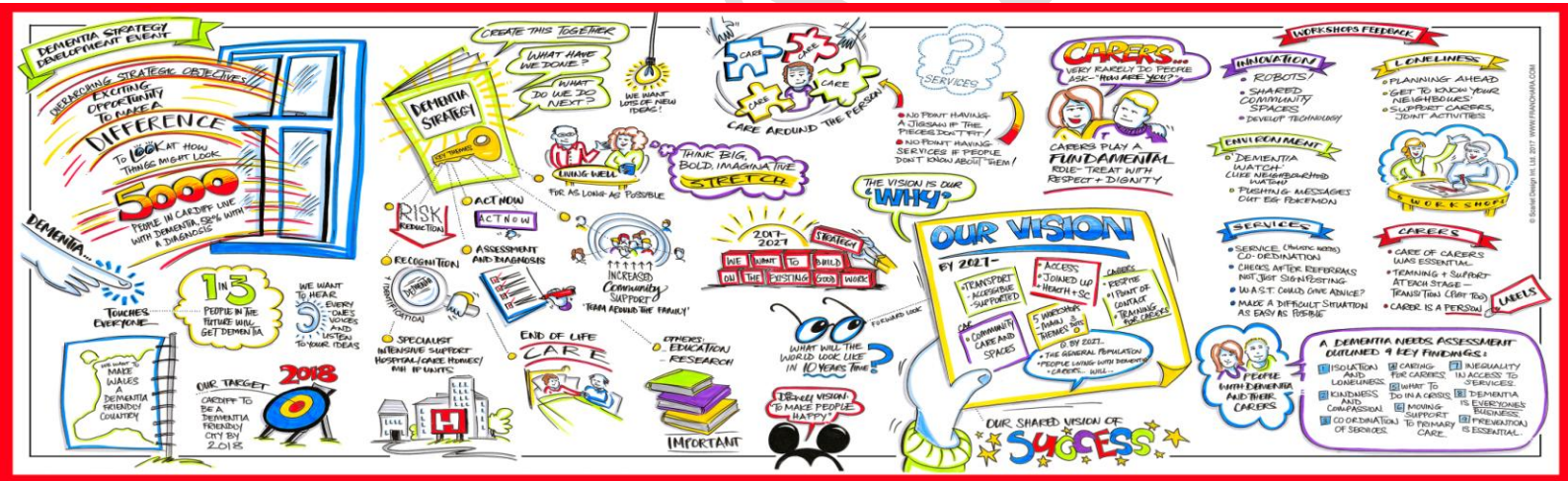




# Cardiff and Vale DRAFT Dementia Strategy 2017-2027



## Acknowledgements

Thanks go to all who participated in the focus groups, interviews, dementia strategy development event and steering group: including people with dementia and their carers, service providers and many third sector organisations.

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## FOREWORD

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To be completed

*"Don't be afraid of new ideas. Be afraid of old ideas. They keep you where you are and stop you from growing and moving forward."*

Anthony Robbins

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## EXECUTIVE SUMMARY

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The vision and strategic objectives for this strategy were produced through the Dementia Needs Assessment, by consensus at the Dementia Strategy Development Event in March 2017, and through consultation.



The vision is:

By 2027 the whole population of Cardiff and the Vale of Glamorgan will be dementia aware and will reduce their risk of dementia. Nobody will fear a diagnosis of dementia for themselves or others.

People with dementia will have equitable and timely access to a diagnosis; they will have seamless tailored care delivered locally with kindness. Carers will feel supported and empowered.

The nine strategic objectives are:

1. Dementia is everyone's business
2. Prevention is essential
3. We will combat isolation and loneliness
4. Services will be fully coordinated
5. Services will be delivered with kindness and compassion
6. Support will be moved to Primary Care
7. Carers will be cared for
8. Crises will be avoided
9. Access to services will be equitable

All actions in the action plan for dementia will fall under the nine key strategic objectives. Action areas incorporate high level aspirations, and will take time to achieve fully. Through working in partnership, we will aspire to meet the actions by their target dates.

## INTRODUCTION

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Older people are an important and growing population in Cardiff and the Vale of Glamorgan. To stay well we need to work together as a community to provide opportunities to maintain good health and then care and support for people when their health deteriorates.



