

*Although a formal committee of the city council, the Health & Wellbeing Board has a remit which includes matters relating to the Clinical Commissioning Group (CCG), the Local Safeguarding Board for Children and Health Watch. Papers come from a variety of sources. The format for Health & Wellbeing Board papers is consequently different from papers submitted to the city council for exclusive city council business.*

## **1. Formal details of the paper**

Brighton & Hove Dementia Plan  
2014-2017

### 1.2 Who can see this paper?

Information included in this paper can be seen by the general public.

### 1.3 Date of Health & Wellbeing Board meeting

October 14<sup>th</sup> 2014

### 1.4 Author/s of the Paper and contact details:

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## **2. Decisions, recommendations and any options**

### 2.1 That the Health & Well Being Board endorse the Dementia Plan and its broad and integrated approach as set out below

- 2.2 That the Health & Well Being Board notes the resources available from the Better Care fund and authorises the Dementia Implementation Group to prioritise spending on the Plan.
- 2.3 That the Health & Well Being Board agrees the process of monitoring the progress of the Dementia Plan

### 3. Relevant information

- 3.1 In May 2014, a Brighton & Hove Joint Strategic Needs Assessment (JSNA) on Dementia was completed to assess current and future provision and needs, assets and gaps in relation to dementia care, enabling the development of a local delivery plan to meet these needs.  
<http://www.bhconnected.org.uk/sites/bhconnected/files/JSNA%20dementia%202014.pdf>
- 3.2 Key findings were that the city has some pockets of excellent dementia services, but they are not always joined up and there are some gaps. Key recommendations include the need for better/more:
- Earlier intervention
  - Joined up services that support patient centred care
  - Carers support
  - Support to local community services
  - Training and education
- 3.3.1 The Dementia Plan has been produced in response to the recommendations of the JSNA and builds on the Dementia plan 2012-2015. It is overseen by the Dementia Steering Group and has been arrived at through a detailed and broad process of consultation and engagement.
- 3.3.2 This Joint Strategic Delivery Plan aims to treat dementia as a 'long-term condition', aligning dementia services with physical health services so a holistic approach is taken to the care of people with dementia. It is designed to improve care and outcomes for people with dementia and their carers.
- 3.3.3 Brighton & Hove's strategic approach to dementia is about providing better care and support in the community to enable people to stay in their own homes to preventing avoidable hospital admissions and reduce the number of people going to residential

care and make better use of our overall resources. Care and support for people with dementia will be firmly embedded into the frailty model being developed for the City as part of Better Care.

- 3.3.4 As numbers of people with dementia increase a key part of the approach to improving dementia care will be to skill up the generalist workforce (i.e. staff in care home, general hospital and primary care). This will enable people with dementia and their carers feel valued and supported and have their rights upheld
- 3.3.5 There is increasing momentum to make all local services dementia friendly. Services that are dementia friendly are 'friendly' for the wider community.
- 3.3.6 The Better Care fund is in place and understands the importance of supporting people with dementia and their carers. It recognises the need to resource projects as outlined in the Dementia Plan. The actual spend on each project area is not yet determined as some services and their relationship to other areas need to be better understood, pathways redesigned etc.
- 3.3.7 Better Care is able to fund the Dementia Plan up to £250K. The Dementia Implementation Group will oversee each project and be responsible for allocating resources up to the initial allocation of £250k appropriately. The Dementia Implementation Group will also monitor the on-going delivery of services.
- 3.3.8 The Dementia Plan is a 3 year framework and gives a detailed timeframe for the first year. The plan will be refreshed after the first year and a more detailed timeframe for years 2 and 3 will be provided at that review. This is to allow the plan to be further aligned with other key programmes
- 3.3.9 Further reports on the progress on Dementia Plan will be made to the Health and Wellbeing Board on a regular basis.

## **4. Important considerations and implications**

### **4.1 Legal**

The Health and Wellbeing Board has delegated responsibility for managing the Better Care Fund Budget and ensuring that Delivery Plans are integrated and accurately reflect the outcomes goals set out in the JHWS.

Elizabeth Culbert  
Deputy Head of Law

4.2 Finance

The Better Care Fund for 2015/16 agreed by HWBB includes an allocation of £250k for the Dementia Delivery Plan. The 2014/15 Better Care Fund allocation includes additional investment of £40k to support increasing dementia diagnosis. Progress against the Better Care Fund and plan will be regularly monitored.

Finance Officer consulted: Anne Silley Date 01/10/14

4.3 Equalities

An Equalities Impact Assessment has been started and it will inform the on-going development of the Dementia Delivery Plan. Officer consulted: Clair Hopkins Communities Equalities and Third Sector 20<sup>th</sup> August 2015

4.4 Sustainability

The council's One Planet Council approach to sustainability based on ten One Planet principles was used as a checklist and will be discussed at the Dementia Implementation group in October 2015.

4.5 Health, social care, children's services and public health

The Draft Dementia Delivery Plan was discussed in the September meeting of the CCG's Clinical Strategy group. The final version will be endorsed at the next meeting on 14<sup>th</sup> October 2014.

Dementia is a key national priority for the Department of Health. Key policy documents include NICE guidance and policy standards, a National Dementia Strategy (2009) and the Prime Minister's Challenge on Dementia (2012). This Dementia Delivery Plan will help the city to improve dementia services across the three key areas of awareness, earlier diagnosis and intervention, and higher quality of care as well as support people and their carers to live well with dementia.

