



Living Well with Dementia: A Strategy for Sefton 2014- 2019

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Foreword:



Councillor Paul Cummins, Cabinet Member for Older People and Health

Like most of the country, Sefton is experiencing a continuing rapid increase in the proportion of older people in its population. Older people in Sefton generally enjoy good physical and mental health, and they are a great asset to their communities through their many contributions to local organisations, neighbourhoods and their own families. Nevertheless, this increasing proportion of older people in the population will make increasing demands on health and social care services, including those with dementia.

Dementia can affect adults of any age, but is most common in older people. One person in 20 over 65 has a form of dementia, rising to 1 in five in those over 80. Dementia in people aged under 65 is relatively rare – less than 3% of all those with dementia.

Positive, proactive approaches to service development providing individualised support can help ensure that physical and mental health are sustained as long as possible, that people live at home for as long as possible and that crises and unnecessary use of intensive costly services are minimised. It remains our intention to ensure that older citizens experiencing dementia can access appropriate, joined-up services that are provided safely and effectively to maximise independence, choice and quality of life.

This draft strategy has been produced by a number of partners, together with input from people with dementia and their carers:-

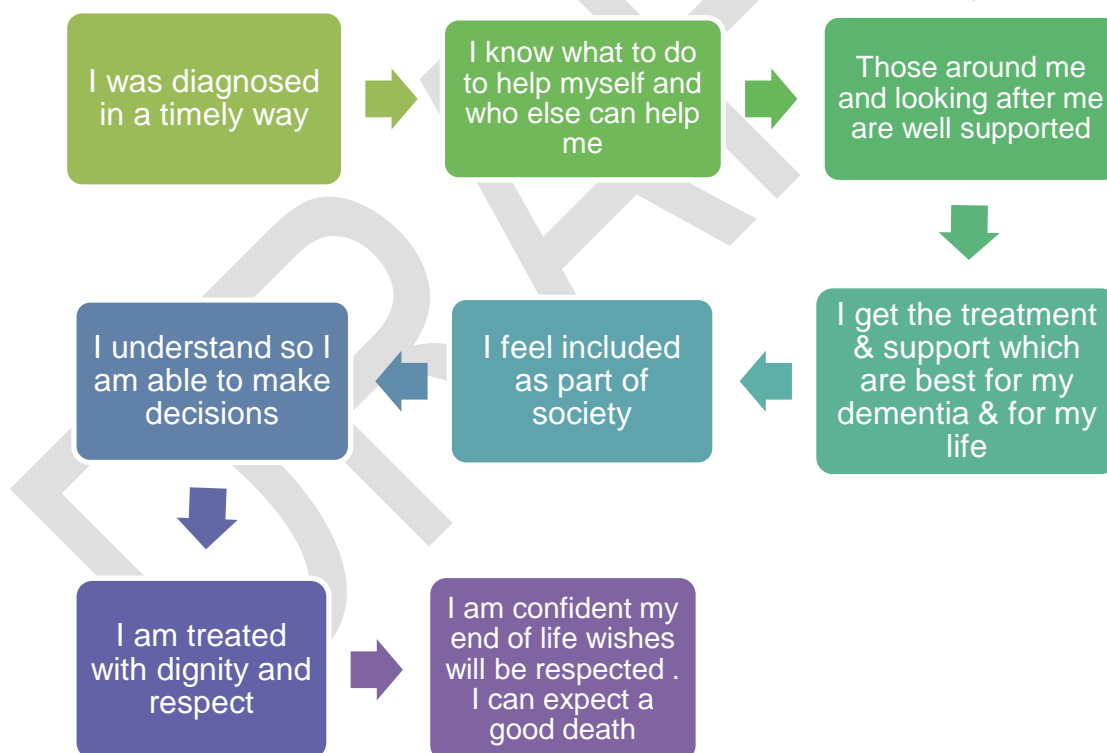
- Sefton Council
- South Sefton CCG
- Sefton CVS
- One Vision Housing
- University Hospital Aintree NHS Foundation Trust
- NHS Liverpool Community Health Trust
- Sefton Partnership for Older Citizens
- Southport & Formby CCG
- Sefton Carers Centre
- Alzheimer's Society
- Sefton & Liverpool Age Concern
- Mersey Care NHS Trust
- Southport & Ormskirk NHS Trust
- Sefton Pensioners' Advocacy Service

Vision for People with Dementia in Sefton

We want to ensure that people with dementia and their carers receive high quality, compassionate care whether they are at home, in hospital or in a care home. We want the person with dementia, and their family and carer, their wellbeing and quality of life to be first and foremost in the minds of those commissioning and providing services for them.

Aim for People with Dementia in Sefton

The following strategic priorities have been identified that will help people with dementia, and their carers, to live their lives in a positive way. They are based on what people with dementia and their carers have said nationally are important to them:-



Developing Sefton's Dementia Strategy



Living Well with Dementia has been developed in partnership with people with dementia and the people who care for them. We asked people with dementia and their carers what was important to them in order to make sure that this was reflected in the Strategy.

Conversations took place with providers of services, shops, businesses and offices around the themes of creating dementia friendly communities, promoting diagnosis and supporting people to live independently and information, advice, support for people with dementia.

Consultation also took place with the general public to test out people's thoughts and understanding about dementia, what they felt that people with dementia should be able to do (such as continue to live alone/being able to continue to work for as long as they are able/continue to drive for as long as they can/use technology to enable people to stay safe in their home) and their thoughts on the draft strategy and the priorities in it.

A full consultation and engagement report has been prepared and is a separate document to this Strategy. In total 169 people engaged with the consultation and engagement process.

People with dementia and their carers told us that:-

- On the whole they found it easy to get a diagnosis, although some felt that the length of time from diagnosis to accessing the memory service was too long.
- Information and advice is available, although carers would like more information about long-term symptoms, how to choose residential homes and information about the costs involved. The work of the Alzheimer's Society and the support they offer was felt to be invaluable.
- In terms of healthcare it is important to see the same person each time so that they didn't have to repeat their story and over again to different people.

- People with dementia should be asked what they want, including their likes and dislikes, even if they find it difficult to answer
- It is important that the person with dementia should have a say in their end of life plan and this should be done at an early stage
- Where people with dementia have to stay in hospital, their experiences have been poor and that there needs to be more training and awareness raising for staff.

What is Dementia?

The term dementia describes a set of symptoms, including memory loss, mood changes and problems with communication and reasoning. Dementia is not a natural part of growing old. It is caused by diseases of the brain, the most common being Alzheimer's.

