



*South West Dementia
Conference Report
20 October 2009*

*Living Well with Dementia:
The South West Way*

Organised by:



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1 Introduction and Context

This report summarises the key messages and feedback from the South West Dementia Conference, held on 20 October 2009 at The Shrubbery, Ilminster, Somerset.

The event provided an opportunity for stakeholders from a wide range of agencies and background from the South West, to work together towards improving the experience of people with dementia and their carers, across health services, local authorities and the voluntary sector.

1.1 Conference Aims and Objectives

The aims of the conference were to allow stakeholders to:

- hear the region-wide themes from the recent peer reviews of dementia services in the South West
- understand the development priorities proposed by the South West Regional Dementia Strategy Group to support local leadership and action plans, and have an opportunity to discuss and shape the detail around these priority themes
- hear about the components of a regional implementation support programme for dementia and what part stakeholders can play in this
- use key learning to inform and strengthen local action plans for dementia services in individual health and social care communities

1.2 Stakeholder Scope



Seventy-seven stakeholders attended, representing the statutory and voluntary sectors across the South West. A number of carers attended either on behalf of a carer organisation, or as individuals.

The conference Chair, John Major, is himself a carer.

2 Keynote Speeches

2.1 Taking the National Dementia Strategy forward in the South West

Lynne Dean, Deputy Regional Director, Department of Health South West, outlined the Department of Health implementation process and structure; and the progress made in the South West on implementing the strategy.

The South West has demonstrated strong engagement with the National Dementia Strategy. A number of key milestones have been achieved, to include creating a Partnership for Change; and carrying out a comprehensive review of existing services, to be published in a review report and local action plans.

There were challenges ahead: engaging leadership in supporting dementia services as a priority; and integrating the Dementia Strategy into other local activity and joint delivery plans.

2.2 Key Themes Emerging from the SW Review of Dementia Services

Lezli Boswell, SW Dementia Review Project Lead and Chief Executive, Cornwall Partnership NHS Trust, spoke about the South West Review of Dementia Services.

She described the peer review process across all 14 South West Health and Social Care communities in summer 2009, and the key themes arising from the reviews. Whilst dementia is generally seen as a whole system agenda, local support and engagement is variable. The key challenge was that the pace of the change programme required anticipates the rising demand.

A full report on the overall findings from the reviews is due for formal approval shortly, and will then be sent to all conference delegates.

2.3 South West Development Programme for Dementia

David Francis, Policy Implementation Project Manager for Dementia, Quality and Carers, Department of Health South West, described the South West Regional support programme for dementia, pointing out that “we can’t do it all – we need to prioritise”.

The programme has prioritised selected themes from the National Dementia Strategy whilst ensuring congruence with existing relevant regional programmes, and negotiated targeted support for a small number of communities. The ethos of this initiative is supporting implementation, not performance management.

David concluded his presentation by inviting volunteers to work with the Regional Implementation Support Programme on specific themes of interest to them.

The Regional Implementation Support Programme, once approved, will be circulated to delegates.

3 Priority Themes Workshops

The format of the morning workshops on Priority Themes was a facilitated table-top discussion on four themes.



Issues and priorities identified during this session are summarised below:

3.1 Joint Commissioning

- Commissioning for dementia embedded in wider commissioning across organisations and aligned with pathways
- Pooled/aligned budgets ('joint account')
- Joint investment plan, single procurement process
- Joint measures for performance
- Senior sign-up from the top
- Listening to people with dementia and carers, and to staff at the point of service delivery

3.2 An Informed and Effective Workforce

- Dementia is 'Everybody's business'
- Integrated focus across all, not just specialist services
- Need to differentiate between "training" and "awareness training"
- Joint training and jointly funded training
- 10% of all training to address mental health awareness and needs
- New ways of working – new roles
- Person centred, not task centred care delivery
- Reduced reliance on secondary care
- More generic roles with understanding and recognition of people with dementia
- Strong ethos of personalisation and choice
- Applying principle 'what would I want for me/my family'

3.3 Developing a Dementia Pathway

- Single point of access
- Prompt referrals
- Signposting at each stage of the pathway
- Professionals trusting each other's assessment
- More care in own home with back-up
- Carers have access to emotional and psychological support
- Dementia advisors who co-ordinate care around the individual and carer
- Third sector should be commissioned to provide low intensity, peer group support, dementia advisors, information
- More support, and choice of support in the community

3.4 Good Quality Early Diagnosis and Intervention

- GPs listening
- GPs' role in assessments/role of specialist assessments
- GPs' competency – ability to recognise an early problem
- Good initial support post diagnosis
- Thresholds for referring on
- Immediacy of response (8 weeks wait max)
- Long term practical and emotional support as part of diagnosis ('worst news in life')
- Whole system approach
- Strong public awareness

4 Innovative Practice Workshops



The focus of the afternoon workshops was on innovative practice in five selected themes, with invited speakers to give presentations and lead discussion.

There are examples of innovative practice from across the region, identified during the Review, on the South West Dementia Partnership website at <http://www.southwestdementiapartnership.org.uk/innovative-practice/>

4.1 Workforce Development

Angela Willis, Workforce Commissioning & Partnerships Manager, Gloucestershire County Council, presented the approach and development of the Dementia Training and Education Strategy for Gloucestershire.