## 5 Supporting documents and information

### Brighton & Hove Dementia Plan - 2014-2017

|                                                    |                                                                                                                                                                                                                                                                                                                                   |
|----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Version:</b>                                    | 21                                                                                                                                                                                                                                                                                                                                |
| <b>Summary statement:</b>                          | <p>The Dementia Plan is the updated dementia plan for the City, building on the previous plan 2012-2015 as well as a summary of actions following the recommendation of the 2014 joint strategic needs assessment for Dementia.</p> <p>It is designed to improve care and outcomes for people with dementia and their carers.</p> |
| <b>Staff/stakeholders involved in development:</b> | Dementia Implementation Steering Group                                                                                                                                                                                                                                                                                            |
| <b>Name of author:</b>                             | Joint Commissioning Manager- Dementia– Brighton & Hove CCG & Brighton and Hove City Council                                                                                                                                                                                                                                       |
| <b>Name of responsible committee/individual:</b>   | Health & Wellbeing Board                                                                                                                                                                                                                                                                                                          |
| <b>Date Approved</b>                               |                                                                                                                                                                                                                                                                                                                                   |
| <b>Review date:</b>                                | Annually report to HWB annually and final review October 2017                                                                                                                                                                                                                                                                     |
| <b>Target audience:</b>                            | Citywide                                                                                                                                                                                                                                                                                                                          |
| <b>Accessibility</b>                               | Printed and electronic                                                                                                                                                                                                                                                                                                            |

## Key

|       |                                             |       |                                                                 |
|-------|---------------------------------------------|-------|-----------------------------------------------------------------|
| JSNA  | Joint Strategic Needs Assessment            | TOR   | Terms of Reference                                              |
| HWB   | Health & Wellbeing Board                    | ASC   | Adult Social Care                                               |
| BHCC  | Brighton & Hove City Council                | PEACE | Proactive Elderly persons Advisory CarE                         |
| QOF   | Quality Outcomes Framework                  | FACS  | Fair Access to Care Services                                    |
| MAS   | Memory Assessment Service                   | PBR   | Payment by Results                                              |
| CrISP | The Carer Information and Support Programme | LES   | Local Enhanced Service (now Locally Commissioned Service – LCS) |
| MDT   | Multi-disciplinary Team                     | LD    | Learning Disability                                             |
| BSUH  | Brighton & Sussex University Hospitals      | EOL   | End Of Life                                                     |

## Introduction

- 1) Dementia is a syndrome that can be caused by a number of progressive disorders. It affects memory, thinking, behaviour and the ability to perform everyday tasks. Alzheimer's disease is the most common type of dementia. Others include vascular dementia, dementia with Lewy bodies and front temporal dementia.<sup>1</sup> It mainly affects older people. One in 14 people over 65 years and one in six over 80 years in the UK have a form of dementia. It is estimated people live on average 7-12 years after diagnosis.
- 2) Dementia is an important issue because it affects a large proportion of people and the numbers are increasing as the population is ageing. It places pressure on all aspects of the health and social care system: An estimated 25% of hospital beds are occupied by people with dementia, who have longer lengths of stay, and more readmissions. Approximately two-thirds of care home residents are estimated to have dementia and one in three people will care for someone with dementia in their lifetime.<sup>1</sup>
- 3) Dementia not only has a profound impact on those people who develop it, but also can have profound effects on family members who often provide the majority of care. Family carers are often old and frail themselves and have high levels of carer burden, depression and physical illness, and decreased quality of life. Contrary to social misconception, there is a very great deal that can be done to support people with dementia. Services need to be responsive so that dementia is diagnosed early and well and so that people with dementia

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<sup>1</sup> Department of Health. Dementia. A state of the nation report on dementia care and support in England. November 2013.

and their family carers can receive the treatment, care and support following diagnosis that will enable them to live as well as possible with dementia.

- 4) Nationally, there is increasing focus on dementia as an issue, including prevention, treatment, and demand for services and creating dementia friendly communities. The National Dementia Strategy was published in 2009 and the Prime Minister launched his Dementia Challenge in 2012.
- 5) Dementia costs society an estimated £19 billion a year.<sup>2</sup> Due to its unique population profile with a higher proportion of people aged 16-64 years and a lower proportion of 65 years and over (13%) compared to 17% in the South East and 16% in England, dementia needs are not on the same level as other parts of the country. However, a predicted 24% increase in 70-74 year olds and 48% increase in the 90 plus age group by 2021 will put increasing demands on services. This will be particularly felt in the parts of the city where the older population is concentrated i.e. Rottingdean Coastal, Woodingdean, Hangleton & Knoll, Hove Park and Patcham wards.
- 6) Brighton and Hove had a Joint Dementia Plan which for 2012/15 that set out the Brighton and Hove strategic vision for improving care and support to people with dementia and their carers. The central aim of the plan was to increase awareness of the condition, ensuring early diagnosis and intervention as well as improving the quality of care for people with dementia and their carers. Key progress that has been made includes:
  - the implementation of a new memory assessment service in June 2013 which has helped increase our memory diagnosis rate from 44.4% in 12/13 to 67% in April 2015.
  - a successful capital funding partnership application, to the DoH for a million pounds to improve the environment of care for people with dementia that included primary care, acute, community services and residential care homes.
  - reconfiguring of mental health service to create a Living Well with Dementia Team.
  - expansion of Care Home In reach service, that provides support to care homes to improve their ability to care for and support their residents who have dementia commissioning the Alzheimer's Society to provide dementia cafes and singing for the brain and
  - Increasing the capacity in the Community Rapid Response Team to offer crisis and short term community support.

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<sup>2</sup> Prime Minister's challenge in dementia, based on Alzheimer's Society (2007), Dementia UK, Alzheimer's Society, London.