Although regarded and classified as a mental disorder, dementia is predominantly a physical, progressive condition; the symptoms becoming more severe over time and impacts on a person's functional ability and most noticeably their daily routines. Symptoms include:-



Impairment of memory

- Increasing difficulty in remembering recently acquired information
- Difficulty recognising friends and family
- Forgetting names of friends and common objects



Impairment of reasoning

- Difficulty in working things out
- Not being able to use a new design of kitchen appliance
- New-found difficulty handling money



Impairment of learning

- Inability to learn or remember names of people or objects
- Repetitive questioning due to inability to remember the answer
- Problems learning how to learn to use new objects



Increased stress levels

- Becoming distressed if you are in an unfamiliar environment
- Anxiety from not recognising people
- Inability to recognise, understand or adapt to what's going on around



Reduced capacity to deal with age-related changes

- Forgetting to use recently acquired prosthetics, e.g., glasses or hearing aids
- Neglecting to keep the house warm
- Forgetting to eat or drink enough fluids

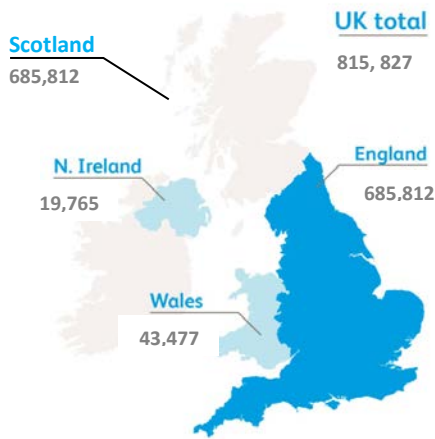
Dementia often becomes more common with ageing, but can also be present in people of working age. People with dementia can present family, friends and carers with complex issues (especially in the later stages of the disease) which can include restlessness and wandering, mobility difficulties leading to falls and fractures, eating difficulties, recognition difficulties, memory and recollection difficulties, incontinence and, sometimes, a range of behaviours that can be challenging to carers, family and care home staff.

Dementia presents a huge challenge to society, both now and increasingly in the future. It is a common condition, which has a large impact on carers and society with an increasing cost attached to caring for people within the community.

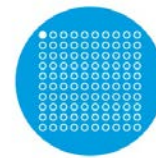
Dementia: the National Context

In 2013 there were 815,827 people were living with dementia in the UK.

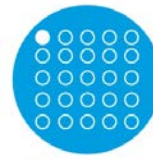
Dementia is most common in older people but younger in the can get it too



40-64 years
1 in 1,400



65-69 years
1 in 100



70-79 years
1 in 25



80+ years
1 in 6



Two thirds of people with dementia are women



One in three people over 65 will develop dementia



One in twenty people with dementia are under the age of 65

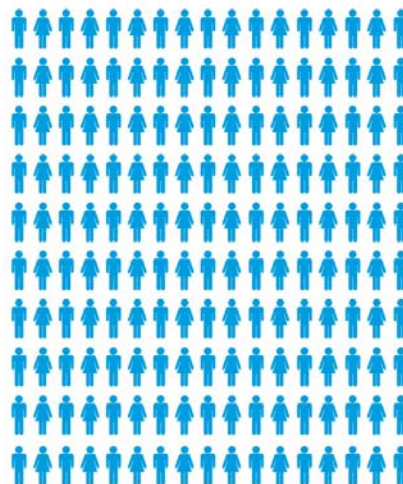
If trends continue, the number of people with dementia will double in the next 40 years.



815,827 people with dementia in 2013



1,142,677 people with dementia by 2025



2,092,945 people with dementia by 2051

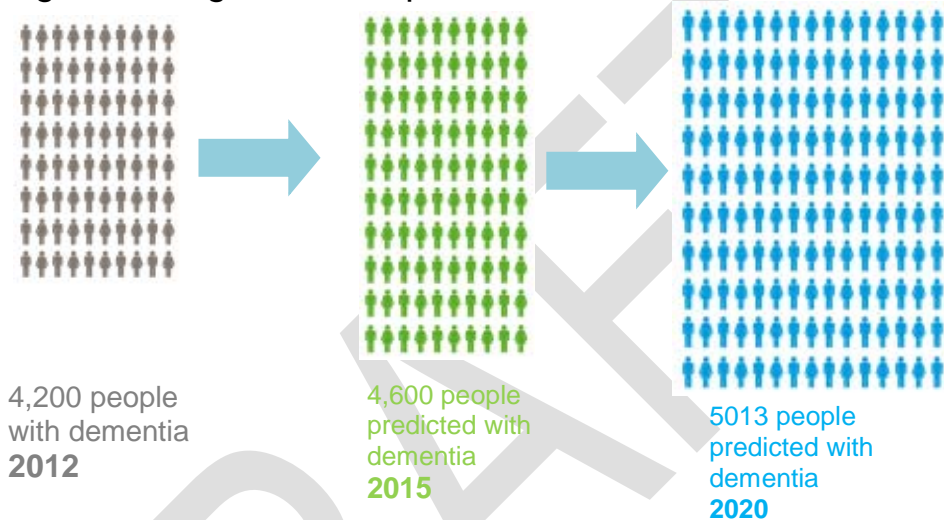
Dementia: the Sefton Context



Sefton has one of the highest percentages of adults with dementia in the UK.

According to figures recently released by the Alzheimer's Society, **Southport** has the highest number of people with a diagnosis of dementia in the North West and one of the highest rates in the UK – 1,765.

The number of people in Sefton over 65 with dementia is steadily increasing and this growth is expected to continue



Of these numbers between 50% and 65% will **not** have a confirmed diagnosis



There will also be an increase in the number of people **under the age of 65** diagnosed with dementia



The numbers of people with dementia in Sefton is spread evenly across North and South of the Borough (based on statistics quoted in Dementia UK 2nd Edition). However there are differences in that the number of younger people (aged 40-64) with dementia is slightly higher in the South of the Borough, and the number of older people (aged 95 – 95+) with dementia is slightly higher in the North of the Borough.

The Economic Impact of Dementia

The overall economic impact of dementia in the UK is £26.3 billion, which works out at an annual cost of £32,250 per person (this excludes the costs of early onset dementia). Two-thirds (£17.4 billion) of the cost of dementia is paid by people with dementia and their families, either in unpaid care (£11.6 billion) or in paying for private social care. This is in contrast to other conditions, such as heart disease and cancer, where the NHS provides care that is free at the point of use. This is because, although dementia is a physical disease of the brain, most of the essential care required supports daily activities, such as washing and dressing, which is classified as 'social' rather than 'health' care.



£4.3 billion is spent on healthcare costs of which around £85 million is spent on diagnosis

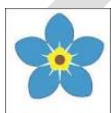


£10.3 billion is spent on social care for people with dementia in the UK.

Social care is either publicly funded (£4.5 billion – 17.2% of the overall total cost of dementia) or privately funded (£5.8 billion – 22.9% of the total)



The cost of unpaid care for people with dementia in the UK is £11.6 million, working out as 44% of the total cost of dementia. The total number of unpaid hours of care provided to people with dementia in the UK is 1.34 billion



£111 million is spent on other dementia costs

Reducing the Risk of Dementia

While the causes of dementia remain unclear, it is known that a good diet, regular physical exercise and avoiding smoking and excessive alcohol consumption can reduce the risk of developing dementia. Interventions focusing on encouraging a healthier diet, regular exercise, reducing smoking and avoiding excessive alcohol consumption would therefore likely reduce future incidence of dementia.

