

# Health and Adult Social Care Overview and Scrutiny Committee

## 15 October 2024

## **Dementia update**

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### Summary

This report provides information on population statistics, the current dementia diagnosis rate in Medway and development plans that are being undertaken to support the achievement of the national directive to achieve 66.6% diagnosis rate of the predicted prevalence.

The report also provides information on the Ageing Well dementia transformation plan to develop community-based memory assessment services working in collaboration with KMPT specialist memory assessment services.

#### 1. Recommendations

1.1 The Committee is requested to note the contents of the report, and that in August 2024 Medway achieved a significant improvement in the dementia diagnosis rate to 61.4%.

## 2. Budget and policy framework

2.1 Under the Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway. In carrying out health scrutiny a local authority must invite interested parties to comment and take account of any relevant information available to it, and in particular, relevant information provided to it by a local Healthwatch. The Council has delegated responsibility for discharging this function to this Committee and to the Children and Young People Overview and Scrutiny Committee as set out in the Council's Constitution.

## 3. Background

3.1 Kent and Medway population is 1.8 million, of which 18% are aged over 65 and the dementia prevalence is estimated at c25k people as of July 2023. With an ageing population, improved awareness of dementia and the arrival of new medication to slow cognitive decline, this is forecasted to grow:

	2019	2020	2025	2030	% growth
Medway	3170	3270	3910	4640	46.2%
Kent	23,250	23,940	28,320	33.400	43.7%

Dementia - all people	2020	2025	2030	2035	2040
People aged 65-69 predicted to have	207	227	257	257	237
dementia					
People aged 70-74 predicted to have	390	341	378	427	433
dementia					
People aged 75-79 predicted to have	521	660	587	648	743
dementia					
People aged 80-84 predicted to have	666	742	941	852	963
dementia					
People aged 85-89 predicted to have	600	686	792	1,009	933
dementia					
People aged 90 and over predicted to have	601	625	684	837	1,108
dementia					
Total population aged 65 and over	2,985	3,281	3,638	4,029	4,417
predicted to have dementia					

Fig 1 Dementia growth projection Medway

3.2 People are living longer in Kent and Medway. In future we will have an older age profile of people with dementia (move from 80s to 90s)

## 4. Diagnosis rates

- 4.1 The national ambition is to ultimately achieve two thirds diagnosis of our predicted prevalence. In agreement with NHSE our ambition is to achieve 63% by March 2025 with continued increase to achieve 66.7% over time.
- 4.2 Throughout 2022/23 the Kent & Medway dementia diagnosis rate plateaued at 57%. In June 2023, Medway and Swale dementia diagnosis rate was 57.8.

НСР	DGS_HCP	DGS_HCP2	EK_HCP	EK_HCP3	MS_HCP	MS_HCP4	WK_HCP	WK_HCP5
Date	DDR%	Est Prev	DDR%	Est Prev	DDR%	Est Prev	DDR%	Est Prev
2024-07	63.0%	3175	59.8%	10772	58.5%	4627	60.2%	7062
2024-06	63.3%	3171	59.6%	10745	58.6%	4606	60.1%	7031
2024-05	63.8%	3036	59.5%	10247	57.7%	4594	60.1%	6623
2024-04	62.9%	3178	59.1%	10662	57.8%	4580	59.3%	6976
2024-03	61.9%	3143	59.2%	10638	57.8%	4568	59.5%	6582
2024-02	61.8%	3139	58.9%	10606	57.7%	4555	59.1%	6942
2024-01	62.7%	3014	59.0%	10597	57.7%	4548	58.9%	6596
2023-12	62.2%	3132	60.2%	10601	58.3%	4551	59.2%	6941
2023-11	62.3%	3127	59.3%	10587	58.1%	4548	59.9%	6937
2023-10	61.5%	3128	58.9%	10464	58.0%	4548	59.6%	6920
2023-09	61.1%	3126	59.0%	10447	58.3%	4537	59.8%	6900
2023-08	62.0%	2994	58.3%	10532	58.0%	4527	59.9%	6878
2023-07	62.0%	2985	58.0%	10503	57.9%	4518	59.8%	6861
2023-06	61.3%	3095	57.4%	10464	57.8%	4496	59.9%	6691