- Brighton Sussex University Hospital has implementing fully memory screen for anyone over the age of 75 who are admitted over 72 hours and has expanded the dementia champion's role. Opening the Emerald unit a specialist dementia ward within BSUH with support from the capital funding in May 2014.
- 7) In May 2014 a Brighton & Hove Joint Strategic Needs Assessment (JSNA) was completed to assess current and future provision and needs, assets and gaps in relation to dementia care, enabling the development of a local delivery plans to meet these needs. Key findings were that we have some pockets of excellent dementia services, but they are not always joined up and there are some gaps. Key recommendations include the need for more:
- Earlier intervention
  - Joined up services that support patient centred care
  - Carers support
  - Support to local community services
  - Training and education
- 8) This delivery plan has been produced in response to the recommendations of the JSNA and builds on the Dementia plan 2012-2015. This Joint Strategic Delivery Plan aims to treat dementia as a 'long-term condition', aligning dementia services with physical health services so a holistic approach is taken to the care of people with dementia.
- 9) Brighton & Hove's strategic approach to dementia is about, providing more care and support in the community to enable people to stay in their own homes to preventing avoidable hospital admissions and reduce the number of people going to residential care and make better use of our overall resources. Care and support for people with dementia will be firmly embedded into the frailty model being developed for the City as part of Better Care. The frailty model will be developed based on multidisciplinary primary care teams based around cluster of practices supported by 'hubs' of specialist care and information. A 'Dementia Hub Model' will be developed to support the multi-disciplinary teams. As part of the Better Care model the CCG and the council are testing out the frailty approach with five practices across two geographical clusters.



10) As numbers of people with dementia increase a key part of the approach to improving dementia care will be to skill up the generalist workforce (i.e. staff in care home, general hospital, and primary care). This will enable people with dementia and their carers feel valued and supported and have their rights upheld. It is key that local resources, services and communities recognise and respect individuals and their life stories. All support services will recognise the uniqueness of each person's situation offering continuity of advice and integrated support whenever possible. Additionally there is increasing momentum to make all local services dementia friendly. Services that are dementia friendly are 'friendly' for the wider community.

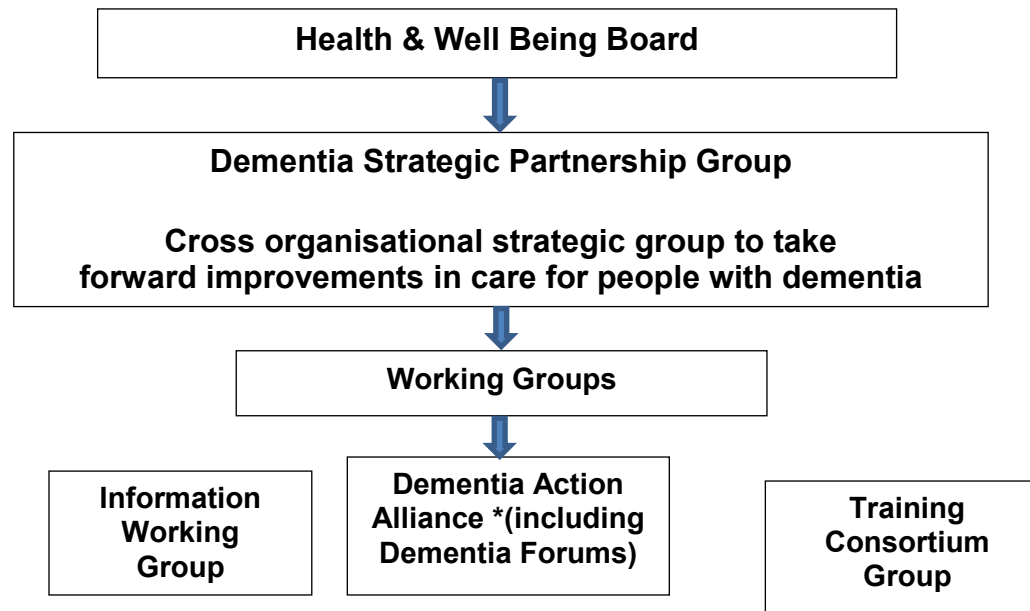
### **11. Main priorities from stakeholder consultation on JSNA**

A stakeholder event attended by over 60 people was held to discuss the JSNA recommendations. Below is a summary of main themes. The event was attended by over 60 people from a range of organisations. The CCG, SPFT and Sussex Community Trust attended. There was wide representation from Brighton and Hove City Council which included attendance from elected members. Managers and frontline staff from independent sector care home, home care agencies and independent sector housing attended. There was wide representation from the voluntary and community sector, including managers and frontline staff in day services, older people advice and information agencies and a learning disability service. Informal carers and people with dementia were also invited and attended the event.

- Ensure all care for dementia is person centred.
- Create a dementia friendly community and develop an Dementia Action Alliance.
- Developing one point of information for advice and information for dementia across the city.
- Increase the scope and range of dementia training across the city to include all staff and carers and develop a network of Dementia Service Champions.
- Ensure that people have joined up and integrated care for dementia that is delivered in one place, with a single point of contact.
- Work across all sectors of housing to provide training for staff and additional support for residents.
- Develop the capacity of home care to support the increasing number of people with dementia, and develop joint working with health to reduce social isolation and decrease delayed discharges of care from hospital.
- Increase the amount of respite care, including crisis support/emergency respite.
- Make the need of carers more transparent and develop, a "single point of access" especially for carers.
- Develop the capacity of care homes to support the increasing number of people with dementia, by training/ development for staff.

- Encourage the development of Dementia Environments.
- Work in partnership with wider community to encourage joint in reach into homes to reduce social isolation.