While a lifelong approach to good cardiovascular health is recommended for some conditions (for example high blood pressure, blood cholesterol or BMI), a healthy lifestyle from midlife onwards is likely to be particularly effective at combating dementia. In addition to these vascular approaches, psychosocial factors such as educational attainment, complex work, and mental and social stimulation throughout life also reduce the risk of developing dementia. They are thought to do so by building up a cognitive reserve. Growing evidence also suggests that midlife depression is a probable risk factor for later dementia and its treatment should be encouraged.

There is no certain way to prevent all types of dementia. However, a healthy lifestyle can help lower the risk of developing dementia as people become older. It can also prevent cardiovascular diseases, such as strokes and heart attacks.

To reduce the risk of developing dementia and other serious health conditions, the following are recommended:

- Eating a healthy diet
- Maintaining a healthy weight
- exercising regularly
- Not drinking too much alcohol
- stopping smoking (if you smoke)
- keeping blood pressure at a healthy level

Helping People with Dementia and their Carers to Live Well



Housing and support for people with dementia

Two thirds of people with dementia live in the community and people with dementia and their carers place great importance on their homes. However, research undertaken nationally by the Alzheimer's Society shows that:-

- More needs to be done to link housing with health and social care services
- Many people with dementia and carers want to be supported in their current homes, but others prefer the option of housing with care where care is available on site.
- There are mixed experiences of accessing information and advice on housing and housing options, including access to funding and support to make adaptations to the home
- More needs to be done to ensure homes are designed and built with the needs of people with dementia in mind and older people in general
- The use of assistive technology to support people with dementia and their carers to be supported to stay in their own homes where possible. This includes things such as telecare, personal alarm systems, movement sensors, tracking devices and door opening detectors.

Current national and local planning policies do not require developers of elderly friendly homes to carry out an assessment of how dementia friendly their new developments are. However the National Planning Policy Framework (Paragraph 171) states that Planning and Health need to work together to consider health status and needs of local population both now and in the future. In Sefton's case this includes an increase in the older population and a need for environments that are supportive of those living with dementia.

The Town and Countryside Planning Association is working with Public Health England to identify ways in which Planning and Public Health can work together and contribute to outcomes for older people and those who are living with dementia. The Association has held two workshops in Sefton with the Council and other partners.

At a meeting of the full Council on 25th September 2014, Sefton Councillors considered the issue of dementia and housing and indicated that developers of homes should consider the issues associated with an ageing population, including how dementia-friendly their developments are at all stages of those developments.

It passed a resolution that the Council will promote increased awareness of the needs of older people amongst those wishing to develop housing in the Borough, including the design and development of a dementia-friendly environment. The Council also resolved to consider, through the emerging Local Plan process, the making of a policy requiring developers to identify how best to address the housing needs of the ageing population.

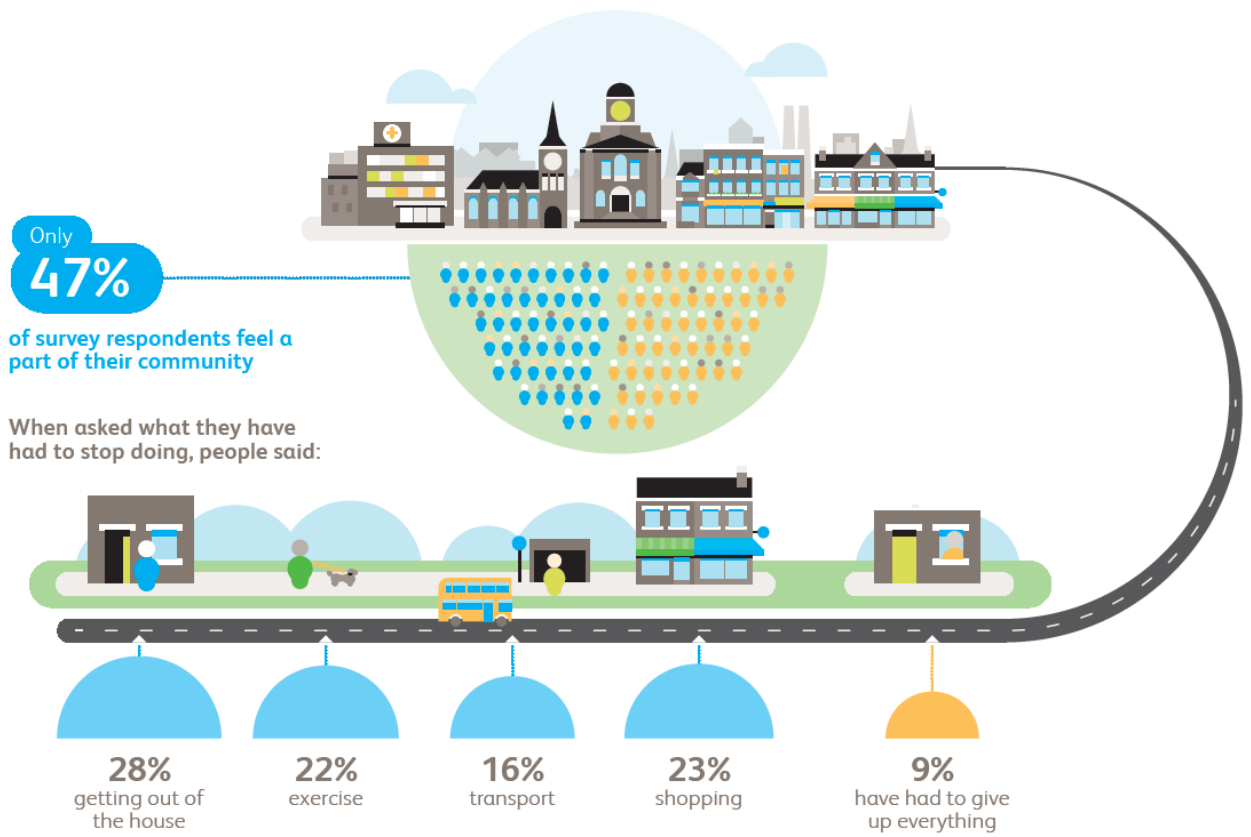
With regard to **Social Housing** for people with dementia, the Council supports the provision of 'extra care housing schemes'. Extra Care Housing offers accommodation for older applicants who may need additional care and support services and there are specific assessment criteria to ensure an appropriate balance of residents with high/medium/low care needs.