In Cardiff and the Vale of Glamorgan we want to do two things: to help people live healthier lives so that the number of new people with dementia decreases over time and to make positive changes for people with dementia, their carers, families and friends.

Dementia describes a set of symptoms that may include memory loss and difficulties with thinking, problem-solving or language. It is caused when the brain is damaged by diseases such as Alzheimer's disease or a series of strokes. Dementia is progressive, which means the symptoms will gradually get worse. Dementia is rare for people under 65 years, but becomes progressively more common as people age.

In recent years there has been an increased focus on dementia both nationally and locally because the population is ageing, and this has led to increasing numbers of people with dementia. There are approximately 5,000 people living with dementia in Cardiff and the Vale of Glamorgan. It is estimated that approximately two-thirds of people living with dementia live in the community, with one-third living in residential or nursing care homes. Whilst Cardiff and the Vale of Glamorgan has the highest level of diagnosis in Wales at 58%, Wales has the lowest rates of dementia diagnosis of any part of the United

Kingdom. A large number of people are therefore living without a formal diagnosis, hindering their access to relevant support and services.

There are high economic costs associated with dementia which include health and social care costs as well as the cost of unpaid care. The overall economic impact of dementia in the UK has been estimated as £26.3 billion. Across the statutory sectors in Cardiff and the Vale of Glamorgan, the cost of providing direct dementia services is more than (TBC).

This strategy has been developed as a partnership by the University Health Board with Cardiff Council and the Vale of Glamorgan Council together with local partners from the third sector, as well as through talking to people with dementia, their carers, staff and service providers about their experiences.

This Strategy has a 10 year time frame to allow long term planning, this is especially important when planning housing and hospital provision which will take a substantial time to develop and implement.

The Cardiff and Vale of Glamorgan Dementia Strategy will:

- Set out the vision for what we want to achieve by 2027
- Better co-ordinate work
- Identify key priorities for what needs to improve
- Engage local people in discussion on what works best for them
- Ensure that we keep people with dementia at the heart of what we do

## POLICY CONTEXT

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There are a number of national policies which are relevant to the prevention of dementia and services for people with dementia and their carers. These are summarised below:

### THE SOCIAL SERVICES AND WELL-BEING (WALES) ACT 2014

The Social Services and Well-being (Wales) Act 2014 came into effect in April 2016 to improve the well-being of people who need care and support, and carers who need support.

The new Act promotes a range of help available within the community to reduce the need for formal, planned support and is based on the premise that:

- Services will be available to provide the right support at the right time
- More information and advice will be available
- Assessment will be simpler and proportionate
- Carers will have an equal right to be assessed for support
- There will be stronger powers to keep people safe from abuse and neglect

Part 9 of the Social Services and Well-being Act requires local authorities to make arrangements to promote cooperation with their relevant partners and others, in relation to adults with needs for care and support and carers. The Act also encourages partnership arrangements between local authorities and local health boards.

The Social Services and Wellbeing (Wales) Act 2014 introduced a duty on local authorities and Local Health Boards to prepare and publish an assessment of the care and support needs of the population, including carers who need support. The population needs assessment was undertaken between February 2016 and January 2017. The Cardiff and Vale Dementia Health Needs Assessment (February 2017) which describes unmet health needs of people with dementia and carers was used to inform the population needs assessment.

