The estimated prevalence of Dementia in the London Borough of Hammersmith and Fulham (LBHF) is 1200 people aged 65+ with a projected increase of 50% by 2030. These figures do not take into consideration improvements in lifestyle across the local population as a result of healthier living programmes and any subsequent positive impact on Dementia prevalence.

Given the expected increase in the number of people with Dementia coupled with earlier and increased diagnosis rates, (80.1% in Hammersmith and Fulham Clinical Commissioning Group (HFCCG), personalised sustainable support is required to meet the growing future demand. This includes services and communities supporting people with younger onset Dementia and the needs of people with Learning Disabilities who are five times more likely to develop Dementia compared to the general population.

The Dementia review and subsequent procurement strategy aims to ensure that any future service model is fit for purpose, cost effective, meets the anticipated projected increase in demand for services and offers a range of flexible personalised services to people with Dementia with varying levels of need across the care pathway.

In the future Services will need to be delivered in a co-ordinated and integrated way, rather than in silo, to enable people with Dementia and their carers to have better access to seamless services that enable them to live well with Dementia in the community.

The London Borough of Hammersmith and Fulham (LBHF) services that are within scope of the review are set out in Table 1 as follows

Service Type	Provider	Service Description	HFCCG funding £'s	LA funding £'s	Annual Contract Value £'s	Funding Mechanism
St Vincent's day centre	The Alzheimer's Society	Building based day services for people with dementia	Nil	305,857	305,857	LA only
Outreach service/Activity Plus	Housing and Care 21	Community based specialist dementia personal care and outreach service	Nil	140,000	140,000	LA only
Dementia Adviser	The Alzheimer's	Provides information, advice	34,500	Nil	34,500	Section 75

Appendix A: Strategic Dementia Review - Background Information

	Society	signposting and support				Agreement
Singing for the Brain	The Alzheimer's Society	Singing project in community	6,700	Nil	6,700	HFCCG only
Music For Life	Wigmore Hall	Music project in care homes	9,500	Nil	9,500	HFCCG only
Resonate Arts	Westminster Arts	Arts projects in care homes and community	10,000	Nil	10,000	HFCCG only
Total			60,700	445,857	506,557	

The Cabinet Member for Adult Social Care is asked to note that the proposal at this stage of the review is to introduce a Dementia hub and spoke service model as set out in Appendix B by developing a joint Procurement Strategy followed by a single procurement exercise for both Older People (OP) and Dementia Day services.

The review has considered the following options for Dementia services:

- Option 1 Business as usual. The 'do nothing' approach is not recommended.
- Option 2 Close specialist building based Dementia day services. This is not recommended.

- Option 3 Reduce the number of commissioned services meaning service users and carers have direct payments. This is not
  recommended at this stage although any future model will need to work towards increasing the uptake of direct payments to
  afford people opportunities to access personalised support to meet their health and well-being outcomes.
- Option 4 Introduce a remodelled Dementia hub and spoke (preferred model)

The preferred model at this stage is option 4, which is to remodel existing services and introduce a Dementia hub and spoke type model to meet the health and well-being outcomes of people with Dementia and their carers to support them to live well across the borough.

The principles of the model are to have a single point of access for OP and Dementia community services. Those with low level needs will receive information, advice and signposting services to enable people to live well in the community with Dementia and their carers to be supported. Support will include access to universal services i.e. libraries, leisure centres, cafes as well as primary, secondary and tertiary preventative services, Public Health commissioned services, vocational and education provision.

It is proposed that the Dementia hub will operate from the current Dementia day service premises and offer personalised sessional based day care support for people with high needs including people in receipt of direct payments from other boroughs.

The 'spoke' aspect of the service model offer will include flexible community based outreach for those with moderate needs i.e. peer led support sessions, Dementia cafes, befriending etc. operating from existing community assets and mainstream services.

Services will focus on personalisation offering service users choice and control including person centred care planning and support to access and use a direct payment. Officers are considering options such as Individual Service Funds (ISFs) and managed funds as part of the commissioning and procurement strategy.

Flexible and accessible transport options will be incorporated into the remodelled service.

The Council and its CCG partners propose to commission services that are; personalised, integrated, localised and centralised and achieve the mandate to streamline contractual arrangements.

A Strategic Lead Provider approach with a number contracting options including a framework agreement across some or all three boroughs is being considered to include sub contract arrangements with other local organisations to deliver against an outcome based service specification.

### The advantages to this are:

- To deliver better integrated, co-ordinated and streamlined services to customers and their carers to meet health and well-being outcomes
- It achieves the commissioning mandate to reduce the number of contracts, simplifying contract monitoring and management arrangements,
- It has the potential to achieve maximum level back office efficiencies,
- It includes smaller local third sector organisation that have a demonstrable track record of delivering Dementia services.

#### The disadvantages are:

It may exclude smaller and medium sized organisations who do not have the capacity and resources required to compete with larger organisations. However, mitigation will include working with the three Voluntary Community Service (VCS) leads to build capacity across the sector to respond to a joint tender exercise.

This approach is to maximise efficiencies for LBHF and other Local Authority and CCG partners. The remodelled service is expected to meet the anticipated future demand for services and aims to achieve a proposed savings target of 10% as set out in Appendix C which will need to be tested with the market.

A minimum three-year contract with a strategic provider for OP and Dementia services with efficiencies is being considered with the option to extend for up to a further two years. A common outcome focussed specification co-designed by people living with Dementia and their carers across the three boroughs is proposed as recommended in the Dementia JSNA 2015 and approved by the Health and Well-Being Boards.

Officers are testing the capacity and capability of the market to deliver the proposed model including exploring interest from social enterprise and public social mutual schemes.

A key strategic objective of Adult Social Care (ASC) is the contractual alignment of similar services to facilitate joint re-procurement with neighbouring Boroughs. A joint procurement of OP and Dementia day and community services in 2017/18 will enable the Council and HFCCG to achieve optimum value for money and maintain high quality of services.

Officers are exploring options to achieve the CCGs ambition to proceed with a re-tender for Dementia services to introduce a new Dementia service model and release savings in 2017 where possible. Options being considered are streamlining the governance and re-tender timeline within the shortest possible timescales. This will be subject to sufficient resources being available to undertake the procurement, flexibility with individual Council and CCG governance requirements as well as compliance with EU and local procurement regulations.

A Dementia project group has been established to oversee the review work and its delivery. This group reports into the local Joint Health and Social Care Dementia Implementation Group which includes representatives from ASC and CCGs including clinical leads. The group also reports into the wider three borough Joint Health and Social Care Dementia Programme Board which is accountable to the Joint Executive Team and Health and Well-Being Boards.

To date the review across the three boroughs has undertaken

- Service Mapping
- Service activity/data analysis
- Local demographic data analysis
- High level financial analysis
- Local and National Context
- Internal and External Stakeholder engagement events
- Customer and carer focus groups
- Cabinet Member, CCG Mental Health and Clinical Lead briefing

The next steps of the review are to carry out:

- An internal and external soft market testing event on the 9th and 23rd November. These sessions will allow for feedback on the proposed Dementia service model and to test the markets capability and capacity to deliver,
- Benchmarking with other Inner London Boroughs,

- Demand/Capacity and Financial Modelling,
- Develop a joint OP/Dementia category plan and procurement strategy.

Customer and Carer focus groups will be held between the period 28th November to 9th December 2016 to include co-design of an outcome focussed service specification. The specification will build on the North West London (NWL) 'Like Minded' strategic review in 2015 and the co-produced framework specification.