**Governance and delivery structure for Implementation of Joint Dementia Delivery Plan**



\* Dementia Action Alliances bring together regional and local members to improve the lives of people with dementia in their area. They are seen as the local vehicle to develop dementia friendly communities. A Local Alliance can be established at any level, be it a village, city, county or even a region. They can overlap geographically and member organisations are encouraged to participate in more than one. The Alliance will achieve its aims by bringing together organisations from public, private and charity sectors - not just from health and social care, but from sectors such as the emergency services, retailers and transport operators and community facilities.

## Brighton & Hove Joint Dementia Plan - 2014 -2017

| <b>Key -Highlighted colours</b> |                                                                                                       |
|---------------------------------|-------------------------------------------------------------------------------------------------------|
| RED                             | Currently <b>No</b> resources available – but could be considered in relation to the Better Care fund |
| AMBER                           | Resources <b>MAY</b> be available                                                                     |
| GREEN                           | Resources currently available                                                                         |

### **1. Recognising there is a problem – Good Quality Early Diagnosis and Intervention for All**

| Area for Development                                                                                                                                                              | Key Action                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Lead Organisation | When    | Key Partners Named lead                                                                                                                    | Resource needed                                                                                       | Links To           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------|
| <b>1.1 Develop a single point of dementia information to sign post public &amp; professionals</b><br><b>JSNA recommendations</b><br><b>1.1, 1.3, 3.3, 4.3.12, 3.14, 3.15, 4.3</b> | <ul style="list-style-type: none"> <li>• Develop a single point of information and advice as part of dementia Hub for Brighton &amp; Hove to provide information to professionals and the public in a variety of different formats.</li> <li>• Ensure this is linked to other key websites and information programmes in the city.</li> <li>• Make financial and legal advice available to self-funders. This resource is to cover the whole of the dementia pathway.</li> </ul> | CCG               | Oct 15  | <ul style="list-style-type: none"> <li>• BHCC</li> <li>• The Fed</li> <li>• Age UK Alzheimer’s Society</li> <li>• Carers Centre</li> </ul> | Currently <b>No</b> resources available – but could be considered in relation to the Better Care fund | Better Care Act    |
| <b>1.2 Workforce training</b>                                                                                                                                                     | Establish a dementia training consortium reporting to the dementia partnership group developing training strategy:                                                                                                                                                                                                                                                                                                                                                               | CCG/<br>BHCC      | July 15 | BHCC Work force Development                                                                                                                | Additional resources <b>may</b>                                                                       | Education training |

|                                                           |                                                                                                                                                                                                                                                                                                                                                           |                        |           |                                                                |                                                   |                                                                       |
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| <b>JSNA recommendations<br/>1.3, 1.13, 3.8, 3.3, 3.13</b> | <ul style="list-style-type: none"> <li>To ensure that the training needs of staff are met.</li> <li>In particular ensuring that the wider older people's workforce needs dementia awareness training (including those working with older people in the learning disability services).</li> <li>Develop best practise forums for practitioners.</li> </ul> |                        |           | Manager<br>CCG                                                 | be required                                       | group<br>CCG &<br>Joint<br>Commissioning<br>DOLS<br>training<br>group |
| <b>1.3 Good quality early diagnosis</b>                   | Increase capacity in Memory Assessment Service to increase level of dementia diagnosis in to 67%.                                                                                                                                                                                                                                                         | CCG                    | Mar 15    | CCG<br>Commissioning<br>Manager                                | Resources<br>currently<br>available               |                                                                       |
|                                                           | The continued provision of carers' assessment through the memory assessment service.                                                                                                                                                                                                                                                                      | CCG                    | Ongoing   | BHCC<br>Commissioning<br>Manager Carers                        |                                                   |                                                                       |
|                                                           | Rollout primary care Dementia QOF audit tool.                                                                                                                                                                                                                                                                                                             | CCG                    | Nov<br>14 | CCG<br>Commissioning<br>Manager                                |                                                   |                                                                       |
|                                                           | Link primary care memory checks with cardiovascular health programmes; stroke recovery programmes and carer assessments. Annual health checks for people with learning disabilities.                                                                                                                                                                      | Public Health /<br>CCG | ongoing   | CCG<br>Commissioning<br>Manager                                | Additional<br>resources <b>may</b><br>be required |                                                                       |
|                                                           | Develop joint pathway to ensure effective MAS access for people with Learning Disabilities.                                                                                                                                                                                                                                                               | CCG                    | Nov 15    | CCG<br>Commissioning<br>Manager/LD<br>Commissioning<br>Manager |                                                   |                                                                       |

## 2. Discovering that the condition is dementia

| Area for Development                                                                                                                                                      | Key Actions                                                                                                                                                                                                                                                                                                                                                                                                                   | Lead | When              | Key Partners                                                                              | Resource needed                                                                                       | Links to                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-------------------|-------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|--------------------------------------|
| <b>2.1 Early interventions and support for people with dementia, including pre &amp; post diagnostic support.</b><br><br><b>JSNA recommendations 2.3, 3.1,2.5,2.7,2.6</b> | Expand the early intervention services for people with dementia and their carers for example <ul style="list-style-type: none"> <li>Interventions may include: Counselling, pre &amp; post diagnosis psychological support / groups to support memory strategies, dementia Care mapping, Cognitive Stimulation, Memory Management, Reminiscence, Music and wellbeing, dance and movement and art-based activities.</li> </ul> | CCG  | June 2015         | BHCC Commissioning Manager Carers Alzheimer's Society Sussex Partnership Foundation Trust | Currently <b>No</b> resources available – but could be considered in relation to the Better Care fund | Better Care PBR Dementia Cluster F.4 |
|                                                                                                                                                                           | Increase the capacity of the CrISP training so that people with dementia and their families/carers are aware of how to access financial assistance and support with legal issues.                                                                                                                                                                                                                                             | CCG  | April 2015        | BHCC Commissioning Manager Carers Alzheimer's Society                                     |                                                                                                       |                                      |
| <b>2.2 Develop the advice support and capacity building in primary care.</b>                                                                                              | <ul style="list-style-type: none"> <li>Increase education &amp; training for GPs and general practice staff.</li> <li>Identify, support and train dementia</li> </ul>                                                                                                                                                                                                                                                         | CCG  | Ongoing<br>Oct 15 |                                                                                           |                                                                                                       | Care Act<br>Link 1.2                 |