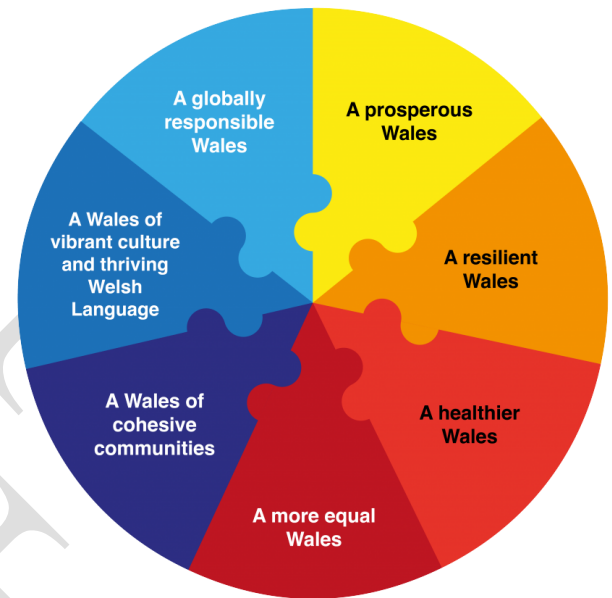


## WELL-BEING OF FUTURE GENERATIONS ACT (WALES) 2015

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The Well-being of Future Generations Act (Wales) 2015 came into effect in April 2016. This Act is about improving the social, economic, environmental and cultural well-being of Wales. It gives a legally binding common purpose – the seven well-being goals – for national government, local government, health boards and other specified public bodies. It details the ways in which these public bodies must work, and work together, to improve the well-being of Wales.

The Act will make public bodies think more about the long term, work better with people and communities and each other, look to prevent problems and take a more joined-up approach. This law requires public bodies to act in a sustainable way.



## PARLIAMENTARY REVIEW INTO THE FUTURE OF HEALTH AND SOCIAL CARE IN WALES

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The establishment of a Parliamentary Review into the long-term future of health and social care in Wales is a key commitment in the Welsh Government's Programme for Government launched in September 2016. The independent panel of experts, established in November 2016, is tasked with producing a report in 12 months focusing on the sustainability of health and social care in Wales. The Terms of Reference for the report are to:

- Define the key issues facing health and social care
- Identify where change is needed and the case for change
- Set out a vision for the future including moving health and social care forward together, developing Primary Care services out of hospitals

- Advise on how change can be delivered, building on the positive aspects of the current system

## WELSH GOVERNMENT'S DRAFT NATIONAL DEMENTIA STRATEGY 2017-2022

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Welsh Government's Draft National Dementia Strategy 2017-2022 was published in January 2017. The key themes from the Strategy are:

- Risk reduction and health promotion
- Recognition and identification
- Assessment and diagnosis
- Living as well as possible for as long as possible with dementia
- The need for increased support in the community
- More specialist care and support
- Supporting the plan:
  - Education and training
  - Research

## OLDER PEOPLE'S COMMISSIONER'S REPORT DEMENTIA: MORE THAN JUST MEMORY LOSS

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The Older People's Commissioner's Report details the extensive interviews that were held with people across Wales. This research gave people living with dementia and their carers a voice, to drive the change to improve support and services for people living with dementia and their carers. Key conclusions included:

- There is a widespread lack of knowledge and understanding of dementia amongst professionals and the wider public
- Dementia services lack the flexibility to effectively meet the needs of people living with dementia and their carers

- A lack of cooperation between services creates unnecessary difficulties and barriers for people living with dementia and their carers
- The combination of the factors set out above results in significant variation and inconsistency in the experiences of people living with dementia and those who care for them

## CARDIFF AND VALE DEMENTIA HEALTH NEEDS ASSESSMENT

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In preparation for the new 10 year strategy, the Partnership completed and published a Dementia Needs Assessment in February 2017. The Dementia Health Needs Assessment triangulated data from the following sources: reviewing existing data; holding a focus group with people with dementia; interviewing 27 carers, staff and stakeholders. From this work nine key themes were identified:

1. **Dementia is everyone's business** - All of the groups that were interviewed thought that dementia was everyone's business. There was acknowledgement that, as with any illness, the society that we live in can adapt to make life easier for people with dementia. The dementia friendly communities and dementia friends schemes were seen as a large part of this solution, with recognition that dementia friendly environments also play a part.
2. **Prevention is essential** - All groups thought that the key messages around prevention of dementia need strengthening and further campaigning. There is limited public knowledge of the six steps that people can take to reduce the risk of dementia: be physically active; maintain a healthy weight; be socially and mentally active; avoid drinking too much alcohol; stop smoking; and commit to review your health.
3. **Isolation and loneliness** was identified by people with dementia as a major issue. Loneliness puts individuals at greater risk of further cognitive decline. Transport was a big factor in this isolation, with most people with dementia unable to drive.
4. **Co-ordination of services** - Whilst much work has been undertaken to improve the co-ordination of services there is still

room for improvement. This was recognised by staff, carers and people with dementia.