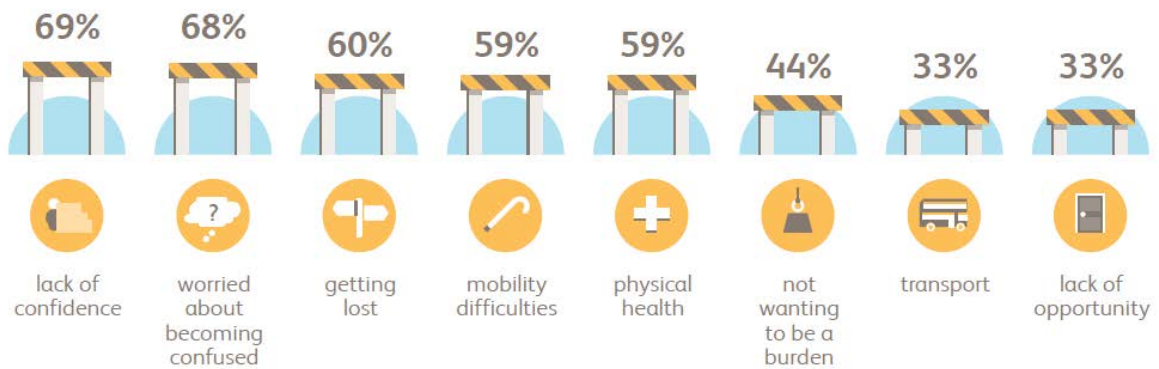
Creating Dementia Friendly Communities in Sefton

People with dementia and their carers can face many challenges going about their daily lives when shopping, using public transport, socialising and getting involved in their community. Having dementia does not mean someone has to stop carrying out everyday tasks or enjoying activities.

The Alzheimer's Society asked people with dementia for their views about living with dementia in their community:-



People with dementia feel their biggest barriers to participating in their local area are:



Whilst the main priorities for the Sefton dementia strategy are around prevention (e.g. tackling isolation, promoting wellbeing and healthy eating) and better treatment, by making Sefton more dementia friendly, it will make for a better quality of life for those who are already living with it.

At a meeting of the full Council held on 25th September 2014, Sefton Councillors resolved that the Sefton Dementia Action Alliance will seek dementia-friendly community status for the whole of the Borough.

In order for Sefton to become Dementia Friendly it will require strong commitment from everybody. This will be achieved by the Public Sector, the Private Sector, the Voluntary Sector, Church groups and individuals working together to enable people with dementia to live well. This might be making the bus into town or the library more accessible, or thinking about the support needed to go shopping. A little understanding about dementia and its effects is the only way to create dementia-friendly communities.

A dementia-friendly community is one in which people with dementia are empowered to have aspirations and feel confident, knowing they can contribute and participate in activities that are meaningful to them. Many villages, towns and cities are already taking steps towards becoming dementia-friendly, or have an ambition to do so

A group of shops on Fylde Road, Southport have recently received recognition from the Alzheimer's Society for being dementia friendly. The staff in the shops received Dementia Friends training and changed practices within their business to help people with dementia to use their services. Dementia-Friendly communities benefit everybody not just people with dementia.

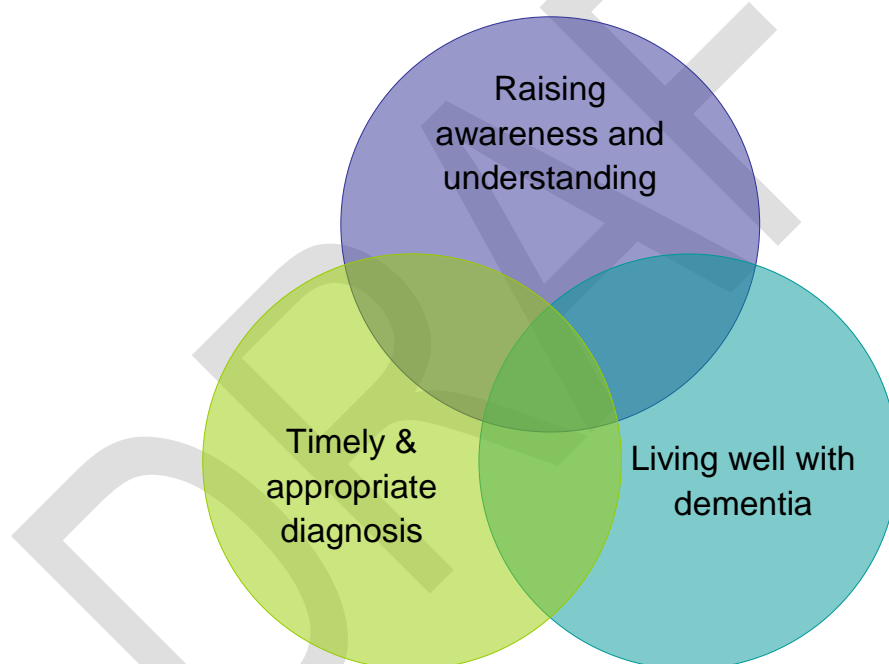
Links to National Strategies and Policies

This draft strategy is aligned with, a number of National Strategies and Policies:-

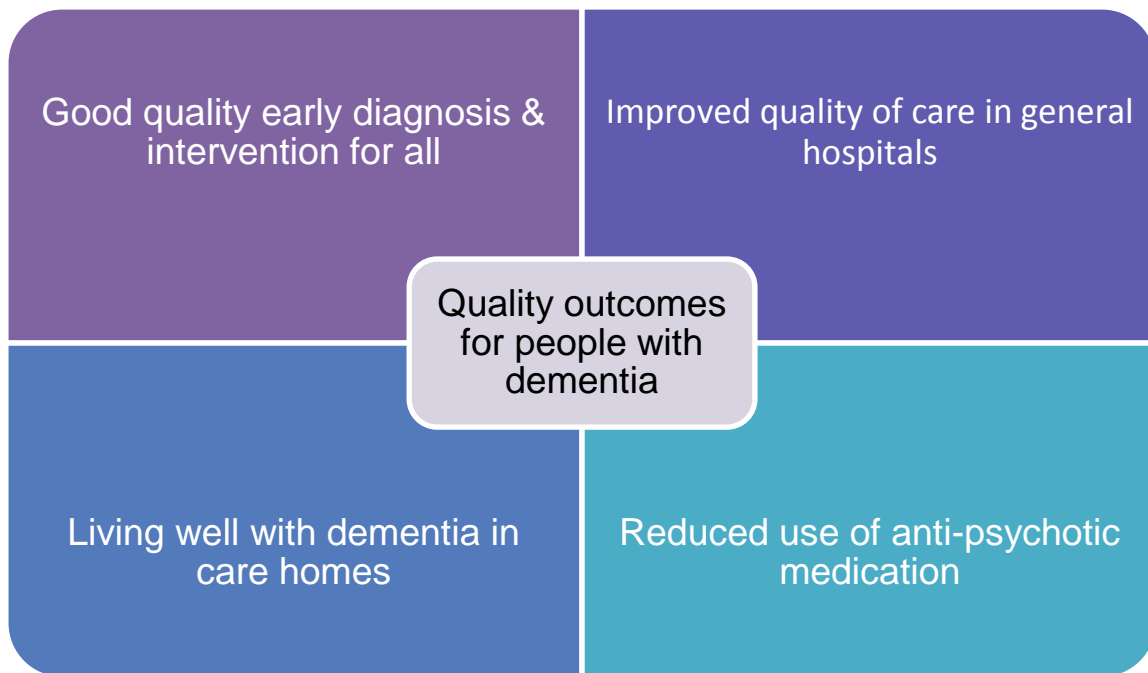
National Dementia Strategy 2009

In 2009 the Department of Health launched the first ever National Dementia Strategy for England. The Strategy is the Government's plan which explains what needs to happen to radically transform the quality of life for people with dementia and their carers.