- 4.3 As a result of the static situation with the dementia diagnosis rates work on a transformation programme for the interrogation of the diagnostic pathway commenced. Findings identified that demand for the KMPT Memory Assessment Service outweighed capacity with referrals increasing by 30% in 2022/23 compared to the previous year.
- 4.4 In 2023, to increase diagnostic capacity, nine GPs with enhanced roles (GPwERs) in dementia were accredited and work within KMPT to support diagnosis. Three of the GPwERs are based in Medway.
- 5. Post diagnostic support
- 5.1 The Joint declaration on post diagnostic dementia care and support signed by Department of Health, NHS England, Adult Social Services and Royal College of General Practitioners aims to ensure:
  - the views of people living with the effects of dementia and their families and carers are taken fully into account when determining the nature of post-diagnostic services offered, with high quality personalised care provided in line with individual needs and preferences
  - access to holistic, integrated and effective post-diagnostic support is available for all, which takes into account age, ethnicity, diagnosis and comorbidities
  - Partners across government, health, social care, the third sector and all other relevant agencies cooperate and collaborate to improve outcomes for people with dementia
- 5.2 Post diagnostic support is an essential component of a dementia pathway. Being diagnosed with dementia is the start of a life changing journey and that's why it's important that we reach our ambition of increasing the diagnosis of dementia and put in place the support they need.
- 5.3 Post diagnostic support builds on the resilience of people with dementia and their carers to enable them to live well and independently in the community for as long as possible.
- 5.4 Significant engagement with communities and providers has been undertaken to shape the future of services for people with dementia and carers. Workshops have been held across the county to ensure people with lived experience and the market were involved and have influence over the development of the service specifications.
- 5.5 Throughout the consultation phase, people with dementia told us that loneliness and isolation are big issues and that they would like to be able to participate in a wider range of social activities such as sports, learning new skills, companionship, friendships and other forms of social interaction. Lunch clubs, coffee mornings and short excursions were frequently mentioned as

being important and the need for a range of different activities to support people with dementia at a younger age.

- 5.6 Analysis of other engagement events identified the following issues:
  - Lack of service consistency and the existence of gaps between services.
  - Current services disjointed and fragmented and people do not know who to contact when things change.
  - Poor communication between services.
  - After diagnosis there is no support and eventually a crisis occurs.
  - They need consistent support throughout their journey with dementia.
  - Service not equally distributed across the county.
  - There needs to be better support in GP practices for people with dementia.

"As a full time carer I need to be involved in decisions as I know how dementia affects them".

because we don't know who

to contact or where to go."

- Dementia Champions should be introduced in all GP practices who can advise staff on how to meet the different needs of people with dementia and their carers.
- Lack of adequate support and information to help carers.
- People do not know what is available to help them.
- Carers feel isolated and unsupported.

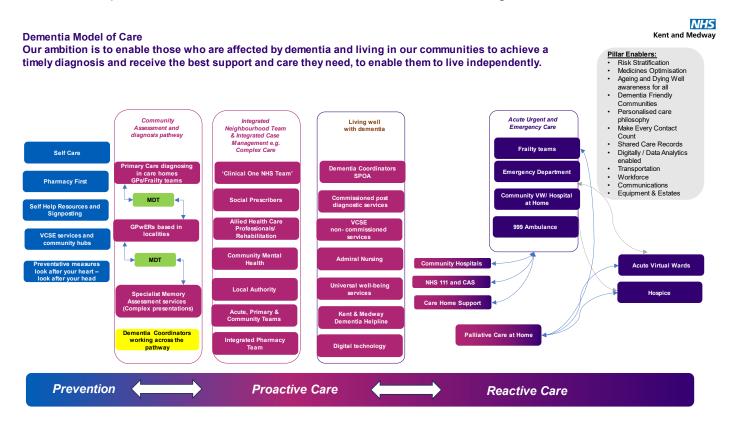
Information is vital to everything right from the start to the end including how it is communicated.

