

Health and Well-Being Board



Report subject	Update on the Dementia Services Review
Meeting date	14 October 2021
Status	Public
Executive summary	This report provides an update on the implementation of the Dementia Services Review including reference to current diagnosis rates and the impact of covid and resulting specific actions.
Recommendations	This report is for noting.
Reason for recommendations	To update the Board on the implementation of the review.
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Wards	All
Classification	For information

Background

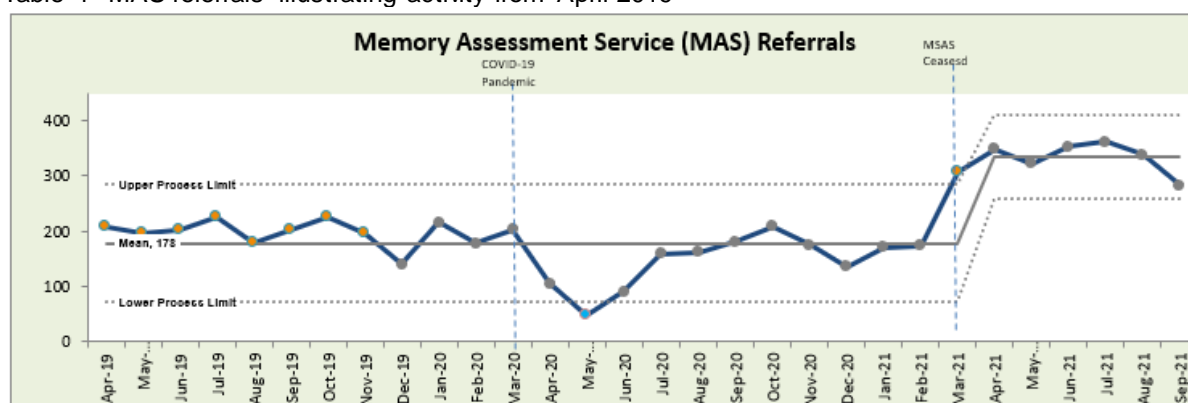
1. The vision of the Dementia Services Review (DSR) is to ensure people living with dementia and their families/carers will achieve similar outcomes, regardless of where they live in Dorset and to be enabled to live well with dementia, no matter what the stage of their illness or where they receive care.
2. The new dementia services were implemented on 1 April 2021. This was at a challenging time whereby COVID-19 lockdown restrictions started to lift and demand on health and social care services intensified. There have been workforce issues attributable to COVID-19 such as self-isolating and higher than average sickness rates impacting on capacity. In addition, the new dementia diagnostic pathway was modelled before COVID-19 and the current demand could not have been predicted.
3. This report provides Health and Wellbeing Board members with an update on the current position with the implementation of the DSR, how COVID-19 has impacted, and the actions taken.

Current Status of Implementation

4. The Memory Assessment Service (MAS), provided by Dorset Healthcare, receives referrals directly from primary care, local acute hospitals, frailty and community teams. GPs can refer people who are worried about their memory directly to the MAS and anyone can contact the service via the new single point of contact telephone number.
5. The service now includes Advanced Nurse Practitioners to carry out diagnosis and neuropsychologists and consultant psychiatrists to manage more complex diagnoses.
6. Initially, despite Dorset HealthCare's best efforts on recruitment it proved difficult to recruit to all of the new posts outlined within the model of care. In the last two months, this has improved with the service managing to successfully recruit to roles and the service is now close to having a full complement of staff in all roles.
7. Since April 2021, the MAS has experienced a significant increase in referrals which represents a higher rate than originally modelled in the Dementia Services Review. This is due to many factors including:
 - Promotion of the new services to primary and secondary care services, local authorities and Voluntary Community and Social Enterprise sector.
 - People more willing to ask for help since the easing of lockdown
 - A decline in physical and mental wellbeing of people due to isolation
 - Families more aware when visiting elderly relatives and noticing changes in cognitive function

8. The increase in referrals and challenges with workforce has resulted in a backlog of screening and assessments. Table 1 highlights the reduction in referrals observed during the lockdown phases of the pandemic and the subsequent spike associated with the easing of Covid restrictions, alongside the implementation of the new model of care which included the cessation of the Memory Support and Advisory service and expanded capacity within the dementia diagnosis service (MAS).
9. The average number of referrals to the MAS have increased from 178 to 344 per month since March 2021¹. Modelling of demand / capacity for the revised diagnostic service was based on a total of 3,200 referrals per year. Based on current numbers, the trajectory is suggesting an overall 29% increase above that rate although it is noted that in the last two months referral rates have started to decline. As of the end of August 2021, 827 people waiting for a 1st assessment. Actions to address this are outlined later in this report.

