Appendix 1

Dementia Action Plan

- Once approved by the HWBB the lead officer for each action will develop a more thorough plan for delivery.
- Funds for activities, outside of current work programmes and contracts, are being considered for funding as part of the BCF.

| Recommendation | Proposed actions | Partner lead/officer lead | Timeline | People who need to be involved |
|--|---|---|---|---|
| Personalisation and ma | rket development | | I | |
| Enabling people with dementia to stay in their own home rather than automatically placing them into a care home where the cost is the same. Review support offer for people who do not meet the critical or substantial need threshold to ensure that a wide range of signposting and options are being provided Conduct further work to see how personal budgets can be promoted and taken up amongst people with dementia and their carers. | As part of the boroughs personalisation and market development work – to review the inclusion of dementia | Mark Tyson (Integration and Commissioning, LBBD) | November 2014 for position (ongoing work) | Tudur Williams (Social Care, LBBD) Helen Oliver (Care City - Economic Regeneration Development Centre) |

| Support for carers | | | | |
|---|---|------------------------|------------------|------------------------------------|
| Offer a range of more | | | | |
| appropriate respite and support options for | To be included in the development of the new Joint Carer's Strategy | David Millen (LBBD) | October 2015 | Carer's Strategy Steering Group |
| people with dementia | recommendations – building on key | | | (which includes |
| (including early onset) | messages to date re carers and dementia | | | Carer's of Barking |
| and their carers | from consultation phase on carers work | | | and Dagenham) |
| exploring non traditional | and informing key service and support | | | |
| models and | requirements for the coming financial year. | | | Alzheimer's Society |
| approaches, better use | | | | (Carer Information |
| of Extra Care, reducing | | | | and Support |
| barriers, voluntary input | | | | Programme) |
| and new funding | | | | |
| streams. | | | | |
| Diagnosis and assessm | ent | | | |
| Implementing the Dementia Friendly | Dementia Friendly month promotional | Zoë Garbett | PHE campaign | (As a project group) |
| Communities | activity | (Public Health, | completed May | (As a project group) |
| programme (Alzheimer's | | London | 2014 | Alzheimer's Society |
| Society Guidance) | Dementia Friendly task and finish group to | Borough of | | |
| which includes 10 key | meet to review the Alzheimer's Society | Barking and | Task and Finish | North East London |
| areas such as | Guidance to ensure that this links and | Dagenham, | Group to meet by | NHS Foundation |
| challenging stigma, | underpins what we do locally. | LBBD) | December 2015 | Trust (NELFT) |
| access to services, | | | with | Memory Service |
| asset and community | | | recommendations | |
| based solutions. This | | | in January 2015 | Monica Needs |
| may also include the | | | with a six month | (Integration and |
| setup of an Alzheimer's | | | action plan. | Commissioning, |
| Café. | | | | LBBD) |
| This would involve | | | | Lorraine Goldberg |
| liaising with the existing | | | | (Carer's of Barking |
| voluntary and | | | | and Dagenham) |

| community sector and memory service to see what is already in place and what additional needs to be put in place. | | | | North East London Local Pharmaceutical Committee representative Council for Voluntary Services representative Patient Engagement |
|---|--|--|--|--|
| | | | | Ellen Doran (Public Health Communications Officer, LBBD) |
| Using the information presented in the report, outline a dementia pathway in a format that | Develop map of current services including community and voluntary services Test current map with clinicians and service users to agree map and identify | Gemma Hughes/ Sarah D'Souza (Clinical | Initial service map development October 2014 | Monga Mafu (Clinical Commissioning) |
| can be utilised by professionals, carers and residents. High quality information | issues. Use map to promote awareness with clinicians and wider community. | Commissioning Group, CCG) | Complete changes to map by March 2015 | Dr Kumar (CCG clinical lead) Barking Havering |
| materials could be produced including generic and specific/targeted advice | Review primary care role in dementia pathway in light of parity of esteem and link with physical health. | | | Redbridge University Hospitals NHS Trust representative |
| as well as a rolling programme of campaigns. Promotion work needs to build on | | | | North East London Foundation Trust representative - |

