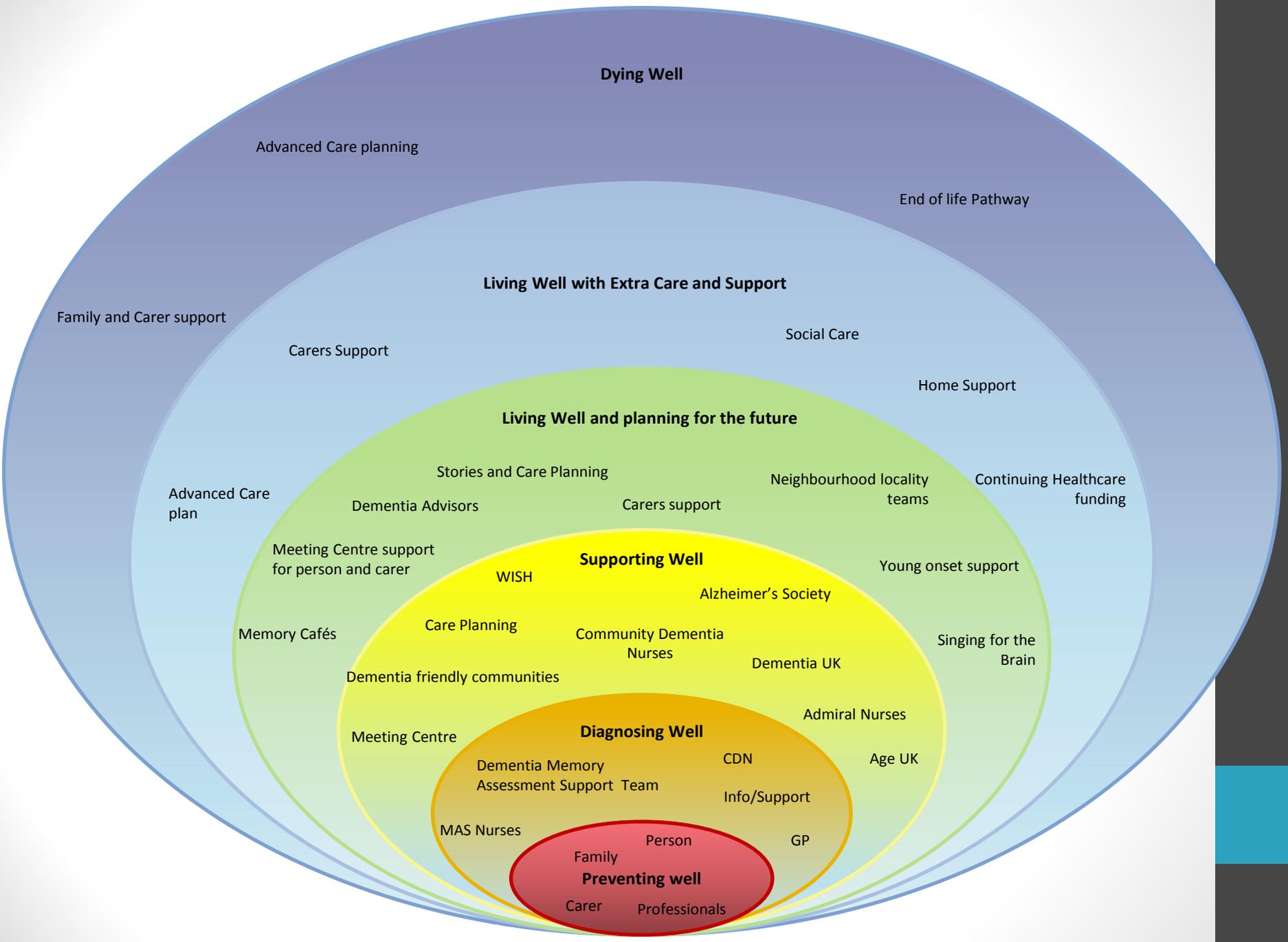
Living Well and planning for the future

Supporting Well

Diagnosing Well

Preventing well





Dying Well

Advanced Care planning

End of life Pathway

Living Well with Extra Care and Support

Family and Carer support

Carers Support

Social Care

Home Support

Living Well and planning for the future

Advanced Care plan

Stories and Care Planning

Neighbourhood locality teams

Continuing Healthcare funding

Dementia Advisors

Carers support

Meeting Centre support for person and carer

WISH

Young onset support

Supporting Well

Alzheimer's Society

Memory Cafés

Care Planning

Community Dementia Nurses

Dementia UK

Singing for the Brain

Dementia friendly communities

Meeting Centre

Diagnosing Well

Admiral Nurses

Dementia Memory Assessment Support Team

CDN

Age UK

Info/Support

MAS Nurses

Family

Person

GP

Preventing well

Carer

Professionals

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	
	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	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	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
	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	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
		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	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 	
x	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