|                                       |                                                                                                                                                                                                                                                                                         |  |        |  |  |  |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------|--|--|--|
| <b>JSNA recommendations 2.2, 3.3,</b> | champions within all practices. <ul style="list-style-type: none"> <li>• Work with general practice managers to ensure access and provision of information on dementia.</li> <li>• Develop a communication and implementation strategy to promote the Dementia Care pathway.</li> </ul> |  | Oct 15 |  |  |  |
|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------|--|--|--|

### 3. Living well with dementia

| Area for Development                                                                                                                              | Key Actions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Lead | When                                                                 | Key partners | Resource needed                                                                                                             | Links To                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|----------------------------------------------------------------------|--------------|-----------------------------------------------------------------------------------------------------------------------------|------------------------------|
| <b>3.1 Ensure joined up , integrated care for people with dementia and their carers</b><br><br><b>JSNA recommendations 2.2, 3.2,3.3,3.4,3.12,</b> | Develop services to meet the identified gaps in the Brighton and Hove Dementia pathway. <ul style="list-style-type: none"> <li>• Develop a single point of access as per 1.1 to ensure care is integrated to the whole.</li> <li>• Develop on-going post diagnosis support.</li> <li>• Built capacity in primary care to support care planning, information and advice. Develop Primary Care review template and care plan with training.</li> <li>• Ensure all people with dementia have a named key worker to develop a care plan and act as a single point of contact.</li> <li>• Ensuring care plan/coordination for dementia is in Phase 1 frailty model.</li> </ul> | CCG  | June 15<br><br>Dec 15<br><br>June 15<br><br>April 16<br><br>April 15 | BHCC         | Currently <b>No</b> resources available – but could be considered in relation to the Better Care fund PBR A .8, A.10, 15,16 | Better Care<br><br>Links 1.1 |

|                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |               |                                                                              |                                   |                                                                                                       |                               |
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|                                                                                                                                                                                                                                                       | <ul style="list-style-type: none"> <li>• Test out integrated MDT working through phase 1 of frailty e.g. dedicated nurse/practitioners.</li> <li>• Consider the role of an admiral nurse model, within phase 1 of frailty pilot.</li> <li>• Ensure Care Plans are in place and systematically reviewed though entire dementia pathway, including EOL care plan when appropriate.</li> <li>• Review pathways and services for people with learning difficulties with dementia.</li> </ul> |               | <p>April 15</p> <p>April 15</p> <p>From 15</p> <p>April 16</p> <p>Oct 15</p> |                                   |                                                                                                       |                               |
| <p><b>3.2 Create a Brighton Dementia action alliance that supports the development and sustainable of Dementia Friendly Communities through partnership of different organisations</b></p> <p>JSNA recommendations 1.2, 1.4, 3.3, 3.4, 3.14, 3.15</p> | <p>Set up a Dementia action Alliance Action Partnership. To lead the development of Dementia friendly communities. The Alliance should:</p> <ul style="list-style-type: none"> <li>• Support the rollout of the dementia friends' programme.</li> <li>• Rollout a programme to develop dementia forums to ensure people with dementia and their carers are engaged in the work of the alliances.</li> <li>• Promote Dementia Champions.</li> </ul>                                       | CCG           | April 15                                                                     | Public Health Alzheimer's Society | Currently <b>No</b> resources available – but could be considered in relation to the Better Care fund | Better Care Care Act Training |
| <p><b>3.3 Ensure mainstream services are dementia</b></p>                                                                                                                                                                                             | <p>Ensure that mainstream services that keep people well are accessible to people with dementia. Services to be</p>                                                                                                                                                                                                                                                                                                                                                                      | Public Health | From 2015                                                                    | CCG BHCC                          | Additional resources <b>may</b>                                                                       |                               |

|                                                                             |                                                                                                                        |                     |                  |                                             |                                             |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|---------------------|------------------|---------------------------------------------|---------------------------------------------|
| <b>friendly</b><br><br><b>JSNA recommendations</b><br><b>3.1, 3.4, 3.15</b> | encouraged to provide specially targeted programmes for people with dementia where appropriate.                        |                     |                  |                                             | be required                                 |
|                                                                             | Ensure relevant commissioning plans and contracts include the requirement they are dementia friendly.                  | Public Health & CCG | From 2015        | CCG<br>BHCC                                 | Resources currently available               |
|                                                                             | Ensure that older people's services that keep people well are accessible to people with dementia.                      | ASC                 | From 2015        | CCG<br>Public Health                        |                                             |
|                                                                             | Ensure best practise on developing built dementia environments is disseminated to public service providers.            | ASC                 | From 2015        | CCG<br>Public Health                        | Additional resources <b>may</b> be required |
|                                                                             | Ensure the needs of people with dementia are linked into relevant wider work areas such as the Age Friendly City work. | Public Health       | From 2015        | CCG & ASC                                   | Resources currently available               |
| <b>3.4 Memory bag</b>                                                       | Memory bags.eg This is me? An individualised version of the 'Memory Box' scheme are still promoted and made available. | CCG                 | Ongoing          | BSUH<br>Alzheimer society                   |                                             |
| <b>3.5 Home Care</b>                                                        | Ensure a robust training programme is in place for all home care workers in Council in house and contracted services.  | BHCC                | On going         | BHCC<br>Home Care Commissioning Manager     | Resources currently available               |
| <b>JSNA recommendations</b><br><b>3.7, 3.8, 3.9</b>                         | Increase the capacity of home care agencies to support timely hospital discharge for people with dementia.             | BHCC                | To be determined | BHCC<br>Home Care Commissioning Manager CCG |                                             |