| the good work of the Memory Service's (Memory Matters Roadshows) and the Alzheimer's Society. | | | | Memory Service as part of the Memory Services National Accreditation Programme (MSNAP) review |
|--|--|---|---|--|
| | Map availability of service user information – building on work by Alzheimer Society locally to date. This will inform development of pathway and development of further information/promotional materials. | Alzheimer's Society | October 2014 | Alzheimer's Society |
| Review GP contact with older people Pursue contact where this is absent or refused Target and engage at risk, isolated older people Considering risk factors and other 'triggers' for making contact such as building triggers into GP record systems | Develop locality based dementia improvement plan building on Integrated Case Management process and current risk profiling, linking to mental health social workers and link workers resource and using the unplanned admissions enhanced service to support implementation. | Gemma Hughes/ Sarah D'Souza (CCG) | Develop plan October 2014 Implement changes from January 2015 | Mental health outside hospital BCF project group: Dr Kumar (CCG clinical lead) Monga Mafu (CCG) North East London NHS Foundation Trust (NELFT) Tudur Williams (LBBD Social Care) |
| Address under recording of dementia in primary care – • Awareness raising across all | Undertake programme of Dementia awareness raising for GPs to include review of current dementia diagnosis rates, GP engagement and awareness raising at Protected Time sessions (PTI). | Gemma Hughes/ Sarah D'Souza (CCG) | Data validation – September 2014 Training and development plan | Dr Kanika Rai (Clinical Champion) Dr Kumar (Clinical Lead MH) |

| GP practices to standardise care Addressing how dementia is recorded | Resolve data validation between Primary and Community services around dementia diagnosis to increase number of people identified in primary care with dementia. | | October 2014 Implementation of plan complete March 2015 | Ross Kenny (Public Health, LBBD) Monga Mafu (CCG) |
|--|--|---|---|--|
| Early stages of dementi | | | | |
| Ensure that decisions and advanced planning related to end of life care are raised with dementia patients by the appropriate range of professionals and agencies | Build dementia specific elements into the advanced care planning in end of life care programmes/work stream Incorporate dementia specific discussion into end of life care (EOLC) engagement meetings (Dying Matters) with professionals. That this informs the EoLC action plan to be considered by the HWBB in October 2014 Link the outcome of above work to service mapping and promotional material development above. | Gemma Hughes/ Sarah D'Souza (CCG) | EOLC Engagement events – August 2014 Subject to agreement by the HWBB to implement the actions within the EoLC action plan with timescales applied | David Millen (LBBD) Ruth Crossley - End of Life care facilitator (NELFT) Alzheimer's Society |
| Middle and later stages | | 1 | 1 | 1 |
| In residential homes consider: Family carer assisted handover scheme to support the transition into care homes. Increasing one- to-one support in care homes to avoid unnecessary hospital admissions. | Commissioners to incorporate into contractual mechanisms for residential homes. Review best practice and share across all residential care homes. Undertake review looking at costs and benefits implications for patients of 1:1 support in care homes particularly in light of other arrangements in place to address unplanned admissions from care homes. | Mark Tyson (Integration and Commissioning, LBBD) | Plan – October 2015 Implementation complete – March 2016 | Monga Mafu (CCG) Alzheimer's Society |