The Dementia Strategy sets out 17 recommendations that the Government wants the NHS, local authorities and others to adopt to improve dementia care services. The recommendations are focused on three key themes of:



Following on from the publication of the Strategy, in 2010 the Government produced the document **Quality outcomes for people with dementia: building on the work of the National Dementia Strategy**. The document lists four priority areas for the Department of Health's policy development work to support local delivery of the Strategy. These areas provide a real focus on activities that are likely to have the greatest impact on improving quality outcomes for people with dementia and their carers:-

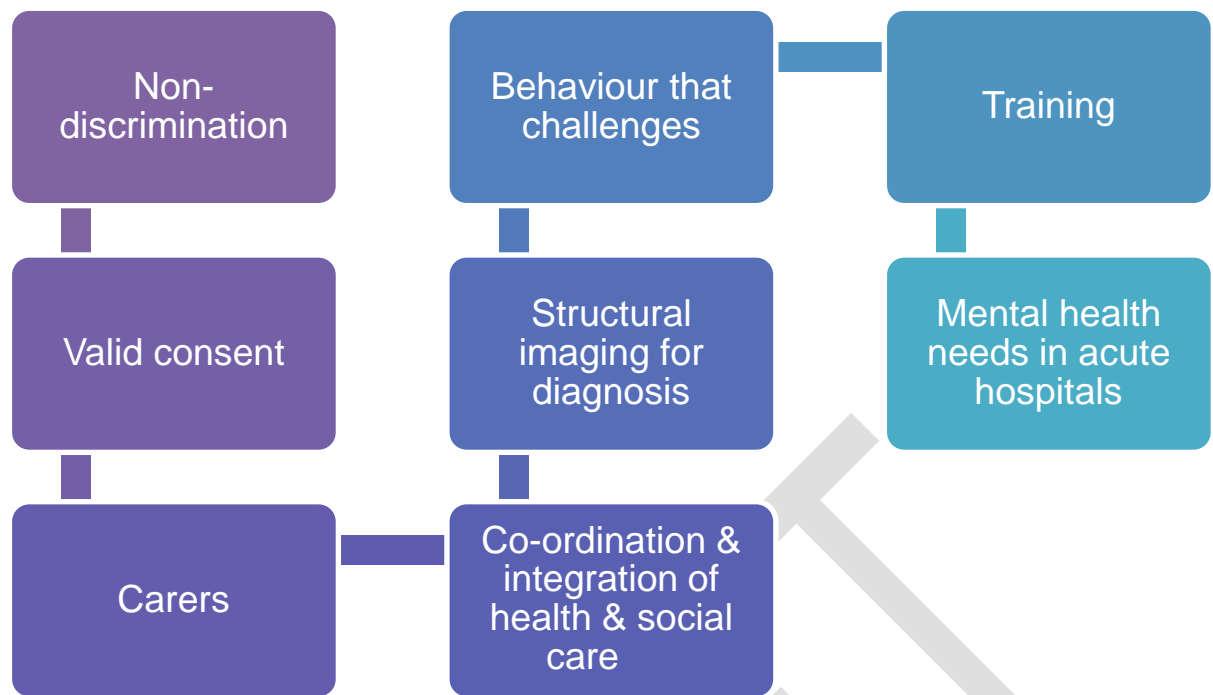


More generally the improvement of community personal support services is integral to and underpins each of the four priorities as it supports early intervention; prevents premature admission to care homes and impacts on inappropriate admission to hospital and length of stay.

National Institute for Health and Care Excellence /Social Care Institute for Excellence Guidance 42 2006 (updated March 2013)- Supporting People with Dementia and their Carers:

This guidance makes recommendations for the identification, treatment and care of people with dementia and the support of carers. Settings relevant to these processes include primary and secondary healthcare, and social care. It states that wherever possible and appropriate, agencies should work in an integrated way to maximise the benefit for people with dementia and their carers

The following recommendations have been identified as priorities for implementation:-



Prime Minister’s Dementia Challenge 2012:

The dementia challenge was launched in March 2012 by Prime Minister David Cameron. The Dementia Challenge is an ambitious programme of work designed to make a real difference to the lives of people with dementia and their families and carers, building on progress made through the National Dementia Strategy.

There are 3 dementia challenge champion groups, each focusing on 1 of the main areas for action:



National Dementia Declaration for England – Dementia Action Alliance

The Dementia Action Alliance is made up of over 900 organisations committed to transforming the quality of life of people living with dementia in the UK and the millions of people who care for them.

Members of Dementia Action Alliance have signed up to a National Dementia Declaration. Created in partnership with people with dementia and their carers, the Declaration explains the huge challenges presented to society by dementia and some of the outcomes it is seeking to achieve for people with dementia and their carers. Outcomes range from ensuring people with dementia have choice and control over decisions about their lives, to feeling a valued part of family, community and civic life.

These are the seven outcomes that people with dementia and their family carers said they would like to see in their lives.



Dementia and People with Learning Disabilities Charter, 2013:

Advances in medical and social care have led to a significant increase in the life expectancy of people with learning disabilities.

Understanding the effects of ageing among this group – including the increased risk of developing dementia - has therefore become increasingly important. People with learning disabilities in general and people with Down's syndrome specifically, have a higher risk of developing dementia and at a younger age than people in the general population and:-

