



Mary Latter Joint Commissioning Manager (Dementia) Birmingham

Commissioning Dementia Services in Birmingham

- Joint Commissioning Team for Mental Health/ Better Care programme
- 3 Birmingham CCG's and Birmingham City Council
- Frail Elderly Programme Board (pre-CCG)
- Lead GP's for Mental Health
- Dementia Steering Group/ Dementia Partnership Forum
- No pooled budget

"Give me something to believe in"

BIRMINGHAM AND SOLIHULL DEMENTIA STRATEGY 2014-17



Dementia- Facts and Figures

- There are estimated to be 686,082 people in England with dementia, of these 405,985 have a diagnosis (Feb 15 figs) = 59.17% diagnosis rate
- The proportion of people with dementia doubles for every five-year age group over 65 and 1 in 6 people over the age of 80 have dementia.
- 70 per cent of people in care homes have dementia or severe memory problems but two thirds of people with dementia live in the community
- Dementia does not just affect old people there are over 40,000 people under 65 with dementia in the UK – around 300 people in Birmingham
- There are 670,000 carers of people with dementia in the UK & family carers of people with dementia save the UK £11 billion a year.

FINANCIAL COST

- The estimated total cost of dementia in the UK is £26.3 billion.
- The NHS picks up £4.3 billion of the costs and social care £10.3.
- Of the £10.3 billion in social care costs, £4.5 billion is attributed to local authority social services for state funded care.
- By 2026 the total projected cost of dementia is £34.8 billion for the UK, with a large proportion of this accounted for by informal care from family/friends.
- The Alzheimer's Society report that the annual cost of dementia care is, on average, £25,472.

Strategic Drivers

- The National Dementia Strategy, Living Well with Dementia (2009)
- Quality Outcomes for People with Dementia: Building on the Work of the National Dementia Strategy (2011)
- The Prime Minister's Challenge on Dementia-Delivering Major Improvements in Dementia care and research by 2015

Local Drivers

- Diagnostic Targets
- CCG Quality Improvement
 Schemes
- Health Overview and Scrutiny

Report



"Living life to the full with dementia"



A report from Overview & Scrutiny



Birmingham -Facts and Figures

- Over million people live in Birmingham. The latest estimate is 1,085,400, (based on the 2012 mid-year population estimate).
- Birmingham is a diverse city
- Around 42% of residents are from an ethnic group other than white.
- Birmingham is a growing city
- Since 2001 the population has increased by almost 100,000 (10.2%). This is an average rate of 0.9% per year. The population increase over the last decade is associated with more births, fewer deaths and international migration.
- Birmingham is a youthful city
- There are more people in the younger age groups, while England as a whole has a greater proportion of older people. However data shows that the numbers of pensioners in Birmingham is projected to grow by 11%, half the national rate. The population aged 85 and over is projected to grow by 30.1% (5,800) ONS Data

Financial cost in Birmingham

Funding for directly commissioned services for people with dementia = less than £3 million

2014 £300 mill 2021 F350 mi Emergency hospital admissions
Delayed discharge from acute
hospitals

Additional bed days

Premature entry to long term residential care

(*based on Dementia UK report 2007)

What have people told us?

People with dementia say:

- » That there is still a lot of stigma attached to dementia and this means that people try to cover it up for as long as possible
- » That they struggle to find out what is available to support them and how to access it
- » That there are good services and support available but that it takes a lot of effort to find them
- » That their experience of getting their GP to take their worries seriously has been patchy
- » That services do not appear to be co-ordinated
- » That they want to be able to stay living at home for as long as possible
- » That they want to be supported to continue to do the things that are important to them and to have a choice in the type of services available to support them
- » That the diagnostic process sometimes takes a very long time, which increases their concerns and means that they do not feel able to access services that would support them.

Carers say:

- » That support for carers is poor
- » That they want to continue to provide care but need to be able to rely on the wider services and know that help is available quickly when things became difficult
- » That there is not enough respite care available and very little that is not residential.

What do people want?

I was diagnosed early I was treated with respect and dignity

I feel supported as a carer

I got the right information, at the right time in the right way

I have GP Support

I enjoy life

I was given information about the end of life to make informed choices

I am able to continue to do the things I enjoy and have opportunities to try new things

I feel understood by the professionals who treat me I have choice, control and knowledge of services I am supported to do things/activities at home

I understand, so can make decisions

I received continuity of care I was treated with respect and dignity whilst managing my condition

