CHESHIRE EAST COUNCIL

Dementia Commissioning Plan 2014-2015

1. Introduction

This is Cheshire East Council's commissioning plan for dementia. It is a working document that will be updated annually to reflect progress and provide for continuous improvement of all our support. The priorities identified are based on our current understanding of customer needs and gaps but this understanding is work in progress; hence annual updates will refine this.

Its aims are to:

- Map the current picture of needs, available support and gaps in support
- Consider customer insights and feedback and ensure they are driving improvement in support
- Enable the identification of priority areas of joint commissioning with health, public health, children's services, housing and others
- Use this analysis to clarify and prioritise the commissioning plan to improve support and address gaps

2. Scope

Support to people living with dementia and their family and carers across the whole system. This plan seeks to ensure that all levels of support from communities, businesses, council services, other public sector and specialist support from health and social care are designed to provide a coherent whole system response to this challenge.

3. Key Strategic Outcomes

- Enable people to live well and for longer (Council Outcome 5)
- Enable people to live at home and as independently as possible this is what people say they want
- Enable people to fully contribute to and be supported in strong and supportive communities – (Council Outcome 1)
- Enable people to access information, advice, early help and prevention so that they can avoid dependency

 Enable carers of people to live well and be supported to fulfil their caring roles

4. Specific Commissioning Intentions

Whilst all current support seeks to achieve the strategic outcomes above the analysis in this strategy indicates where commissioning plans are needed to improve on achieving these. Those areas are in summary:

 Provide support that informs, advises and encourages self-help and selfmanagement to maintain healthy independence.

For example: information and advice. Having a range of information easily available helps people to stay independent, customers tell us this needs to improve.

 Stimulate and enable a range of early help and prevention activity and informal support that prevents the need for more specialist social care support and improves outcomes.

For example: Community group support to provide stimulating recreational activities using volunteers.

 Greatly increase the choices of support available for social care need so that it can be tailored to particular needs and individual's preferences – personalising support.

For example: By developing a wide and diverse range of choices in support across geographical locations individuals can choose their preferences. This is particularly important for the rural communities in Cheshire East to ensure that people can continue to live well where they prefer.

 All people should access the same opportunities to enjoy social/recreational activities in the community as others; strong and supportive communities enable this.

For example: a wide range of community activities that people can enjoy as individuals, for daytime and social activity. This improves outcomes by helping people to choose how they prefer to meet their needs, not fit to a service that excludes them from the community. This area requires joint working with the Council's communities, housing and leisure functions and with the voluntary, community and business sectors. Customers tell us that some day activities offered now are not appropriate for them and that more opportunities in the community need to be available.

 Further develop support that helps people to gain or regain the capacity to live well independently.

For example: specialist reablement support for people living with dementia.

- Redesign assessment and care management processes and systems to ensure customers receive a timely, effective, outcome- focused service.
- Develop the range and coherence of the health, social care and community support for people living with dementia and their family/carers.

For example: Better information for carers about what to expect at diagnosis so that both the carer and the person living with Dementia can accept their diagnosis and plan for their future. When good information is not provided early this leads to greater anxiety and opportunities to mitigate the consequences for both the person living with dementia and family/carers are lost.

• Increase the range of respite care choices available to ensure that family/carers can have periodic respite from their caring roles that meets their particular needs and preferences.

For example: choices for respite for carers that are non-residential. The predominant type of respite currently is residential and is focused on a small number of locations. A much wider choice can be provided by developing this market so that carers can select their preference. Other choices are needed to include nonresidential options so that the cared for person does not need to be moved from their home environment.

5. Service Mapping and Need

Dementia is a national issue of major and growing significance. There are 800,000 people living with dementia in the UK and this is set to rise to one million by 2021. Cheshire East has an estimated 5402 residents aged 65+ living with dementia, and it is predicted that this will reach 6710 by 2020. Supporting those individuals currently with dementia in Cheshire East are 4500 carers.

The predicted increase in dementia is already emerging but as yet is not fully understood locally as diagnosis levels appear lower than comparators. The local Dementia Commissioning Plan Strategy is being further developed and with customers central to that work. This then needs to be used to continue to influence commissioning priorities. There are already some key things that customers want us to do better and these are informing this commissioning strategy.

The commissioning intentions driving this area are:

- Further develop support that helps people to gain or regain the capacity to live well independently.
- Develop the range and coherence of the health, social care and community support for people living with dementia and their family/carers.

6. What we will do in 2014/15:

Implement a commissioning delivery plan for 14/15 – as below

Monitor the impact of support and continue to develop intelligence to inform future plans

The Dementia Commissioning Delivery Plan 2014/15

This first year plan will continue to be developed during the year and the outcomes of this year's activity and building intelligence on need will influence the future year delivery plans.

The key elements in the Dementia Commissioning Plan are to:

a) Ensure the Council as a whole is the leading example to all in its commitment to dementia support

The Council has developed a number of innovative responses to dementia; one example is the dementia friendly library at Nantwich. To build on these positives the Council is developing the next stage action plan for all service areas to ensure all Council functions support Dementia aims. The Council has pledged to join the Alzheimer's Society campaign for 'Dementia Friends' as part of this.

- b) Encourage as many organisations and businesses as possible across Cheshire East to become 'Dementia Friends'.
- c) A Council run launch event on 13 June 2014 at Tatton Park, sponsored by the Leader of the Council, brought together over 100 organisations, such as banks and supermarkets, to make pledges to become Dementia Friends. These pledges will be followed up in September 2015 to hold organisations to account for the pledges they made. The Council is providing some short term funding support for a coordinator role to help these organisations to make their pledges a reality.

d) Continue to build on the strong independent sector market for care homes and domiciliary support that responds effectively to the needs of people living with dementia.

This market is critical to providing choice across all areas of Cheshire East and as the need for this support grows it is essential that the market is managed/expanded to meet that need.

e) Develop a new pilot "Dementia Reablement Service".

This builds on the existing best practice in the Mental Health Reablement Service and the Older People Reablement Service. It will provide specialist intervention to seek to improve the outcomes of those living with dementia and their families and carers.

- f) Work with CCG partners to ensure that:
 - o Individuals with symptoms are diagnosed in a timely and accurate way.
 - Individuals, their carers/families have information and support to enable them to help them make choices appropriate to their needs.
 - Individuals, their carers/families are supported and provided with information about local travel schemes to enable them to access services.
 - All public facing health and social care staff will receive appropriate dementia training to support individuals, carers/families.
 - Individuals have access to treatment and support to enable them to have a sustained and improved quality of life.
- g) Pilot an increased role for dementia advisers.

These advisers work with individuals in the community to enable effective selfhelp to maintain life in the community.

h) Provide stimulation to the voluntary sector and local community activities for those living with dementia and their families and carers.

Adult Social Care have recently commissioned a number of dementia support services in the voluntary sector. These were launched at an event on 23 June 2014 to promote awareness.

- i) Increase the range of respite care choices available to ensure that families/carers can have periodic respite from their caring roles that meets their particular needs and preferences.
- j) Redesign assessment and care management processes and systems to ensure family/carers receive a timely, effective, outcome-focused service.
- k) Continue to work with all other areas, such as Communities, Public Health, Leisure and Libraries to ensure they further develop their approaches to meet the dementia challenge.

There is more action to be planned for future years to ensure all resources are making an effective contribution to this agenda.