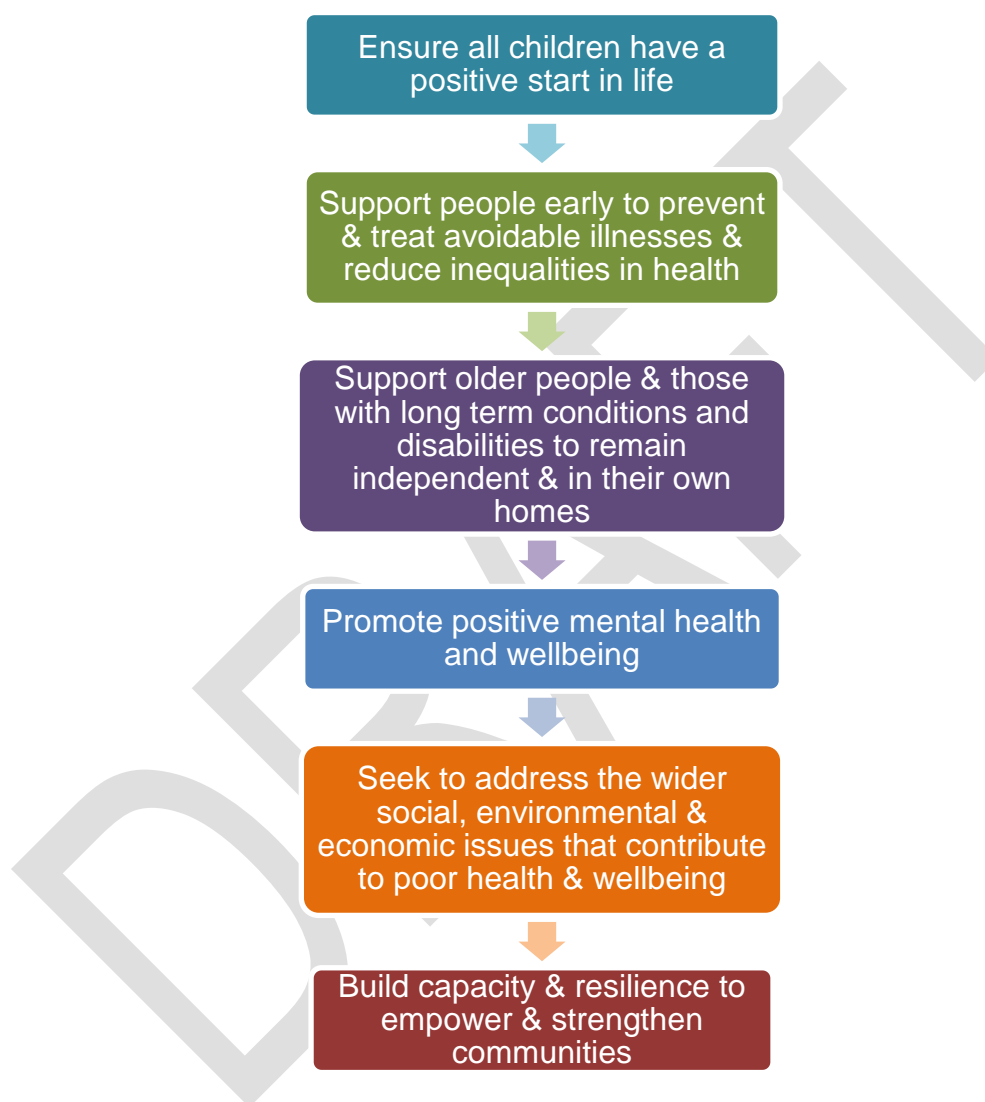
- often show different symptoms in the early stages of dementia
- are less likely to receive a correct or early diagnosis of dementia and may not be able to understand the diagnosis
- may experience a more rapid progression of dementia
- may already be in a supported living environment, where they are given help to allow them to live independently
- may have already learned different ways to communicate (e.g. more non-verbal communication if their disability affects speech)
- will require specific support to understand the changes they are experiencing, and to access appropriate services after diagnosis and as their dementia progresses

The Charter outlines 14 important outcomes for the individual person that organisations need to be aware of, and that are aimed at improving the persons experience of support, underpinned by comprehensive person centred planning based on their own wishes, their capacity (maximising their decision making, wherever possible), and their needs and history.

Links to Local Strategies

There are a number of local strategies that link to this draft strategy, but do not duplicate it. These include:

The Sefton Health & Wellbeing Strategy 2013 – 2018 which this draft strategy seeks to support in the delivery of the six strategic objectives for Health and Wellbeing:



The Sefton Carers Strategy 2014-2019

This Strategy has been co-produced with partners, providers and the carers themselves (including young carers) and identifies a set of draft strategic objectives for Carers in Sefton, together with the creation of a model for working with Carers, and a whole life course approach to defining carers. A draft model of working with carers in Sefton has

been created which shows that carers and those they care for are at the heart of the process and that those closest to them “their world” are also very important.

The model shows that all organisations should talk to each other and where ever possible share appropriate data in a secure way to ensure that services provided best meet the need.

Sefton Strategy for Older Citizens 2014 – 2019

Sefton Partnership for Older Citizens (SPOC), continues to work with partners to create a better place where older people can live, work and enjoy life as valued members of the community. The five year strategy for older citizens sets clear direction for our communities and strives to ensure that the needs of people are met. It also provides a framework of common outcomes that link directly to the ambition and vision within other strategies (Carers, Mental Health and End of Life) currently being developed and in this way helps to bring a shared focus and collaborative approach to service development in Sefton.

Sefton Mental Health and Wellbeing Strategic Plan

Work is also underway to develop a draft Sefton Mental Health and Wellbeing Strategic Plan based on feedback from service users as part of the consultation on the Health and Wellbeing Strategy.

End of Life / Palliative Care

A Sefton commissioning strategy is being developed that will enable patients, carers and families to access appropriate high quality care when facing the issues associated with life threatening illness. The strategy aims to ensure that all services involved in end of life care act in a compassionate way, that treats, comforts and supports people who are living with progressive, chronic or life threatening conditions. All care services need to acknowledge and have a plan for the cultural, personal and spiritual beliefs, values and practices that need to be considered as part of their role in giving support up to and including the period of bereavement

These draft strategies and plans will be further consulted upon to ensure that this strategy and other strategies and plans are aligned, but do not duplicate activities and deliver value for money.

Gaps identified from the Consultation & Engagement Process



Early Onset Dementia

There is currently very little information available about the numbers of younger people (under 65) in Sefton with dementia.

Getting an accurate diagnosis of dementia can take a very long time for people under 65, often due to lack of awareness that dementia can happen in this age group. Medical professionals often misdiagnose them as being depressed, experiencing relationship difficulties, the effects of stress or, for women, it may be put down to the onset of the menopause.

Younger people with dementia will face different issues, especially if they are still working when they receive a diagnosis. They may face discrimination at work and have to give up work earlier than they would like. As the population ages and the retirement age increases, it is more likely that more people will be diagnosed with dementia while they are still in work.

Dementia care services are usually designed for older people. Some dementia services have a minimum age criterion of 65 and even if services accept younger users the type of care they provide may not be appropriate. This means that younger people with dementia may have to travel considerable distances to access appropriate services or they may be left without the support they need.

It is essential that younger people with dementia have access to a range of specialised services that address their particular needs and enable them to live well with dementia. This should include not only health and social care services, but also wider services that promote their wellbeing such as financial advice and support to remain in work should they choose to do so. Many will have significant financial commitments such as a mortgage. They often have children to care for and dependent parents too.

Their lives tend to be more active and they have hopes, dreams and ambitions to fulfil, up to and beyond their retirement.

The contribution of family members and carers is often very important in helping to reach a correct diagnosis in this age group. Many people say the first sign that something was wrong was that the person 'didn't seem quite themselves' or they started to make mistakes at work that didn't fit with their usual performance



Dementia and Learning Disability

This was raised at the Open Space and Innovation events during discussions around the topic “Promoting Diagnosis”.

Dementia generally affects people with learning disabilities in similar ways to people without a learning disability, but there are some important differences. People with a learning disability are at greater risk of developing dementia at a younger age – particularly those with Down’s syndrome where one in three develop dementia in their 50s. People with learning disabilities:-

- often show different symptoms in the early stages of dementia
- are less likely to receive a correct or early diagnosis of dementia and may not be able to understand the diagnosis
- may experience a more rapid progression of dementia
- may already be in a supported living environment, where they are given help to allow them to live independently
- may have already learned different ways to communicate (e.g. more non-verbal communication if their disability affects speech)
- will require specific support to understand the changes they are experiencing, and to access appropriate services after diagnosis and as dementia progresses.