I get good support and breaks as a carer

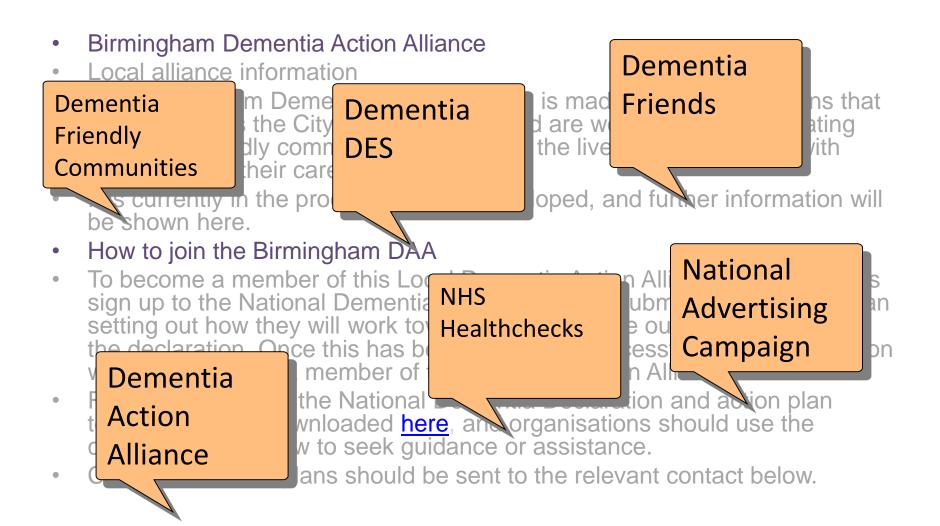
I feel part of a community and I'm inspired to give something back

Adapted from A Call to Action: The National Dementia Declaration⁵

Prevention and Health Promotion

- Reduce the stigma felt by people with dementia by improving public and professional knowledge of the condition
- Include dementia in strategic and operational planning
- Help people improve and maintain their health and wellbeing
- Develop Dementia Friendly Communities/ Services
- Knowledge about higher risk groups – including people with Learning Disabilities

Prevention and Health Promotion



Recognition and Identification

- Improve focus on early identification
- Focus on identifying those at higher risk (including people with learning disabilities)
- Recognition and referral in acute and other inpatient settings
- Training and support for all staff
- Increase diagnosis rates

Recognition and Identification

Clinical Open Forum with National Lead

Rapid assessment interface and discharge team

CQUIN

(Commissioning for Quality and Innovation)

Mild Cognitive Impairment Pathway (MCI)

Single point of referral for Memory Assessment Services set up

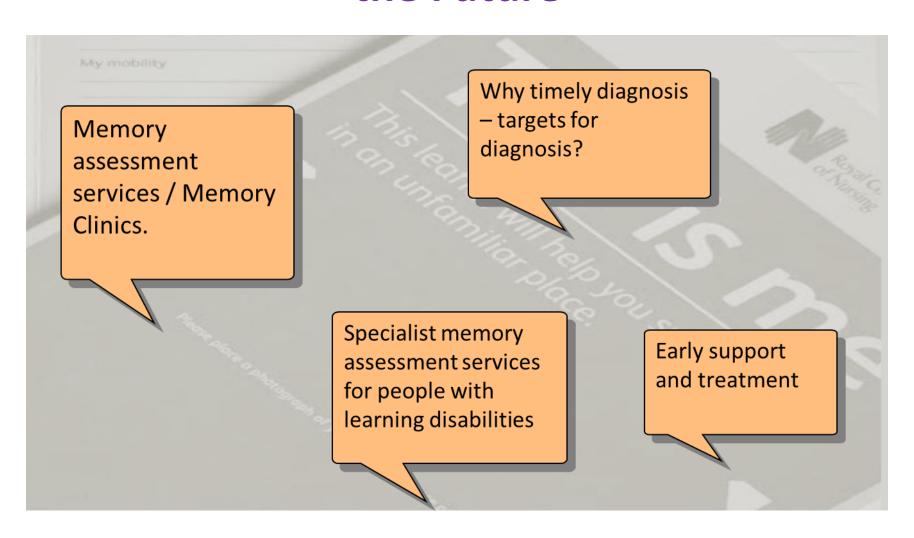
Clinical review of referral documentation

JHS Healh Ch ou prevent heart disease, stro kidney disease and dementia Education sessions for GP's and Primary Care Staff

Assessment, Diagnosis and Planning for the Future

- Clear diagnostic pathways
- Clear onward pathways including access to specialist early support
- Access to prescribing options where appropriate

Assessment, Diagnosis and Planning for the Future



Living Well with Dementia

- Ensure people with dementia have access to the right support at the right time
- Support in the community
- 'Joined up' assessments
- Access to same range of services as people without dementia
- Reduction in use of antipsychotics
- Use of reablement and telecare
- Support for Carers
- Availability of respite care