|                                                                                            |                                                                                                                                                                |                    |                  |                                       |  |                                         |
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|                                                                                            | Work with all providers to develop support around End of Life care.                                                                                            | BHCC               | To be determined | Home Care Commissioning Manager CCG   |  |                                         |
|                                                                                            | Consider how to support non Council Approved home care agencies in relations to dementia.                                                                      | No lead identified | To be determined | Home Care Commissioning Manager CCG   |  |                                         |
| <b>3.6 Community support and day service</b><br><br><b>JSNA recommendations 3.12, 3.15</b> | Work with the voluntary and community sector to develop services to ensure that the risk of people with dementia and their carers being isolated is minimised. | BHCC               | 2015             | Public Health                         |  | Better Care Training                    |
|                                                                                            | Ensure that dementia training is available for the community and voluntary sector.                                                                             | Public Health ASC  | 2015             | BHCC Learning and Development Manager |  |                                         |
|                                                                                            | Develop the role of the voluntary sector to provide buddies/befrienders who can outreach to support people with memory to engage in community activities.      | ASC                | 2015             | Public Health                         |  | Sheltered Housing<br>Extra Care Housing |
|                                                                                            | Ensure the Dementia Friendly Toolkit is rolled out.                                                                                                            | ASC                | Autumn 2014      | CCG                                   |  |                                         |
| <b>3.7 Direct Payments and Personal Budgets</b><br><br><b>JSNA recommendation 3.11</b>     | Work with care managers and commissioned Self Directed Support service to encourage take up of direct payments for people with dementia.                       | ASC                | On going         | CCG and Personal Health Budgets       |  | Care Act<br>Better Care                 |
|                                                                                            | Support informal carers with the take up of direct payments.                                                                                                   | ASC                | Autumn 2014      | ASC Commissioning Manager Carers      |  |                                         |

|                                                                         |                                                                                                                                                                                          |     |            |                                                      |                                                                                                |
|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|------------|------------------------------------------------------|------------------------------------------------------------------------------------------------|
|                                                                         | Ensure Personal Health Care Budgets are available for people with dementia.                                                                                                              | CCG | Ongoing    | CCG Commissioning Manager                            |                                                                                                |
| <b>3.8 Carers</b><br><br><b>JSNA recommendations</b><br><b>3.9, 3.8</b> | Continue to improve the number of carers receiving assessments.                                                                                                                          | ASC | On going   | ASC Commissioning Manager Carers                     |                                                                                                |
|                                                                         | A “single point of access” especially for carers, (the dementia hub) providing information, advice and support throughout the “journey” of being a carer - including a “navigator role”. | ASC | April 2015 | ASC Commissioning Manager Carers Alzheimer’s Society | Additional resources <b>may</b> be required                                                    |
|                                                                         | Care home respite to people who meet FACs eligibility. Improved access and information regarding available care home respite across all providers.                                       | ASC | April 2015 | ASC Commissioning Managers Carers and Older People   | Currently No resources available – but could be considered in relation to the Better Care fund |
|                                                                         | Increase Carers awareness and support via Primary Care, through collaborative working with the Carers Support Service (within the Integrated Primary Care Teams).                        | ASC | April 2015 | ASC Commissioning Manager Carers                     | Additional resources <b>may</b> be required                                                    |
|                                                                         | Home based respite services available as universal service to all carers irrespective of FACs.                                                                                           | ASC | April 2015 | ASC Commissioning Managers                           | Currently <b>No</b> resources available – but                                                  |

|                                                      |                                                                                                                        |     |                |                                                     |                                                         |                      |
|------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----|----------------|-----------------------------------------------------|---------------------------------------------------------|----------------------|
|                                                      |                                                                                                                        |     |                | Carers and Home care                                | could be considered in relation to the Better Care fund |                      |
|                                                      | Dementia training courses offered to carers.                                                                           | ASC | On going       | BHCC Learning and Development Manager               | Resources currently available                           | Training             |
|                                                      | Robust emergency respite is available to everyone at time of need.                                                     | ASC | April 2015     | ASC Commissioning Managers Carers and Older People  | Additional resources may be required                    | Better Care Care Act |
|                                                      | Increase awareness of the Carers Emergency Back Up scheme.                                                             | ASC | On going       | ASC Commissioning Managers Carers                   | Resources currently                                     |                      |
|                                                      | Review psychological services offered to carers in reference to identified gaps in PBR and increase service provision. | CCG | April 2015     | CCG Commissioner/Commissioning Manager Carers       |                                                         |                      |
|                                                      | Ensure carers are represented on the Dementia Partnership group.                                                       | ASC | ?              | Alzheimer's Society                                 |                                                         |                      |
| <b>3.9 Care Homes JSNA recommendations 3.9, 3.10</b> | Ensure a robust training programme is in place for all care home workers.                                              | ASC | By spring 2015 | BHCC Learning and Development Manager Commissioning |                                                         | Training             |

