

	<p align="center">London Borough of Hammersmith & Fulham</p> <p align="center">Health & Wellbeing Board</p> <p align="center">30th June 2014</p>
<p align="center">JOINT HEALTH AND SOCIAL CARE DEMENTIA STRATEGY</p>	
<p>Report of the Corporate Director</p>	
<p>Open Report Yes</p>	
<p>Classification: For Information (delete as appropriate) Key Decision: No</p>	
<p>Wards Affected: All</p>	
<p>Accountable Executive Director: Liz Bruce, Tri-borough Executive Director</p>	
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DATE:

1. EXECUTIVE SUMMARY

- 1.1. The North West London Mental Health Programme board and the Tri-borough intend to carry out a strategic review of how dementia services are commissioned and provided.
- 1.2. The Mental Health Programme Board consists of clinical leads from all NWL CCGs, Social Services and Providers, and the aim of the board is to work collaboratively to review the current pathways and services and to plan future services that meet the needs of the population.
- 1.3. The key areas for the Board to consider are:
 - Scope of the strategy

- Stakeholder involvement
- Length of time of review
- Desired outcomes and timescales including national mandatory target achievement

2. RECOMMENDATIONS

- 2.1. It is recommended that the Board consider the approach and note the intention to develop a Joint Dementia Strategy across the five Clinical Commissioning Groups, and Tri-borough, Hounslow and Ealing boroughs.

3. REASONS FOR DECISION

- 3.1. The National Dementia Strategy 2009 and the government's dementia challenge has driven the need to consider changes to the dementia pathway to enable more streamlined and integrated dementia services, better information and advice for families and a response to the increasing incidence of dementia due to demographic and epidemiological changes in the national population.

4. INTRODUCTION AND BACKGROUND

- 4.1. The Cabinet/Committee is requested to consider the intention to produce a joint dementia strategy across NW London that will build on previous strategies and consolidate ongoing developments for each locality. Strategic planning will be overseen by the wider Mental Health Programme Board dementia programme across NW London for improving dementia services, and ensuring future local provision builds on the ethos of collaboration for social care as well as health care services.
- 4.2. The programme board has scoped the approach to a joint dementia strategy across the boroughs covered by the Central, West London, Hammersmith, Hounslow and Ealing collaborative of Clinical Commissioning Groups, including the Tri-borough. There is an expectation that the over-arching approach will support the strategic developments required in each sovereign borough to ensure it meets local needs.

5. PROPOSAL AND ISSUES

- 5.1. Dementia is an umbrella term for symptoms of diseases of the brain that will affect a third of people over 65. There are more than 40 different types of dementia illness. Dementia can affect memory, the ability to use language (some people are no longer able to remember their second language), facial recognition, perception (dark contrast areas in flooring such as entrance mats may be viewed as holes; some people may hear voices), changes to orientation in time and space and understanding of current abilities, as well as personality changes.
- 5.2. Recently, medication to slow the progress of Alzheimer's type dementia was made available, and new treatments are being trialled.

- 5.3. There are still gaps in provision post-diagnosis. People with dementia and their carers are generally pleased with the overall changes in the diagnosis and treatment pathway, but are still saying there is not much support available to them before they become eligible for care home or nursing care services, especially at crisis points when carers can feel overwhelmed; nor when the person needs acute healthcare services. They also feel that there is a lack of training of professionals in health and social care to adequately meet their needs (source: Central West London Healthwatch report June 2014).

6. OPTIONS AND ANALYSIS OF OPTIONS

- 6.1 Strategic planning should dovetail with the wider programme across NW London for improving dementia services, but ensure local services build on the ethos of collaboration for social care as well as health services.

7. CONSULTATION

- 7.1. Consultation on the strategic work and the dementia JSNA will take place throughout the development with all stakeholders at an appropriate level of involvement.

8. EQUALITY IMPLICATIONS

- 8.1. None required at this stage

9. LEGAL IMPLICATIONS

- 9.1. None at present

10. FINANCIAL AND RESOURCES IMPLICATIONS

- 10.1. None at present

11. RISK MANAGEMENT

- 11.1. None at present

12. PROCUREMENT AND IT STRATEGY IMPLICATIONS

- 12.1. None at present

LOCAL GOVERNMENT ACT 2000
LIST OF BACKGROUND PAPERS USED IN PREPARING THIS REPORT

No.	Description of Background Papers	Name/Ext of holder of file/copy	Department/ Location
1.			

LIST OF APPENDICES:

Appendix 1: Joint Dementia Strategy 2014 – 2019 Development Summary

Appendix 2: Dementia Healthwatch presentation