Living Well with Dementia

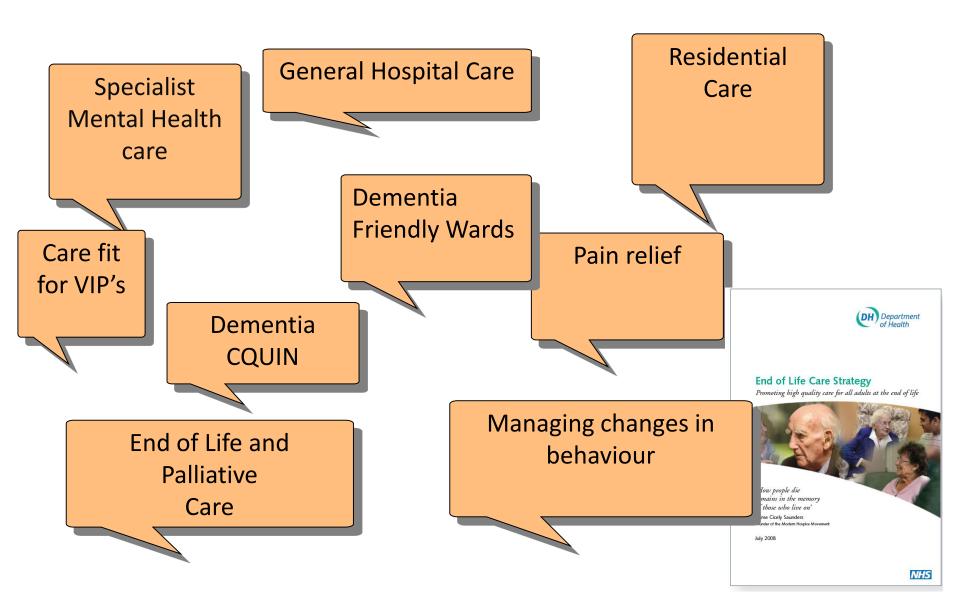


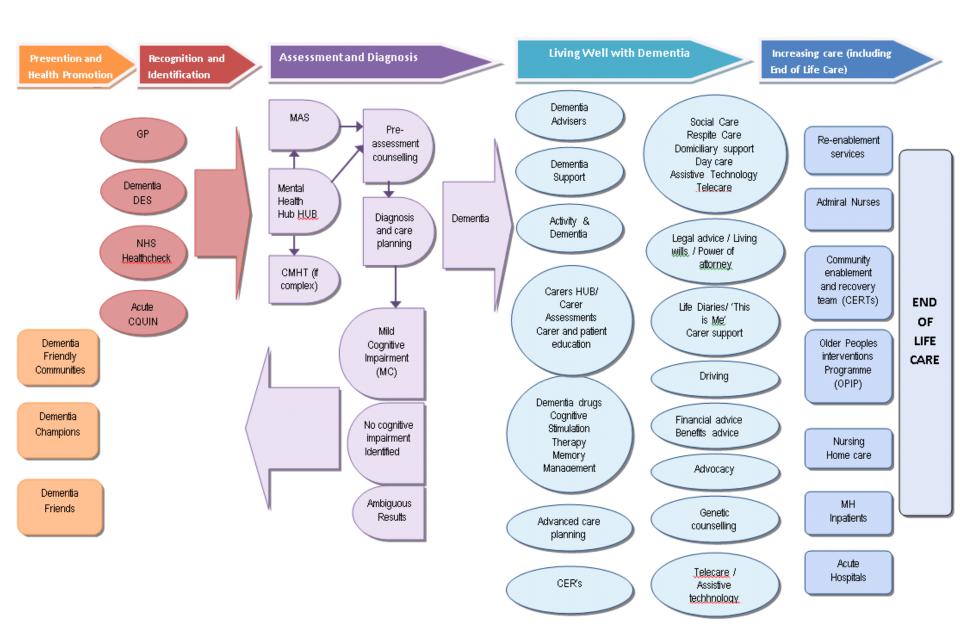
Increasing care

- Ensure hospitals are 'dementia friendly'
- Support and training for workforce
- Inclusive access to intermediate care and other reablement services
- Reduce delays in discharges
- Help for families in managing challenging behaviour
- Support for care homes in managing people with dementia
- Ensure early end of life planning in place
- Increase access for people with dementia to palliative care



Increasing Care (Including End of Life)





The Way Forward

We know from the experience of other areas that:

- By providing support earlier to people who have a higher risk of the disease we can potentially delay the onset of the disease
- By providing the community support and community services that people with dementia want and need we can improve the quality of their life whilst reducing emergency hospital admissions and premature admission to care homes and deliver better services in a more cost effective way
- By supporting the families and carers of people with dementia we can help people to remain independent and at home for longer

- Birmingham Better Care -Transformation in Health and Social Care
- Professionals in health and social care work together across the entire care journey
- Support for emerging models of Primary Care
- People are discharged from hospital earlier with coordinated packages of care