|                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |             |                                                                      |                                                                                                |                   |
|-----------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|-------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-------------------|
|                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |     |             | Manager Home care                                                    |                                                                                                |                   |
|                                                                 | Dedicated training to reach into residential care homes and provide onsite training.                                                                                                                                                                                                                                                                                                                                                                  | CCG | Oct 2015    | Learning and Development Managers BHCC and CCG Commissioning Manager | Currently No resources available – but could be considered in relation to the Better Care fund | Training          |
|                                                                 | Share information on capital improvements to make care homes dementia friendly.                                                                                                                                                                                                                                                                                                                                                                       | ASC | Ongoing     | BHCC Commissioning Managers                                          | Resources currently available                                                                  | Telecare          |
|                                                                 | Care homes to have an identified dementia lead.                                                                                                                                                                                                                                                                                                                                                                                                       | CCG | April 2016  | BHCC Commissioning Manager                                           | Additional resource <b>may</b> be required                                                     |                   |
|                                                                 | Continue to fund care home In reach Team and look at how functions fit in wider training work/frailty work.                                                                                                                                                                                                                                                                                                                                           | CCG | June 2015   | CCG Commissioning Manager Dementia and SPFT                          | Resources currently                                                                            |                   |
| <b>3.10 Sheltered Housing</b><br><b>JSNA recommendation 3.5</b> | <ul style="list-style-type: none"> <li>Explore what dementia awareness training, preventative work and dementia friendly design work currently taking place and consider further actions.</li> <li>Explore how to involve the wider community in events taking place in Sheltered Housing, including linking with the Dementia Action Alliance.</li> <li>Review pathways and support for people with dementia living in Sheltered Housing.</li> </ul> | ASC | Autumn 2014 | BHCC Housing managers Independent Housing Providers                  |                                                                                                | Telecare Training |

|                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |     |                          |                                                                                                   |  |                                                   |
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| <b>3.11 Extra Care Housing</b><br><br><b>JSNA recommendation 3.5</b> | <ul style="list-style-type: none"> <li>• Ensure the commissioned Extra Care Business Case includes dementia.</li> <li>• Ensure Brookmead Extra Care development is linked to wider dementia networks.</li> <li>• Explore what dementia awareness training, preventative work and dementia friendly design work is currently taking place and consider further actions.</li> <li>• Explore how to involve the wider community in events taking place in Extra Care housing, including linking with the Dementia Action Alliance.</li> <li>• Review pathways and support for people with dementia living in Extra Care Housing.</li> </ul> | ASC | Autumn 2014 and on going | Independent Housing Providers                                                                     |  | Telecare Training<br><br>Dementia Action Alliance |
| <b>3.12 Homeless Services</b>                                        | <ul style="list-style-type: none"> <li>• Explore what dementia related training homeless services managers and staff receive, and consider what more they may need, particularly in relation to alcohol related dementia.</li> <li>• Explore how dementia friendly the internal and outside areas of current homeless accommodation services are. Consider further actions that may be needed to increase dementia friendly design in homeless accommodation services.</li> <li>• Review pathways and support for people with dementia living in Homeless services.</li> </ul>                                                           | ASC | Autumn 2014              | Housing Allocations<br><br>Supporting People<br><br>Learning and Development<br><br>Public Health |  | Telecare<br><br>Better Care-( Homeless Project    |
| <b>3.13 LD Accommodation Services</b>                                | <ul style="list-style-type: none"> <li>• Explore what dementia related training LD accommodation service managers and staff receive and consider what more they may need.</li> <li>• Review pathways and support for people with</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                              | ASC | Autumn 2014              | CLDT<br>Kevin Murphy<br>Mark Hendriks<br>Commissioning                                            |  | Training<br>Telecare                              |

|                                                     |                                                                                                                                                                                                                                                                                                                                                                                                             |     |                |                                       |                                |                                            |
|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------------|---------------------------------------|--------------------------------|--------------------------------------------|
|                                                     | dementia living in LD Accommodation.                                                                                                                                                                                                                                                                                                                                                                        |     |                | Manager                               |                                |                                            |
| <b>3.14 General Needs<br/>Social Housing</b>        | <ul style="list-style-type: none"> <li>• Explore what dementia awareness training, preventative work and dementia friendly design work is currently taking place and consider further actions.</li> <li>• Consider how to link general needs social housing with the Dementia Action Alliance to include residents in developing the role of the Dementia Friends programme and dementia forums.</li> </ul> | ASC | Autumn 14      | Kevin Murphy<br>Housing<br>Management |                                | Dementia<br>Action<br>Alliance<br>Telecare |
| <b>3.15 General Needs<br/>Private Rental Sector</b> | <ul style="list-style-type: none"> <li>• Explore whether estate agents in the city have a forum or representative body, and if so whether they provide information on dementia awareness to members.</li> <li>• Explore whether the Southern Landlord Association currently provides information on dementia awareness to members, and consider ways to increase awareness to private landlords.</li> </ul> | ASC | Autumn<br>2014 | Southern<br>Landlord<br>Association   | Dementia<br>Action<br>Alliance |                                            |