| | Linkwith Col Continu ulan and group and | | | |
|---------------------------------------|---|------------------|------------------|--------------------|
| Increasing rehabilitation so that | Link with EoLC action plan and proposals to incentivise improved support to at risk | | | |
| | groups This has financial implications and | | | |
| people leaving | | | | |
| hospitals avoid | will need to be subject to business case | | | |
| being placed in | process. | | | |
| residential or | | | | |
| nursing homes | Review and improve the raft of services in | | | |
| earlier than | place to support effective discharge to | | | |
| necessary. | ensure these cater effectively for people | | | |
| Provision of | with dementia – including intermediate | | | |
| residential facilities | care services, targeted support packages | | | |
| for younger people | and Joint Assessment Discharge (JAD) | | | |
| with dementia which | review training and development and | | | |
| can be specialist, | required service performance outcomes | | | |
| age appropriate and | | | | |
| centres of | Review current offer and market for | | | |
| excellence. | younger people with dementia such as | | | |
| Increase levels | personal budgets and other service | | | |
| of stimulations and | arrangements | | | |
| activities for | | | | |
| residents | | | | |
| Living well with dement | ia | | | |
| Making life history and | Review training offer for all professionals | Mark Tyson | Training offer | Helen Oliver (Care |
| reminiscence | working with people with a diagnosis of | (Integration and | developed from – | City) |
| techniques core skills, | dementia with a particular focus on | Commissioning) | January 2015 | Oity) |
| continue the roll out of | residential care homes. | Commissioning) | | |
| 'This Is Me'. | | | Implementation – | |
| | Consider any contractual mechanisms | | June 2015 | |
| | needed to ensure effective implementation | | | |
| | in provider services. | | | |
| | | | | |
| | Review market offer for life history and | | | |
| | reminiscence groups. | | | |
| | | | | |

| Consider how activities and daytrips, particularly those linked to music and arts, can be boosted in the borough by working with a range of partners. | Review market offer and accessibility for people with dementia. Use Older People's Week as an engagement opportunity. | Mark Tyson (Integration and Commissioning) | June 2015 | Zoë Garbett (Public Health, LBBD) Monica Needs (Integration and Commissioning, LBBD) Voluntary sector providers (Carer's of Barking and Dagenham, Alzheimer's Society) |
|---|---|--|---|--|
| Skills and capacity | 1 | | 1 | |
| Review training and skills programmes in different settings especially - Up-skilling frontline staff to reduce reliance on specialist services to ensure that mainstream services have the skills and capacity to identify and care for people with dementia Settings with high staff turnover, monitor how quickly new staff are trained | Commissioner - Ensuring best practice is reflected in contracts and monitored (KPIs) Work with all providers to understand and ensure reduction in antipsychotic medication – currently a KPI for NELFT but further work needed to understand prescribing in homes and other care settings Providers Providers to review staff induction and training, improvement plan in NELFT and BHRUT focussing on induction, training and refreshers. Providers to undertake training needs | Gemma Hughes/ Sarah D'Souza (CCG) | September 2014 –March 2015 and September 2015 – March 2016 (commissioning and contract negotiations) Providers – January 2015 (end of quarter 3) | Mark Tyson (Integration and Commissioning) NELFT BHRUT Residential Care Homes Helen Oliver (Care City - Education and Skills Escalator and Frailty Academy) Alzhiemer's Society (Awareness raising |

| and how frequently refresher courses are completed Consider increasing the capacity of – Hospital specialist dementia liaison teams to ensure they can consistently attend to cases which may be deemed low risk. Admiral Nurses. Memory service; to allow an increase in | assessment Business cases to be developed by providers including cost and benefit analysis. Planning for new patterns of demand. | Gemma Hughes/ Sarah D'Souza (CCG) | Business cases by November 2014 Commissioning position January 2015 | sessions and training offer) Barking Havering Redbridge University Hospitals NHS Trust North East London NHS Foundation Trust (NELFT) Memory Service as part of the Memory |
|---|--|---|--|--|
| allow an increase in its training and public awareness raising work. | | | | Services National Accreditation Programme (MSNAP) review |
| Integration and joined-u | p working | | I | |
| Factor voluntary and community sector organisations into the integration agenda as a number of organisations play a key role in service provision in this area. | Included in other actions | N/A | N/A | N/A |
| Consider crisis/rapid response service. | Community Treatment Team already in place – review management of dementia within this service and further steps required | Gemma Hughes/ Sarah D'Souza (CCG) | September 2014 for position | Integrated Care Operational Group |