5. **Kindness and compassion** - There was a consensus from the different groups that all people with dementia should be treated with kindness and compassion, and that staff need to be trained not just in the basics but to the level where they feel confident and can enjoy caring for people with dementia.
6. **Moving support to Primary Care** - All participant groups (people with dementia, carers, and professionals) thought that primary care was where support should lie. This will require further training, support and development to ensure that primary care feel supported to deliver the services that are required.
7. **Caring for carers** - The value of caring for the carers of people with dementia is recognised. The wellbeing of carers has a direct impact on the quality of life for people with dementia.
8. **What to do in a crisis** -The need for much more information about what to do in a crisis was highlighted by carers and staff. In addition, timeliness of services was seen as important. Carers often only ask for help when crisis occurs, and they therefore need support quickly.
9. **Inequality in access to service** - All respondents thought that there was unwarranted inequality in access to services. Carers described having to “fight for services.” There was widespread concern that without the family requesting services people with dementia would not have access to all the services that they need.

These themes have been used as the key themes for the Dementia Strategy 2017- 2027 as they are the main issues that were identified by the local stakeholders, staff and service users and carers.

## STRATEGY DEVELOPMENT

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In order to produce this strategy we held an event on 14 March 2017 to gather views on what the vision should be and to gather ideas for improvements. As part of this we undertook an exercise to help prioritise actions that had been suggested for both acceptability and compatibility.

This strategy describes the vision and strategic objectives for dementia for the next ten years. The time frame of ten years was chosen to allow planners to consider longer term initiatives such as new housing developments in relation to dementia.



## VISION STATEMENT

This vision statement is a culmination of the views put forward as part of the Dementia Health Needs Assessment and the new world described in the visioning session held at the Dementia Strategy Development Event in March 2017 by a group which included people with dementia, carers, stakeholders and service providers.



It identifies three areas we need to work on over the next ten years: the whole population; people with dementia; and their carers.

This vision statement was created from the work of the five groups' ideas on the day.

### Our Vision is:

By 2027 the whole population of Cardiff and the Vale of Glamorgan will be dementia aware and will reduce their risk of dementia. Nobody will fear a diagnosis of dementia for themselves or others.

People with dementia will have equitable and timely access to a diagnosis; they will have seamless tailored care delivered locally with kindness. Carers will feel supported and empowered.

## STRATEGIC OBJECTIVE 1 - DEMENTIA IS EVERYONE'S BUSINESS

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There is wide acknowledgement of the stakeholders, staff, carers and people with dementia that dementia is everyone's business. There is also a shared understanding that as with any illness, the society that we live in can adapt to make life easier for people with dementia and their carers.

The dementia friendly communities and dementia friends schemes were seen as a large part of this solution, with recognition that dementia friendly environments also play a part.

"I could see a situation where shops, premises, buildings, roads, parking, community facilities and other things were absolutely geared up (in the way that disability has been tackled) to understand what could be done to help people who have got memory problems. I don't think it's impossible to have a high street area that is absolutely geared up for people with dementia. It would not only help people with dementia but all of us."  
(Professional)

### **The five areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. All new buildings should be dementia friendly.
2. Signage should be clear, and standardised, like road signs are. This consistency ideally with symbols as well as words will help if people with dementia change environment, for example ward of a hospital.
3. Shared living schemes were popular as a potential solution, and Cardiff particularly has a large population of students who may benefit from this. It was acknowledged that whilst work may start on this in the first three years it may take a longer time frame to pilot this solution.
4. The work to make more areas of Cardiff and the Vale of Glamorgan Dementia Friendly Communities should continue.
5. A 'neighbourhood watch' for people with dementia should be piloted.