#### 4. Getting the right help at the right time

| Area for Development                                                                                           | Key Actions                                                                                                         | Lead             | When          | Key partners                | Resource needed                                                                                | Links To |
|----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|------------------|---------------|-----------------------------|------------------------------------------------------------------------------------------------|----------|
| <b>4.1 Respite Care including Crisis support/emergency Respite</b><br><br><b>JSNA recommendations 4.2, 4.4</b> | Explore planned and emergency respite services in care homes.                                                       | ASC              | Autumn 2014   | BHCC Commissioning Managers | Resources currently available                                                                  |          |
|                                                                                                                | Explore planned and emergency respite services in non-residential settings to identify gaps in provision.           | ASC              | Autumn 2014   | BHCC Commissioning Managers |                                                                                                |          |
|                                                                                                                | Clarify pathways and referral mechanisms to existing respite services.                                              | ASC              | Spring 2015   | BHCC Commissioning Managers |                                                                                                |          |
|                                                                                                                | Increase awareness of council provided respite service, including amongst those not eligible for Adult Social Care. | To be identified | Winter 2014-5 | BHCC Commissioning Managers |                                                                                                | Care Act |
|                                                                                                                | Ensure care home, day and emergency respite is included systematically as a part of care planning.                  | ASC              | Spring 2015   | Operational managers        |                                                                                                |          |
|                                                                                                                | Provide access to an emergency back-up scheme for carers not eligible for Adult Social Care.                        | ASC              | Spring 2015   | BHCC Commissioning Managers | Currently No resources available – but could be considered in relation to the Better Care fund |          |
|                                                                                                                | Commission respite services to meet identified need in care homes.                                                  | ASC              | Spring 2015   | BHCC Commissioning Managers |                                                                                                |          |
|                                                                                                                | Commission respite services to meet identified need in non-residential settings.                                    | ASC              | Spring 2015   | BHCC Commissioning          |                                                                                                |          |

|                                                                                            |                                                                                                                                                                                                                                                                                |         |          |                            |                                             |                                     |
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|                                                                                            |                                                                                                                                                                                                                                                                                |         |          | Managers                   |                                             |                                     |
| <b>4.2 Telecare</b><br><b>JSNA recommendation 4.5</b>                                      | Provide telecare information sessions for people with dementia, including sessions at day services and at relevant information events.                                                                                                                                         | ASC     | March 15 | Telecare and CareLink Plus | Resources currently available               | Training<br>Care Act<br>Better Care |
|                                                                                            | Provide telecare awareness training for staff members who support people with dementia.                                                                                                                                                                                        | ASC     | March 15 | CareLink Plus              |                                             |                                     |
|                                                                                            | Ensure telecare is integral to relevant assessment processes.                                                                                                                                                                                                                  | ASC     | On going | Training                   |                                             |                                     |
|                                                                                            | Provide telecare support and information for residential care providers where appropriate.                                                                                                                                                                                     | ASC     | On going | Telecare                   |                                             |                                     |
|                                                                                            | Ensure that the latest telecare equipment is available.                                                                                                                                                                                                                        | ASC     | On going | Telecare                   |                                             |                                     |
|                                                                                            | Promote telecare and telehealth to all who could benefit, including those who live alone and self-funders.                                                                                                                                                                     | ASC     | On going | Telecare                   |                                             |                                     |
|                                                                                            | Consider the needs of people with dementia through any telehealth programmes.                                                                                                                                                                                                  | ASC/CCG | March 14 | CCG and GP practitioners   |                                             |                                     |
| <b>4.3 Palliative Care &amp; End of Life</b><br><b>JSNA recommendations 3.2 &amp; 3.10</b> | Implement the modified PEACE (Proactive Elderly persons Advisory CarE) document. Improve the EOLC (End Of Life Care) of dementia patients by reducing the number of potentially distressing and burdensome transfers to hospital from nursing homes in the final year of life. | BSUH    | Nov 15   | CCG Clinical Lead Dementia | Additional resources <b>may</b> be required | BSUH Strategy                       |



|  |                                                                                                                                                                                                            |      |          |                                                                        |                               |                                                                |
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|  | Ensure Dementia training consortium prioritises EOL / dementia training, including Advance Care Planning, Communication skills development and Prognostic indicators.                                      | CCG  | April 15 | CCG Commissioning Manager<br>CCG Commissioning Manager<br>Primary Care |                               | Links to training provision                                    |
|  | Advanced Care Planning is promoted through Dementia Advisers and other early intervention services including the Living Well with Dementia team.                                                           | CCG  | April 15 | CCG Commissioning Manager<br>Dementia<br>MAS and SPFT                  |                               | Links to development of best practise forums for practitioners |
|  | Ensure patients with dementia identified as approaching their end of life are flagged to General Practitioners for entry onto the end of life care and are supported by priorities of Palliative Care LES. | CCG  | April 15 | CCG Commissioning Manager<br>Dementia                                  |                               | Links to Primary care development                              |
|  | Carers to be provided with bespoke support at EOL.                                                                                                                                                         | BHCC | On-going | BHCC Commissioning Managers                                            | Resources currently available |                                                                |

### 5. Strategic Coordination and Partnership working -

| Area for Development                                                                                                                                                     | Key Actions                                                                                                                                                                                                                                                  | Who | When     | Key partners                   | Resource needed                             | Links To |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----------|--------------------------------|---------------------------------------------|----------|
| <b>5.1 Strengthen current Dementia Partnership group to be body that oversees JSNA delivery Plan</b>                                                                     | <ul style="list-style-type: none"> <li>Review TOR, membership, and governance arrangements.</li> <li>Facilitate quarterly meetings.</li> <li>Report back to Health &amp; Well Being Board, HWOSC and Clinical Strategy Group on delivery of plan.</li> </ul> | CCG | Nov 2014 | Monitoring of delivery of plan | Resources currently available               |          |
| <b>5.2 Work with enhancing quality team and public health to develop a dementia dashboard to inform strategic monitoring of dementia.</b><br><br>JSNA recommendation 5.1 | Identify contents of dashboard to include QOF and DES information, MAS data, prescribing data and enhancing quality dashboard.                                                                                                                               | CCG | April 15 |                                | Additional resources <b>may</b> be required |          |
| <b>5.3 Engagement with people with dementia and their carers</b>                                                                                                         | Develop engagement frame work for Dementia.                                                                                                                                                                                                                  | CCG | Dec 15   |                                |                                             |          |

Appendix 1

Appendix 2

Appendix 3



Dementia Hub



JSNA  
Recommendations



Dementia Strategy  
BSUH 2014