

NORTH YORKSHIRE COUNTY COUNCIL

Care and Independence Overview and Scrutiny Committee

Statement by the Chairman

23 July 2008

Dementia Strategy

1. Ivan Lewis, the Care Services Minister has announced the National Dementia Strategy and Implementation Plan for England by summer 2008. Taking our lead from the national strategy the Committee is focusing on three key areas:

- i. Improving awareness of dementia by working with stakeholders and professionals, ensuring information is provided on how to seek help and what treatment is available and tackling the stigma of misunderstanding that currently exists.
- ii. Early diagnosis and intervention – assessing what services are in place.
- iii. How do we improve the quality of care?

2. People with dementia should not be discriminated against and socially excluded. They have the ability to contribute to society as well as the right to live as ordinary citizens, be treated with dignity and respect and be very much part of their communities.

3. There is much we can learn from consultation with stakeholders, partners, service users, carers and their representatives so a series of consultation meetings with other groups and service users is being planned.

4. We started at our last meeting when we heard from Jill Quinn Branch Manager of the Harrogate and Ripon Alzheimer's Society. She highlighted how dementia affects individuals and families, our communities and what can be done with proper support to improve their quality of life. Jill emphasised how constructive activities in care homes and in localities can enable people who have dementia, to keep their brains active, so potentially reducing decline in mental ability.

5. By carefully planning the person's environment, and giving structure to their day with supportive activities, it may be possible to reduce the impact of the symptoms.

6. We want to know how information is provided on how to seek help and what help and treatment is available. This is important as people in the early stages of dementia are better able to make decisions about their future. Whilst early diagnosis has become easier, we want to examine what the reality is for people in the localities, and once diagnosed how they gain access to drug treatments and services.

7. During the later stages of dementia most people will become increasingly frail due to the progress of the illness. They will also gradually become totally

dependent on others for all their care, many of whom are relatives. The cost of caring for people with dementia from these people can be enormous, both monetary and psychological. Partners, relatives and friends who take care of patients experience emotional, physical and financial stress. It is important that we hear what people think represents high standards of support, of care and how we can enhance the quality of life of the person with dementia.

POPPS Project

8. The Committee considered the final report of the Consultants appointed to examine progress on the Partnerships for Older People's Project. Funded by the Department of Health over a two year period, North Yorkshire was one of 31 local authorities to set up innovative pilot projects focused on older people, providing person centred integrated care and developing preventative approaches that promote health, wellbeing and independence. Nine schemes were in operation in North Yorkshire, piloted in four geographical areas.

9. This evidence demonstrated that the pilots brought improvements in three key areas:

- i. Providing more low levels of care and support in the community to improve the health, wellbeing and independence of older people, preventing or delaying the need for higher intensity and more costly care.
- ii. Reduced avoidable emergency admissions and all bed days for elderly people.
- iii. More elderly people have been supported to live at home or in supported housing, such as sheltered or extra-care housing as opposed to long-term residential care.

10. North Yorkshire was unusual in that POPPs activity tended to focus on individuals already in receipt of social care who face the prospect of support from the NHS. The findings were relatively clear in that early intervention and particularly more flexible ways of working, greater autonomy of teams and greater use of telecare had reduced avoidable emergency admissions and all bed days for elderly people.

11. The Committee has commended the report and the clear messages around early intervention. The Working Group leading on this has agreed to meet again in October, but we have agreed to a broadening of its remit so as to include the lessons that have been learned from the POPPs project in the context of the wider prevention and early intervention agenda.

Personalisation of Adult Social Care

12. The 'Putting People First' agenda and associated guidance makes it clear that local authorities should drive forward in their use of individual or personal budgets and personalised approaches as the primary means of transforming their service. This reinforces the notion that self directed care and individual

budgets are the way forward and will transform the way people are supported in the community.

13. We looked at the planning undertaken by the Adult and Community Services Directorate in developing our thinking around approaches to individualised budgets and personalisation. A model has been adopted which is a practical, implementable solution but one which places people more in control of their own futures. The Committee will now keep a watching and supporting brief particularly as solutions are trialled and as we move to mainstream this fundamental change. Given the size of the transformation agenda we have asked for regular reports on progress and at the same time to be made aware of national developments and best practice in the national transformation within social care.

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Background documents: Nil
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