## **For the future years the following issues should be tackled:**

- Care homes could include integrated nursery facilities to encourage intergenerational interactions
- Safe areas should be identified in built up areas, e.g. libraries where quiet, safe areas are available and promoted to people with dementia and their carers
- Work with planners and designers to understand the issues for people with dementia and their carers should commence to held 'design out' problems with new buildings
- Green space should be designed to be dementia friendly
- Slow lanes should be introduced in supermarkets for people with dementia and others who wish to take things at a slower speed
- Dementia Friends training should be mandatory for all public facing staff in Cardiff and the Vale of Glamorgan

### **STRATEGIC OBJECTIVE 2 - PREVENTION IS ESSENTIAL**

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All groups thought that the key messages around prevention of dementia need strengthening and further promotion. There is limited public knowledge of the six steps that people can take to reduce the risk of dementia: be physically active; maintain a healthy weight; be socially and mentally active; avoid drinking too much alcohol; stop smoking; and commit to review your health.



Age is considered the highest risk factor for dementia, and the percentage of older people in the population is increasing. There is evidence for midlife healthy lifestyle approaches to delay or prevent onset of dementia.



National Institute for Care and Health Excellence (NICE, 2015) recommends:

- Encouraging healthy behaviours
- Integrating dementia risk reduction prevention policies
- Raising awareness of risk of dementia, disability and frailty
- Producing information on reducing the risks of dementia, disability and frailty
- Preventing tobacco use
- Improving the environment to promote physical activity
- Reducing alcohol related risk

**The three areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Raising awareness of prevention messages should start with children.
2. Children should be linked to older adults in a safe structured environment to benefit both groups with intergenerational interactions.
3. The message “What’s good for your heart is good for your brain” should be considered for a promotional campaign across Cardiff and the Vale of Glamorgan.

**For the future years the following issues should be tackled:**

- Green space should be designed to be dementia friendly
- The existing GP referral scheme to encourage physical activity should be inclusive for people with dementia
- Mid life interventions should be considered to promote the messages around risk reduction

## STRATEGIC OBJECTIVE 3- WE WILL COMBAT ISOLATION AND LONELINESS

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Isolation and loneliness were identified by people with dementia as a major issue. Loneliness puts individuals at greater risk of further cognitive decline. Transport was a big factor in this isolation, with most people with dementia being unable to drive.



### **The five areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Accessible and dementia friendly transport options are required.
2. Drivers of buses, taxis and community transport need training on dementia.
3. The third sector should lead on the reduction of loneliness in people with dementia across Cardiff and the Vale of Glamorgan.
4. Intergenerational activities for people with dementia were the most popular solutions to loneliness and should be expanded.
5. Shared living schemes were popular as a potential solution, and Cardiff particularly has a large population of students who may benefit from this. It was acknowledged that whilst work may start on this in the first three years it may take a longer time frame to pilot this solution.

### **For the future years the following issues should be tackled:**

- Joint respite activities for people with dementia and their carers were seen as an important step
- Closer neighbourhoods and activities to promote neighbourliness were seen as a possible solution to reducing loneliness
- Digital inclusion is a potential solution to loneliness
- Further befriending services should be provided to meet demand

- General advice on how to interact with people with dementia for the general public would be helpful, and could improve impromptu everyday interactions

#### **STRATEGIC OBJECTIVE 4 - SERVICES WILL BE FULLY COORDINATED**

Whilst much work has been undertaken to improve the coordination of services there is still room for improvement. This is an important area for people with dementia who value continuity and carers who feel that there is duplication in the system.

**"I had all these different people tramping through my house every day. I appreciate they need to come to the house, but it helps if it is the same people. It was terrible for (name of PWD) as he had no continuity." (Carer)**

**The three areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Social care and health services should be fully co-ordinated.
2. All information should be given to services only once; this information (with permission) should be shared across all relevant agencies.
3. There should be a single point of access for all dementia services in Cardiff and the Vale of Glamorgan.

**For the future years the following issues should be tackled:**

- Not only should health and social care services be fully coordinated further third sector services should be seamless and integrated
- The funding discussions between health and social care that can occur should be taken away from the people with dementia and their families to reduce distress and anxiety
- Research proposals should be put forward that are co-ordinated and sustainable across multiple agencies

- Ideally online real time support should be available to help carers when they need help

## STRATEGIC OBJECTIVE 5 - SERVICES WILL BE DELIVERED WITH KINDNESS AND COMPASSION

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There was a consensus from the different groups that all people with dementia should be treated with kindness and compassion by all. In the context of paid care staff, they need to be trained not just in the basics but to the level where they feel confident and can enjoy caring for people with dementia.



