

NORTH YORKSHIRE COUNTY COUNCIL

13 OCTOBER 2010

CARE AND INDEPENDENCE OVERVIEW AND SCRUTINY COMMITTEE

STATEMENT BY THE CHAIRMAN

“THE MORE WE UNDERSTAND THE MORE WE CAN HELP”

Living Well with Dementia: Access to Services Update

1. The September Committee meeting was turned over completely to Dementia, The proposals that emerged from our review nearly eighteen months ago now, mirrored those of the National Dementia Strategy published at the same time. Since then, we continue to work alongside the Directorate, representatives of the PCT and third sector colleagues to improve services for people with Dementia and their carers.
2. We brought together practitioners, professionals and strategic leaders with users and carers to get a genuine impression, but more importantly an honest assessment of what support for Dementia looks like and where we as elected members can continue to contribute to maximum effect.
3. There are many positives resulting directly from our work that we are justifiably proud of, but none more so than the establishment of a Dementia Network. It is supported by a range of organisations; something we always thought would be a key ingredient of its success. By partnership working, innovation, commitment and sheer hard work it has developed into a real force for change. As we planned, it has been instrumental in making a real difference for people with Dementia and their carers.
4. On the national picture we heard that commitment remains strong to the five year implementation programme of the National Dementia Strategy and this is reflected in the Operating Framework for 2010/11. NHS organisations should work with partners and people with Dementia to help them to understand their local services and the level of quality of outcomes they can expect. This is part of a move away from central direction to local determination. A feature which need not delay us because in 2009 we determined the priority areas to develop a person centred local service. There are:
 - Good quality early diagnosis and intervention.
 - Improved community personal support service.
 - Implementation of the carers' strategy.

- Improved quality care for people with Dementia in general hospitals.
 - Living well with Dementia in care homes.
 - Informed workforce.
 - Improved end of life care.
5. On these priorities, success stories can now be seen in the work of the Network's sub-groups. Some examples are:
- Workforce training programmes, e-learning packages and building competencies have improved the level of understanding of Dementia issues at workforce level.
 - In general hospitals named leads in each Trust have identified areas for action in relation to discharge liaison services.
 - Improved processes for Telecare, Telehealth especially around referrals
 - In respect of care homes, engaging with service users and carers, setting standards and information guides for self-funders.
 - Improving public and professional awareness, better quality information for those diagnosed, more structured peer support and learning networks,
 - Developing personal budgets
 - Making the most of the work already undertaken on end of life care.
6. We should also be judged by how far we have come in giving a voice to people with dementia and their carers. So it was good to hear that the Alzheimer's Society is developing local forums and user participation made up of membership from anyone interested in Dementia. We embarked on our work with a community leadership perspective and this looks like being another way we as local representatives can add our support.
7. All these developments show how impressive progress has been but maintaining this momentum in the face of the major challenges ahead will not be easy. The demographic shift, demand within the current system and a reduction in funding highlight the need for continued attention to strategies to manage demand effectively. The key themes are clear:
- Telecare and Re-ablement to help keep people as independent as possible.
 - Working with the voluntary sector on core services.
 - Investment in care pathways – much has been achieved on this but it is about making this work in practice.
 - Good advocacy to enable peoples voices to be heard.
 - Supporting day services.
 - The need for residential care to be provided by a variety of providers.

8. It is an indication of the respect the Network has for the Committee (and vice versa) that so many of its members wanted to attend our Committee meeting to review progress and help us think about the challenges ahead. That relationship remains, but it is now time for the Committee to take a step back and allow the Network to continue in its good work and do what it can to help partners tackle those major challenges.
9. Not that we intend to remove Dementia from our work programme - for example we will monitor activity by regular updates so that we can determine where we can help the most. One possible such area emerged from discussion at the end of the meeting - "community based support". We expect this to be one of the elements of the next phase of the national awareness campaign which targets changing attitudes in the wider community to people with Dementia.

Re-ablement

10. Re-ablement is characterised by support from trained staff spending more time with people in the early stages after an illness or accident to explore their motivation and goals and to see whether their earlier independence can be restored. It can be described as an approach or a philosophy within home care services – one which aims to help people 'do things for themselves' rather than 'having things done for them'.
11. Development of a Re-ablement service could well be pivotal to managing service change in North Yorkshire against a backcloth of financial pressures. For this reason, but more because it plays such an important role in the way people are supported in living independently, is why the Committee intends to scrutinise these services as they are developed, to ensure they are addressing individual needs. We start with a briefing at the next Committee

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Chairman
Care and Independence Overview and Scrutiny Committee

County Hall
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30 September 2010

Background documents: Nil