- 5.7 Whilst there are a range of community groups, memory cafes and day centres across Kent and Medway ongoing support and joined up services for people living with dementia and their carers was limited. Within the 'view seeking' stage there was a clear emphasis around a lack of post diagnostic support especially following a diagnosis. Many felt having a supportive person available along the whole journey, with accessible and responsive services could have possibly prevented a crisis.
- 5.8 Subsequently, through a joint procurement process with KCC and Medway local authority, 42 Dementia Coordinators were introduced, funded by health, and aligned to all primary care networks. Dementia Coordinators take on the role of primary contact and coordinate wrap around services to support the person with dementia and their carer.

#### **Medway Post Diagnostic offer**

- 5.9 Medway post diagnosis support services are mostly locally based offers by community groups.
- 5.10 The wellbeing navigation service offers free and impartial information, advice, and guidance to help residents get the assistance needed. They carry out holistic assessments with individuals, their families and carers, helping them to find the right opportunities locally:
- 5.11 Community Navigators can help with:
  - Identifying and planning the support people need or want
  - Information about support in the local community
  - Help managing money and benefits
  - Support to live safely in their own home
  - Emotional and practical support
  - Maintaining and adapting homes to meet needs
- 5.12 Some examples of the activities the wellbeing navigation service directs people to are:
  - Dementia cafes: This includes but not limited to: Chatty Café in Chatham, Age UK Dementia Café in Parkwood, Walderslade (the net community hub) have dementia cafes, craft sessions and morning clubs.
  - wHoo Cares is a community based organisation that supports their community on the peninsula; offering befriending and reducing social isolation groups.
  - Bright Shadows have a Zest group at the sunlight café that which look to enrich the lives of people that live with dementia through creative arts
  - Rochester Cathedral has introduced the 'Anna Chaplains' will work with elderly people and people with dementia in the community around the diocese. This chaplaincy helps the Dean and Chapter to work towards the cathedral being recognised as a Dementia Friendly venue.
  - There are 2 other churches in Medway that deliver dementia friendly services, dementia cafes and Singing for the Memory sessions.
- 5.13 Medway Council also organise dementia-friendly sports sessions that take place on every first and third Monday of the month. There are different activities each week including gym sessions, table tennis and beginners running. Each session is run by a Dementia Friend and participants can enjoy quiet time in the café afterwards.
- 6. Pathway transformation programme 2024/25
- 6.1 The dementia diagnosis rate remains a priority for the ICB and during the ICB restructure the portfolio for dementia was transferred to the Ageing and Dying Well programme. This provided a renewed emphasis on managing dementia

- holistically in frailty pathways and scrutiny of the assessment and diagnostic pathway to identify opportunities to improve the diagnostic rate to meet the needs of our increasing population.
- 6.2 As a system we are seeking to drive through changes across the entire dementia pathway not only to address the inequities in service provision and low dementia diagnosis rate across Kent and Medway but also to establish a revised, robust co-produced pathway of care that will deliver a sustainable solution to our rising population needs.
- 6.3 We are working across the health and care system and people with lived experience on four major programme areas covering:
  - Prevention
  - Assessment and diagnosis to increase diagnostic capacity
  - Reactive care crisis in the community, and support for Care Homes
  - Proactive care Post diagnostic support and end of life
- 6.4 To inform transformation within the four programme areas, a system wide workshop was held in July 2024. The outputs from the workshop have been collated and task groups established to cover the four programmes and expedite the transformation work. People with lived experience participate in all workstreams. The workshop findings will be shared at the next Dementia Strategic Oversight Group to which Medway participates.
- 6.5 Outcomes from the workshop have enabled us to develop a draft model of care. Engagement exercises involving key stakeholders and people with lived experience of dementia will be carried out over the coming weeks.