The aims of the strategy were:

- To develop a competent workforce
- To deliver a systematic and consistent multi-agency pathway model
- To 'kite mark' training and learning through dementia 'passport'
- To ensure learning is embedded into practice to improve the quality of person centered dementia care

4.2 Voluntary Sector as a Partner in Developing Services

Emma Bird, Commissioning Manager for Older People, NHS Bristol, and Lorna Robertson, Branch Manager – Alzheimer's Society, Bristol, described two dementia demonstrator sites in Bristol, and the good working relationship among the three agencies involved: the PCT, Social Care and Alzheimer's Society.

A challenge for the commissioners has been how to create a level playing field to enable the voluntary sector to compete in the market place.

4.3 General Hospital Care for People with Dementia

Dr Nicholas John, Consultant in Care of the Elderly, Royal United Hospital Bath, led the workshop, highlighting the key issues to be:

- Recognition of dementia (20% of inpatients in an average acute general hospital will have a dementia)
- Majority patients are unknown to mental health services
- Crisis admissions
- Discharge planning, limited options for rehabilitation, intermediate care, step down beds to facilitate discharge home
- Poor risk assessment

Key themes arising from the workshop:

- Value of slow stream rehabilitation in community hospitals ('calmer environment')
- Length of stay – lever to change
- Comprehensive assessment
- Staff education (skill mix, communication, champions)

- Environmental issues – dementia friendly
- Continuity of care
- Patient held records
- Interface with social care

4.4 Support for Carers

David Francis, Policy Implementation Project Manager for Dementia, Quality and Carers, Department of Health South West, led this workshop jointly with Dr Roger Bullock, Clinical Director, Older People, Avon and Wiltshire Partnership NHS Trust.

The following were viewed as priorities for development:

- Importance of recognising and valuing carers' effort
- Patient and carer having control of own pathway (rather than agencies)
- When does a carer become a "carer"?
- Services make best of people's abilities – not concentrate on disabilities
- Commissioning strategies: outcomes for people, coherent, dementia specific framework
- Improve carers' and agencies confidence around dementia
- Need commitment from top down
- Carers' breaks are critical - need to be able to plan in advance and seek help with arranging
- Importance of understanding the dynamics between care giver and person cared for

4.5 Engaging Primary Care in the Dementia Pathway

Dr Paul French, GP and PEC Member, NHS Bournemouth and Poole, led discussion on engaging primary care services in the dementia pathway. He described the key issues as being awareness training/education in primary care; and thresholds for specialist referrals.

Key points arising from this workshop were:

- 1 Designing appropriate early assessment and diagnostic services which are sustainable over time (example of good practice – Gloucestershire primary care partnership with 2gether Trust).
- 2 Cultural shift in primary care – look at dementia like a long term condition, so the key role of primary care is care co-ordination from early problems right through the individual's lifetime.
- 3 Range of methods for engaging GPs and primary care, eg appoint and support GP leads.
- 4 Widen concept of 'primary care' by engaging all players at primary level: social care, pharmacists, practice nurses, domiciliary providers, voluntary and community organisations.

5 Summary of Key Conference Themes

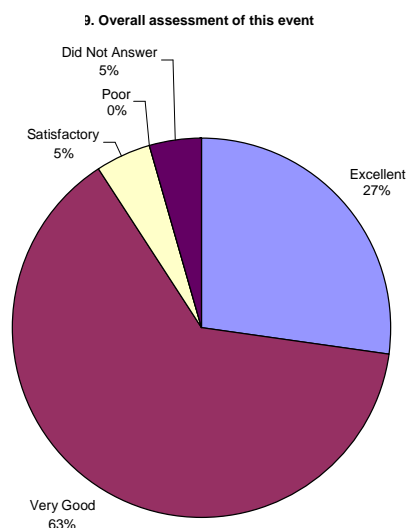
The key themes emerging from the day's discussions were:

- Dementia affects a wide range of services; therefore a joint, whole system approach to commissioning, training and delivering services is essential.
- Support services need to be made available to people with dementia and their carers immediately at the time of diagnosis.
- Implementing the National Dementia Strategy will require significant organisational changes, new ways of working and new roles.
- Service outcomes should be person centred.
- Carers require robust, appropriate and long-term support in recognition of the vital role they play in dementia services.
- There is a major agenda in improving public awareness and knowledge.

5.1 Conference Presentation Slides

This Conference Report and presentations from the morning speakers and afternoon workshops can be downloaded from the South West Dementia Partnership website: <http://www.southwestdementiapartnership.org.uk/review/>

6 Feedback and Evaluation



Stakeholders were asked for their overall assessment of the event. 90% replied that it was either very good or excellent. Examples of typical feedback are below.

Stated primary objectives for attending the event were:

To learn the main conclusions of the dementia review and have the opportunity to discuss these conclusions.

To understand the main themes arising from the review, identify the next steps and future developments.

People who were not satisfied commented that there was:

Little sharing of good practice, much more sharing of same old problem.

Would have been helpful to have summary/overview report.