There is no evidence that dementia affects people with learning disabilities differently to how it affects other people. However, the early stages are more likely to be missed or misinterpreted - particularly if several professionals are involved in the person's care. The person may find it hard to express how they feel their abilities have deteriorated, and problems with communication may make it more difficult for others to assess change.

It is vital that people who understand the person's usual methods of communication are involved when a diagnosis is being explored

Studies have shown that the numbers of people with Down's syndrome who have Alzheimer's disease are approximately:

- 1 in 50 of those aged 30 to 39 years
- 1 in 10 of those aged 40 to 49 years
- 1 in 3 of those aged 50 to 59 years
- more than half of those who live to 60 or over.

With regard to those people with learning disabilities other than Down's syndrome studies suggest that approximately:-

- 1 in 10 of those aged 50 to 65
- 1 in 7 of those aged 65 to 75
- 1 in 4 of those aged 75 to 85
- nearly three-quarters of those aged 85 or over.

These numbers indicate a risk about three to four times higher than in the general population. At present we do not know why this is the case and further research is needed

Strategic Objectives

The following strategic objectives have been identified for the Sefton Dementia Strategy.



Timely diagnosis, appropriate treatment and involvement in care plans – people receive a timely diagnosis of their dementia, have their concerns listened to by healthcare professionals, and, together with their carers, are involved in developing care plans.



Support to live independently for as long as possible, and to make decisions for myself – people with dementia and their carers can live in their own homes for as long as they choose to do so, and can make decisions about choices that affect their lives.



Inclusive and dementia friendly communities – people with dementia and their carers will have support from local communities, will not experience inequality as a result of their condition and will be able to live as normal a life as possible for as long as they can.








Information, advice and support for people with dementia and their carers – people with dementia and their carers will have easy access to the information and advice they need to manage their condition, to stay as well and active as possible, and know where to go to find out what they need to know.



End of Life Services, ensuring a peaceful and pain free death in the place of choice – people with dementia and their carers will be helped to plan for their end of life, enabling them to die free from pain, fear and with dignity, cared for by people who are trained and supported in high quality palliative care, in the place of their choosing.

This table also shows how these local priorities relate to the national objectives in the National Dementia Strategy and the Dementia Declaration.

Sefton's Draft Strategic Objectives	Timely diagnosis, appropriate treatment and involvement in care plans 	Support to live independently for as long as possible, and to make decisions for myself 	Inclusive and dementia friendly communities 	Information, advice and support for people with dementia and their carers 	End of Life Services, ensuring a peaceful and pain free death in the place of choice 
Objectives from National Dementia Strategy	<ul style="list-style-type: none"> • Good-quality early diagnosis and intervention for all • Easy access to care, support and advice following diagnosis 	<ul style="list-style-type: none"> • Development of structured peer support and learning networks • housing support, housing-related services and telecare to support people with dementia and their carers 	<ul style="list-style-type: none"> • Improved community personal support services • Living well with dementia in care homes 	<ul style="list-style-type: none"> • Good-quality information for those with diagnosed dementia and their carers • An informed and effective workforce for people with dementia • Improving public and professional awareness and understanding of dementia 	<ul style="list-style-type: none"> • Improved end of life care for people with dementia
Statements from Dementia Declaration	<ul style="list-style-type: none"> • I have received an early diagnosis • I can make decisions now about the care I want in my later life • If I work, I have an employer that understand my condition which means I can still work and stay connected to people in my life 	<ul style="list-style-type: none"> • There are a range of services that support me with my daily living that enable me to stay at home and in my community, enjoying the best quality of life for as long as possible • It is easy for me to continue to live in my own home and I and my carer will both have the support needed for me to do this 	<ul style="list-style-type: none"> • I live in an enabling and supportive environment where I feel valued and understood • I have a sense of belonging and of being a valued part of family, community and civic life • I feel safe and supported in my home and in my community, which includes shops and pubs, sporting and cultural opportunities 	<ul style="list-style-type: none"> • I have the knowledge and know-how to get what I need • I have enough information and advice to make decisions about managing, now and in the future, as my dementia progresses • I have information and support and I can have fun with a network of others, including people in a similar position to me. 	<ul style="list-style-type: none"> • I will die free from pain, fear and with dignity, cared for by people who are trained and supported in high quality palliative care

Next Steps

Dementia remains a national challenge in terms of its scale and impact. Research shows that in 2014 there are 835,000 people in the UK who have dementia. Over 40,000 younger people (65 years of age or below) live with the condition.

With an ageing population the numbers of people with dementia in the UK are increasing and as Sefton has an ageing population this will be an issue that will need to be dealt with.

The Partners to the Dementia Strategy will work towards actions that promote early intervention and prevention in order to help to delay the onset of dementia and encourage healthy lifestyles, both physically and mentally, to help improve the wellbeing of Sefton's residents.

Everybody will need to work together to make Sefton a Dementia-Friendly Borough and a place where people with Dementia and their carers can find the support they need to live well with dementia.

The Action Plan, attached as Appendix 1, gives a list of actions against each of the Objectives and partners will use this plan to achieve positive outcomes for people with dementia and their carers in Sefton.

Financial Implications

Delivery of the attached action plan will be contained within existing budgets.

However, where actions will result in additional resources being required then this will be costed and referred to Elected Members and other partners to consider.

For further information on the Dementia Strategy please contact Nicola Beattie on 934 4664

Copies of this document are available in large print and other formats on request. To request this service please call 0151 934 4664

Produced in collaboration with



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Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
Timely diagnosis, appropriate treatment and involvement in care plans	<ul style="list-style-type: none"> • People will receive a timely diagnosis of their dementia, have their concerns listened to by healthcare professionals, and, together with their carers, are involved in developing care plans. 	<ul style="list-style-type: none"> • People with dementia and their carers will receive the support and care that they want and need, tailored to their individual needs 	<ul style="list-style-type: none"> • Support people early to prevent & treat avoidable illnesses & reduce inequalities in health 	South Sefton Clinical Commissioning Group and Southport & Formby Clinical Commissioning Group
	<ul style="list-style-type: none"> • Agencies will work together to improve the rate of diagnosis for people with early onset dementia and provide access at an early stage to a range of specialised services that address their particular needs and enable them to live well with dementia. To include not only health and social care services, but also wider services that promote their wellbeing such as financial advice and support to remain in work should they choose to do so 	<ul style="list-style-type: none"> • Improved identification of those with early onset dementia and involvement in care plans helping them to live active lives and fulfilling their hopes, dreams and ambitions up to and beyond their retirement 	<ul style="list-style-type: none"> • Support people early to prevent & treat avoidable illnesses & reduce inequalities in health 	The Dementia Strategy Multi Agency Working Group

