

REPORT TO: Health and Wellbeing Board

Date of Meeting: 30 April 2013

Report of: Head of Health Improvement

Subject/Title: Mapping the Dementia Gap 2012

1.0 Report Summary

- 1.1 The Alzheimer's Society recently published 'Mapping the Dementia Gap 2012: Progress on improving Diagnosis of Dementia 2011-2012' (Appendix One). The report shows that within the area of the Central and Eastern Cheshire PCT, there has been a 0.6% increase in diagnosis with 44.7% people with Dementia now diagnosed. However it also appears to show that the improvement in the rate of diagnosis is far lower than elsewhere, placing us at 160th out of 178 (where 1 is most improved). The Health and Wellbeing Strategy identifies the improvement of co-ordinated care for people with dementia as one of the priorities. It is estimated that in Cheshire East there will be an increase of 78% in the numbers of over 65s with dementia by 2030.

2.0 Decision Requested

- 2.1 That the Health and Wellbeing Board consider the report and agree that the Dementia Steering Group take on the work required by the Board, overseen by the Joint Commissioning Leadership Team.

3.0 Reasons for Recommendations

- 3.1 To ensure that the Health and Wellbeing Board focuses upon the priorities contained within the Health and Wellbeing Strategy and has in place a mechanism for delivering outcomes on the ground.

4.0 Policy Implications - Health

- 4.1 In March 2012 the Prime Minister published his challenge on dementia, setting out an ambitious programme of work to push further and faster in delivering major improvements in dementia care and research by 2015. Central to the challenge is the requirement that from April 2013, there needs to be a quantified ambition for diagnosis rates across the country, underpinned by robust and affordable local plans.
- 4.2 The national dementia diagnosis rate will be published annually through the NHS Information Centre and is contained within domain two of the NHS Outcomes Framework. A new national Dementia Prevalence Calculator and associated resource pack have recently been produced to help CCGs to estimate local prevalence, set local trajectories for improving rates of diagnosis and work with local stakeholders to design and implement action plans to

deliver improvement both in rates of diagnosis, and the experience of people seeking help with memory problems.

- 4.3 Diagnosis rate data for 2011-2012 shows that in England, up to 54% of people with dementia did not have a formal diagnosis, presenting a 'diagnosis gap', and diagnosis rates by PCT ranged from 32.49% to 67.10%. The need to improve recognition and diagnosis is not contested but there is debate as to the meaningfulness of the data and what 'good' looks like for the person with memory problems, for the GP, memory assessment services and commissioners.

5.0 Financial Implications

- 5.1 There are no direct financial implications in relation to this report.

6.0 Legal Implications

- 6.1 The Health and Wellbeing Board has been established in line with the regulations published as Statutory Instrument 2013 No. 218 entitled The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

7.0 Risk Management

- 7.1 The Health and Wellbeing Board will become live from 1st April 2013. The Board's risk log will be used to ensure that risks are identified and mitigated against.

8.0 Reviewing Dementia Commissioning

- 8.1 A review of the 2010 – 2013 Joint Commissioning Plan is now underway with the two CCGs and CEC engaged through the Dementia Steering Group. The review group are looking at both the Workplan and the Strategy to inform the refreshed 2013 – 2015 Strategy.
- 8.2 In addition the Council's Adult Overview and Scrutiny Committee's Task and Finish Group looking at Dementia has recently published its report. This is also being considered by the Steering Group.
- 8.3 Both Clinical Commissioning Groups have identified dementia as a priority for action within their Commissioning Intentions.
- 8.4 It will be for the Steering Group to determine the most effective way of delivering across the system improvements that will help to achieve an improved diagnosis rate.

9.0 Access to Information

The background papers relating to this report can be inspected by contacting the report writer:

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