NORTH YORKSHIRE COUNTY COUNCIL

CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

Statement by the Chairman

17 December 2008

1. National Dementia Strategy

Dementia is now both a national and local priority. There are currently 575,000 people with the condition in England and 700,000 in the UK. Within the next four to five years it is estimated that the number with Dementia in the UK will have increased to more than 1,735,000 (154% increase). In only 15 years, by 2025, a 38% increase is predicated bringing the total to over 1million.

Since the start of this project the Committee has been advised and supported by the Directorate, the PCT and most notably the Alzheimer's Society. At the outset we focused on 'Awareness', the first of three themes in the National Strategy, the other two being Early Intervention and Quality of Care. Originally, our intentions were to foster greater understanding, promote better information and help to tackle the stigma and misunderstandings that exist. Increasingly however, we believe we can go a lot further, by coming forward with concrete thoughts on what a good Dementia service for the County would look like. Some of our ideas stem from the recent workshop with representatives from the Alzheimer's Society, where we began to translate what people said they would like to see into the drafting of a Joint Commissioning Strategy with the PCT. People told us they want an approach which:

- Demonstrates a good knowledge of the individual when care is received.
- Where people with Dementia are empowered and informed.
- Where people who work with Dementia are well trained and supported.
- Where local services are in the main based in the community.
- Services being accessible and everyone being able to get into the system when and where they need to.
- A service which has sufficient capacity, particularly in the third sector, to respond effectively.
 - Has common standards for training and awareness for professional staff in health and social care.
 - Has effective but flexible respite options.

The significance of early diagnosis has been raised with us repeatedly. There is strong support for the idea that people should have the right to be assessed promptly when they have certain symptoms. This is not happening consistently at present. The Alzheimer's Society state that up to two thirds of people in England with Dementia are never diagnosed as

they do not recognise its symptoms. Our consultation suggests that locally, peoples' experience of diagnosis is very mixed. Also post diagnosis care is often not all we would want it to be.

Support for the individual and their carers can currently feel too fragmented. There was a strongly held view that whilst services could be better integrated a more 'specialist' approach to support could be the answer. A possible solution could be the notion of 'one stop shop' or 'no wrong door' for people whose lives are affected by Dementia. Whilst this would represent a strategic change to what we have now, the advantages appear self evident to me. It is therefore something we will factor in to any part we play in shaping services locally.

Our report should be nearing completion sometime in December and will then be subject to consultation as part of the drive towards a Joint Commissioning Strategy.

2. Monitoring of Older Peoples' Strategy

Two years on since the adoption of 'Our Future Lives' as a corporate strategy the Task Group has completed this year's review of how far we have progressed. Last year, the Group identified good progress in services for older people but found engagement by directorates with older people uneven.

This year's review firmly concluded that solid progress has again been made. After sifting through a mass of evidence, Members and older peoples' representatives agreed that the challenges and opportunities raised by demographic factors — an ageing society — are increasingly being recognised by services. Staff now appear to be making the connection between engaging with older people or their representative groups and how that contributes to promoting wellbeing and preventing the onset of isolation and physical and mental deterioration. Not that there are grounds to ease up; indeed we should redouble our efforts in increasing this awareness so that we can be confident that relationship is understood more widely.

The diversity of older people over the age of 50 is not always being recognised though. Next year, the Group will be looking more closely and critically for signs that Directorates recognise that older people are not a homogenous group. Whilst there was some evidence that engagement options were being mixed and tailored to match that diversity, more could be done to match engagement techniques with the range of older people's interests and needs. In that way the good practice we saw, which tended to be restricted to one off projects, is more likely to become the norm.

3. Telecare

At a recent Seminar, Members had the opportunity to learn of the benefits of Telecare and how we are progressing within the County. The Committee has maintained a long standing interest in this matter, having in the past appointed a Task Group which completed a thorough and comprehensive study in 2007. Chaired by County Councillor Gillian Ivey, the Group still meets, and has recently reported that progress continues to impress. For example, the County Council was recently considered to be a leading authority in the provision of Telecare; we were rated fourth nationally in 'Preparedness'. The latest Local Area Agreement (LAA) performance information demonstrates that in terms of activity we are currently exceeding this year's target and the upward trend in usage gives us confidence that the overall LAA stretch target will be comfortably met.

The Group also heard of the significant effect the appointment of Commissioning and Change Agents for Telecare is having, by spreading the word and raising the profile of the benefits of Telecare not only within the authority, but also with partners.

In the longer term, the Group's work is important not only to ensure we maintain this progress but also so that we understand the contribution Telecare can make towards improving the quality of life for people with Dementia and those that care for them.

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Care & Independence Overview & Scrutiny Committee

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5 December 2008

Background Documents: Nil