#### A focus on diagnostic capacity

- 6.6 Obtaining a diagnosis is important; for the patient and family/carers it can help to explain symptoms they have been experiencing, they know what to expect so that they can consider future mental capacity and make plans early and to live independently for as long as possible; for the system providing the appropriate treatment and putting support in place to slow deterioration can help to prevent unnecessary hospital admissions.
- 6.7 Most dementia diagnoses are given in KMPT's Memory Assessment Service supported by 9 GPwERs. The number of referrals to memory assessment services continues to rise and a waiting list of 2500 patients had accrued.
- 6.8 The waiting list impacts the recovery of the dementia diagnosis rate (DDR) which is a system priority. Therefore, concentrated work has been carried out in Medway between Consultant Psychiatrists, GPwERs and Medway Community Health. This showed an improvement in the number of diagnoses recorded and % within 6 weeks. 333 diagnoses were recorded in June, compared to an average of 226 in the previous 6 months. Wait times for diagnosis was on average 20.1 weeks, this is an improvement on the previous month at 22.3 weeks. The increase in numbers of diagnosis and % of which that were in 6 weeks was driven by Medway Community Mental Health Service for Older People (CMHSOP), following a focussed piece of work which is to be adopted within other teams. The latest dementia diagnosis figures (August 2024) indicate that Medway have now achieved a diagnosis rate of 61.4%.

#### Medway dementia diagnosis rate

Aug-24	Local Authority	Estimated Prevalence	Recorded on dementia registers	Diagnosis rate	Gap to achieve 63% DDR	Gap to achieve 66.7% DDR
	Medway	3313	2036	61.40%	51	174

#### Key deliverables for the dementia programme in 2024/25

6.9 Modelling indicates that to sustain 67.7%, 110 dementia diagnosis per week are required to address flow. A proposed Community assessment and diagnostic pathway is under development where GPwERs will be based in community settings assessing and diagnosing patients within local facilities. The services will adopt an MDT approach working in collaboration with the local KMPT memory assessment service and is seen as an essential component of the strategy to increase diagnostic capacity.

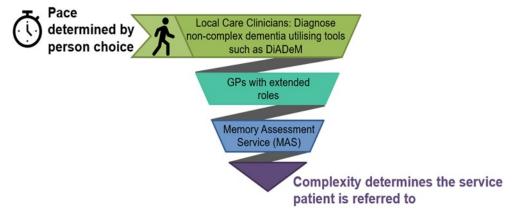


Fig 3. Proposed community model.

- 6.10 To achieve the community pathway, we will upskill GPs, Frailty Nurses and Additional Roles Reimbursement Scheme (ARRS) roles to carry out assessments in care homes utilising tools such as Diadem and 6-CIT (six item Cognitive Impairment Test). Virtual multidisciplinary teams (MDTs) with mental health clinicians will be established to discuss and confirm diagnosis.
- 6.11 Crisis services are not consistent, and we are intending to establish crisis services across Kent and Medway that will respond appropriately to people with dementia.
- 6.12 Consultation on the proposed new model will be finalised by the end of December 2024. A procurement plan will be established with the intention to have the community pathway in place by the end of 2025.
- 6.13 In the meantime, we will continue to work with Medway Health and Care Partnership to agree initiatives to ensure a continuous improvement in the dementia diagnosis rate with the aim to achieve 63% by March 2025. This engagement will also include plans to increase the number of care plans for people with a confirmed diagnosis of dementia and a move to advanced care planning in the early stages of dementia.
- 6.14 Concurrently, we will continue to work with all system partners on the development of the pathway, ensuring the patients voice is heard and an integrated pathway between health, social care and the voluntary sector is achieved.

## 7. Sustainability

- Increase diagnostic abilities via digital tools.
- Ease of access via digital tools to support disadvantaged patients.
- Local clinics reduce travel needs and reduce carbon emissions
- Equitable care closer to home.
- Service sustainability reduces pressure on staff and improves wellbeing.

- 8. Risk management
- 8.1 The development of the community pathway will have a robust project plan and the associated risk management will be established to oversee the process.
- 9. Consultation
- 9.1. An event was held in July 2024 involving health, social care, voluntary sector, people with dementia and carers. This event identified barriers, gaps in service pathways and proposals for improvement. Joint engagement events within health and care partnership localities will be carried out to ensure patient and public engagement prior to procurement.
- 10. Legal and finance implications
- 10.1 There are no direct implications for the Council arising from this report. However, there may be some indirect financial impact as an increase in the rate of diagnosis could lead to an increase in demand for commissioned services.

#### Lead officer contact

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**Appendices** 

None

Background papers

None