Table 1- MAS referrals illustrating activity from April 2019



10. The Dementia coordinator service, provided by Help and Care, is becoming embedded into Primary Care Networks and becoming a key member of the primary care multidisciplinary team. The Dementia Coordinator Service operates as one team pan Dorset and works jointly with the Help and Care social care prescriber service.
11. Referrals into the coordinators are received from MAS, Community Mental Health Teams, GPs with people also having the option of self-referral. Many of the memory advisors that transferred from Memory Support and Advisory Service (MSAS) have kept their original mobile telephone numbers enabling a smooth transition for their patients and carers. Referrals from local authority services have been lower and remain an area for further development.

¹ Based on 5 months (21/22 YTD) data

Table 3- referrals to the Dementia coordinators service



12. Cognitive Stimulation Therapy courses were implemented as COVID restrictions started to lift. Referrals are mainly received from the Dementia Coordinators. Initially groups to the east of the county were well attended and the west have followed more recently.
13. The Carers emotional support workshops have been slower to implement due to locating a covid safe venue and for carers feeling confident to attend a face-to-face meeting. The workshop content has been reviewed and a digital version is also in the process of being developed.
14. The Intensive Community Support for Dementia service was previously only available in the east of the county and since April, the service has expanded across the west of the county and is providing intensive support and treatment for up to 6 weeks for those experiencing a crisis.

Current dementia diagnosis rate

15. Dorset has for many years faced challenges in meeting the national diagnosis threshold of 66.7%. Detailed work has been undertaken in recent years to understand this challenge with business intelligence modelling suggesting that the challenge may be related to the methodology used in the national calculator (CFAS II) to determine the prevalence/incidence rates. It is likely that the calculator may be overestimating local rates.
16. Since the onset of Covid 19, Dorset's dementia diagnosis rate has declined with latest data available for August 2021 suggesting a current diagnosis rate of 55.4% (source NHS Digital). This equates to 7620 people diagnosed with dementia over the age of 65 years.

17. Latest monthly statistics for those aged 65+ on the dementia register as at 31/08/2021 are broken down into the two local authorities as follows:

- Dorset CCG: 7,620
- BCP (Bournemouth, Christchurch & Poole): 4,040
- Dorset Council: 3,580

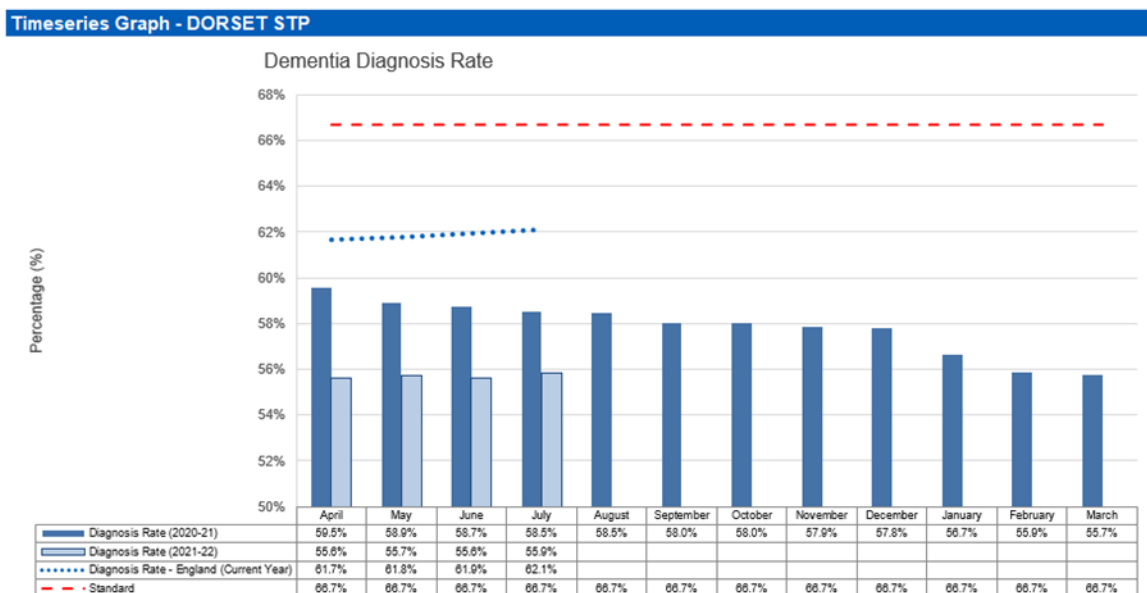
18. It is important to note that there has been an overall decline in diagnosis rates across the country since the beginning of the pandemic. The current national dementia diagnosis rate is estimated to be 62%.