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
	<ul style="list-style-type: none"> Agencies will work together to improve the rate of diagnosis of dementia in people with Downs Syndrome and learning disabilities ensuring that the people who understand the person's usual methods of communication are involved when a diagnosis is being explored and care plans are being put in place. 	<ul style="list-style-type: none"> Those with Downs Syndrome and learning disabilities and dementia will be identified earlier and the special challenges that they face will be recognised and the support they need put in place 	<ul style="list-style-type: none"> Support people early to prevent & treat avoidable illnesses & reduce inequalities in health 	The Dementia Strategy Multi Agency Working Group
	<ul style="list-style-type: none"> Partners to the Dementia Strategy will promote the early intervention and prevention of dementia including healthy lifestyles, healthy eating and keeping active 	<ul style="list-style-type: none"> The onset of dementia will be delayed and healthy lifestyles, both physically and mentally, will be developed in Sefton's communities. 	<ul style="list-style-type: none"> Support people early to prevent & treat avoidable illnesses & reduce inequalities in health 	The Dementia Strategy Multi Agency Working Group
<p>Support to live independently for as long as possible, and to make decisions for myself</p>	<ul style="list-style-type: none"> The Council will promote increased awareness of the needs of older people amongst those wishing to develop housing in the Borough, including the design and development of a dementia-friendly environment. 	<ul style="list-style-type: none"> There will be housing provision available that will support the needs of older people and people with dementia to live in their own homes for longer without the need for adaptations to be made. 	<ul style="list-style-type: none"> Support older people & those with long term conditions and disabilities to remain independent & in their own homes 	Sefton Council – Head of Service Regeneration and Housing

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
	<ul style="list-style-type: none"> The Council will consider, through the emerging Local Plan process, the making of a policy requiring developers to identify how best to address the housing needs of the ageing population. 	<ul style="list-style-type: none"> The future housing needs of Sefton's older population will be met, enabling them to stay in their own homes for longer, and living independent lives. 	<ul style="list-style-type: none"> Support older people & those with long term conditions and disabilities to remain independent & in their own homes 	<p>Sefton Council – Head of Regeneration and Housing</p> <p>Registered Social Landlords</p>
	<ul style="list-style-type: none"> Partners will provide support and advice to people with dementia and their carers to enable them to keep as healthy and active for as long as possible and prevent further ill health including:- <ul style="list-style-type: none"> eating a healthy diet maintaining a healthy weight exercising regularly Not drinking too much alcohol Stopping smoking Keeping blood pressure at a healthy level 	<ul style="list-style-type: none"> People with dementia and their carers will have improved health and wellbeing and be able to manage their condition themselves, with support, for as long as possible. 	<ul style="list-style-type: none"> Support people early to prevent & treat avoidable illnesses & reduce inequalities in health 	<p>The Dementia Strategy Multi Agency Working Group</p> <p>Sefton Council Director of Public Health</p>

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
	<ul style="list-style-type: none"> All Agencies will develop Dementia Friendly Workplaces 	<ul style="list-style-type: none"> People with early onset dementia will be supported to remain in employment for as long as possible 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing 	The Dementia Strategy Multi Agency Working Group
Inclusive and dementia friendly communities	<ul style="list-style-type: none"> Sefton Dementia Action Alliance will seek dementia-friendly community status for the whole of the Borough. 	<ul style="list-style-type: none"> People with dementia and their carers will have support from local communities, will not experience inequality as a result of their condition and will be able to live as normal a life as possible for as long as they can. 	<ul style="list-style-type: none"> Build capacity & resilience to empower & strengthen communities 	Dementia Action Alliance
	<ul style="list-style-type: none"> The Dementia Strategy Multi Agency Working Group will co-ordinate the development of an area based approach to “Dementia Friendly Sefton” by the creation of more dementia friendly areas across the whole of the Borough. 	<ul style="list-style-type: none"> People with dementia will feel safe and supported in their home and community, which includes shops and pubs, sporting and cultural opportunities. 	<ul style="list-style-type: none"> Build capacity & resilience to empower & strengthen communities 	The Dementia Strategy Multi Agency Working Group

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
	<ul style="list-style-type: none"> All partner agencies will sign up to the “Dementia Friends” programme by requiring staff to undertake dementia friends training resulting in more Dementia Friendly services, businesses, services and shops. 	<ul style="list-style-type: none"> There will be increased understanding of the needs and behaviours of people with dementia which means that they will be able to be as independent as possible for as long as possible 	<ul style="list-style-type: none"> Build capacity & resilience to empower & strengthen communities 	The Dementia Strategy Multi Agency Working Group
	<ul style="list-style-type: none"> The development of Sefton Library Services as a resource for people with dementia, their carers, families and professionals including the “Sefton Lost Voices Project” and memory boxes to evoke memories and start conversations and maintain relationships and memories. 	<ul style="list-style-type: none"> People with dementia and their families will have an ‘aide-memoire’, as the person’s memory begins to fade and as a keepsake once the person is lost to the family 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing 	Sefton Council – Head of Service Communities

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead Officer
Information, advice and support for people with dementia and their carers	<ul style="list-style-type: none"> Agencies will provide information about long-term symptoms, what will happen as dementia progresses and where to go for advice and support and this will be in a format that is easy to understand. 	<ul style="list-style-type: none"> There will be enough information and advice for people with dementia and their carers to make decisions about managing, now and in the future, as their dementia progresses 	<ul style="list-style-type: none"> Support older people & those with long term conditions and disabilities to remain independent & in their own homes 	The Dementia Strategy Multi Agency Working Group
	<ul style="list-style-type: none"> All Partner agencies will take a co-ordinated approach to providing information and signposting people with dementia and their carers to the most appropriate agency to obtain information, support and guidance. 	<ul style="list-style-type: none"> People with dementia and their carers will know where to get the support and guidance they need and will not need to repeat their stories to different agencies 	<ul style="list-style-type: none"> Support older people & those with long term conditions and disabilities to remain independent & in their own homes 	The Dementia Strategy Multi Agency Working Group

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
End of Life Services, ensuring a peaceful and pain free death in the place of choice	<ul style="list-style-type: none"> The Sefton End of Life Strategy will include support for people with dementia and their carers 	<ul style="list-style-type: none"> People with dementia will be able to plan for their end of life, enabling them to die free from pain, fear and with dignity, cared for by people who are trained and supported in high quality palliative care, in the place of their choosing 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing 	South Sefton Clinical Commissioning Group and Southport & Formby Clinical Commissioning Group
	<ul style="list-style-type: none"> Those agencies working with People with Dementia and their carers will ensure that their wishes with regard to their palliative and end of life care are carried recorded and carried out where this is practicable. 	<ul style="list-style-type: none"> Improved end of life care for people with dementia 	<ul style="list-style-type: none"> Promote positive mental health and wellbeing 	South Sefton Clinical Commissioning Group and Southport & Formby Clinical Commissioning Group

Appendix 1 – Action Plan

Objectives	Actions	Outcomes	Relates to Health & Wellbeing Strategy Objective	Lead
Sefton Dementia Strategy Equality Analysis Report	<ul style="list-style-type: none"> Gather further feedback or evidence on the gaps of our understanding as identified in the Equality Analysis Report 	<p>Improved understanding of the needs of the protected groups and how relevant evidence has been used to understand the potential equality impacts</p> <p>Update Equality Analysis Report</p>	<ul style="list-style-type: none"> All 	<p>The Dementia Strategy Multi Agency Working Group</p>