19. This decline in dementia diagnosis rates may correlate to the specific impact of the pandemic upon those with a dementia diagnosis with data suggesting a disproportionate number of deaths within this population.

20. Further work and analysis are required to fully understand this impact how that may affect local dementia diagnosis rates.

21. Table 4 illustrates the decline in Dorset dementia diagnosis rates from April 2020 to July 2021. The local rate appears to be tracking the national rate of decline over the past few months.

Table 4- Dorset Dementia Diagnosis rates in comparison to the national target of 66.7%



Current Developments & Interventions

22. NHS England have made dedicated non-recurrent funding for Dementia services available to all health systems across the country to support the response and

recovery from Covid. The local system considered how best to utilise these funds and agreed to focus on addressing the backlog of referrals and waiting times in the Memory Assessment Service by temporarily increasing capacity within the service.

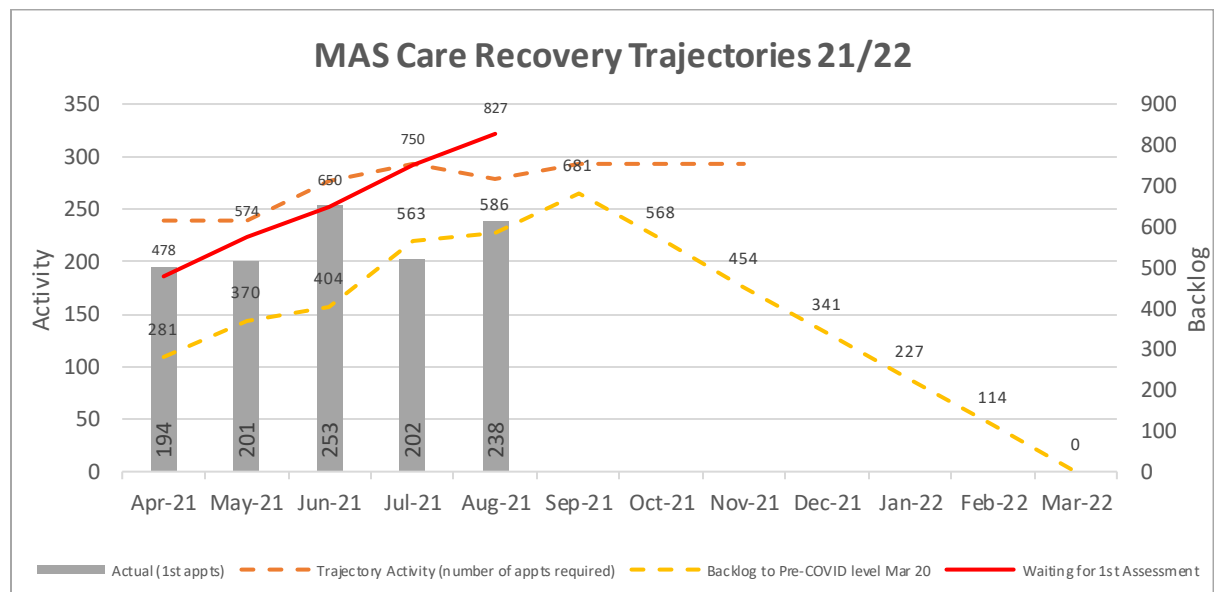
23. Recruiting temporary workforce has been challenging due to limited availability of agency staff and ongoing issues with self-isolation and sickness. However, MAS have been successful in recruiting the following temporary posts.

- Two band 6 nurses to support the triage function and assessment process
- Receptionist to manage single point of contact calls
- Locum medic to carry out diagnosis
- 4 assistant psychologists to support diagnosis
- Limited number of agency staff and bank staff

24. Agency and bank staff are also used whenever available

25. The objective of this additional capacity in the workforce is aimed at increasing the number of assessments offered and reducing current waiting times. This is also likely to increase the dementia diagnosis rates in the long term.

26. A trajectory based on this additional capacity is outlined below:



27. All people referred to the service are responded to by the MAS. This includes sharing details of avenues of interim support whilst they await a diagnosis appointment. These include

- Adult social care in Poole, Bournemouth and Christchurch and Dorset
- Connection phone service

- Dementia UK
- Alzheimer's Society
- Next Steps website offering information on support on what to do whilst waiting for an assessment. www.nextsteps.org.uk

Post Diagnostic support

28. The MAS ensure anyone who receives a diagnosis of dementia is referred to the Dementia Coordinator service. Over 1000 referrals have been received by the service since its implementation in April 2021. The Dementia Coordinator role supports the person and their carer from diagnosis through to the end of life stage by offering post diagnosis support, advice, guidance, information and signposting. The coordinator ensures a care plan is in place and reviewed annually.
29. A young onset dementia co-ordinator is in post to specifically to support people diagnosed with dementia at an earlier age and coordinators are starting to work more closely with care homes particularly to support carers whose family member has recently been moved to a care home.
30. The coordinators are becoming established within Primary Care Networks to support people with dementia and their carers in the community. Links are also being made with key partners such as the acute hospitals, adult social care teams, frailty teams and voluntary organisations.
31. A Memory Roadshow, provided by the Dementia Coordinator service, is being planned for winter 2021 and will incorporate activities to officially launch the new Dementia Service care pathway. The service is currently exploring virtual options as well as a face-to-face event with all agencies attending.
32. Cognitive Stimulation Therapy (CST) Courses have become well established in the east and west of the county with over 200 participants completing the first cohort. More promotion is needed in the north of the county where uptake is less. Links have been made with social care services, care homes and Primary care Networks.
33. The first Carers emotional support workshop started in September 2021 at a venue in Ferndown. The MAS are exploring a virtual online package for carers as an alternative to face to face. Neuropsychologists within MAS have reviewed the programme to ensure that emotional support is integrated throughout.
34. The connection telephone helpline is in place to support people diagnosed with dementia and their carers experiencing a crisis and enabling a point of access to gain help from other appropriate services.

35. The Living with Memory Loss and Dementia in Dorset directory is due to be revised as part of the implementation of the new model of care. The directory is recognised as a valuable information resource to many carers and health and social care professionals and work is underway to update the existing version. The document will be produced in both electronic or printed media for people to access.

Evaluation plan

36. The plan for evaluating the new model of care for dementia services will be coproduced with stakeholders involved in the DSR. This will build on the logic model developed as part of the DSR business case.

37. The evaluation will be framed around the agreed outcomes identified as part of the DSR - improving the quality and effectiveness of dementia services for people with memory loss, improving the dementia diagnosis pathway and post diagnostic care, providing support to family carers, and increasing the Dementia Diagnosis rate in Dorset. Current planning is for the evaluation to be completed 12 months post implementation. Key metrics will be monitored in the interim.

Conclusion

38. The implementation of the DSR has taken place under challenging circumstances due to the pandemic. Services have had to adapt to deliver the required outcomes of the DSR by using new technologies and ways of providing services to deliver consultations and post diagnostic support.

39. Referrals to the MAS have been extraordinarily high which was not predicted or planned and is likely to be connected to the impact of the Covid pandemic.

40. System partners including health and social care continue to work in partnership to identify opportunities and manage emerging challenges related to provision of care and support for people with dementia.

Appendices

Appendix 1

Memory Assessment Service information leaflet

Background papers

Dementia Services Review Full Business Case