### **The three areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. There should be a person-centred approach to care and support, which should be needs led, not service led.
2. All staff who come into contact with people with dementia should have a level of training appropriate to their role.
3. The cultural consequences of the progression of dementia needs to be reflected by services.

### **For the future years the following issues should be tackled:**

- The changing needs of people with dementia should be recognised and carefully managed over time

- The changing needs of carers should be recognised and carefully managed over time
- Volunteers and the workforce will help to break down cultural barriers to accessing services
- Staff will have the time and empathy to show kindness and compassion in every interaction
- Evaluation of services will include the levels of kindness and compassion of paid staff

## STRATEGIC OBJECTIVE 6 - SUPPORT WILL BE MOVED TO PRIMARY CARE

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All participant groups (people with dementia, carers, and professionals) thought that primary care was where support should lie. This will require further training, support and development to ensure that primary care feel supported to deliver the services that are required.



### **The three areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. More primary care staff should be trained to have a thorough understanding of dementia.
2. More use should be made of the whole primary care team at every GP practice.
3. The information prescription model should be used in primary care.

### **For the future years the following issues should be tackled:**

- Primary care should work with families to help improve family awareness

- Primary care should be involved and included in the support plan for individuals
- The number of GPs with a special interest in dementia should increase to meet the increasing need in the population

## STRATEGIC OBJECTIVE 7 - CARERS WILL BE CARED FOR

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The value of caring for the carers of people with dementia is recognised. The wellbeing of carers has a direct impact on the quality of life for people with dementia.



### **The four areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Accessible and flexible respite is necessary.
2. Training for carers is required. This would also provide peer support.
3. A single point of contact for carers is needed.
4. Carers should be able to retain their own sense of identity through activities and hobbies.

### **For the future years the following issues should be tackled:**

- Carers need emotional support when moving through the different stages of dementia
- There are particular issues around toileting and the need for coping strategies to address this
- The support that employers should offer carers is often poorly understood
- The level of need for carers to get help is very substantial

- The 24/7 nature of caring, and sleep deprivation in carers is a problem
- Depression in carers is an issue
- There is a reluctance of carers to accept help as they worry it will not be of high quality which needs to be addressed
- There is a need for more support for carers at evenings and weekends
- The post-caring transition and how carers can help other carers needs to be explored
- Relationships with their relatives will change and advice on what to expect and how to cope with this is needed
- The risk of financial hardship for carers as a result of giving up work is recognised and needs addressing

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#### STRATEGIC OBJECTIVE 8 - CRISES WILL BE AVOIDED

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The need for much more information about what to do in a crisis was highlighted by carers and staff. In addition, timeliness of services was seen as important. Carers often only ask for help when a crisis occurs, and they therefore need support quickly.

**The five areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Support for carers is crucial in preventing a crisis.
2. Carers should be actively supported to look after their own health.
3. There should be one single number to call in a crisis.
4. Crisis work should be undertaken in conjunction with the Welsh Ambulance Service Trust.
5. What to do in a crisis should be clearly identified in every care plan.

### **For the future years the following issues should be tackled:**

- A repository of all available services which is available, updated and promoted should be maintained to help prevent crises
- Appropriate crisis response services should be further developed
- More training, advice, guidance and peer support may help carers

### **STRATEGIC OBJECTIVE 9 - ACCESS TO SERVICES WILL BE EQUITABLE**

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There is consensus that there is inequality in access to services which is unwarranted. Carers described having to “fight for services.” There is widespread concern that without the family requesting services that people with dementia would not have access to all the services that they needed.

### **The six areas identified at the Dementia Strategy Development Event to prioritise in the first three years are:**

1. Care for those without carers and with carers should be equitable.
2. Care and support should be equitable in rural and urban areas.
3. Geographical inequalities should be addressed.
4. Different transport needs should be acknowledged and addressed.
5. Data on protected characteristics and geographical location (as a proxy for socio economic group) should be collected to assess any further inequalities that need to be addressed.
6. Support groups for Welsh language speakers are required locally.



**For the future years the following issues should be tackled:**

- If the data collection shows any further inequalities (e.g. minority ethnic group having lower diagnosis rates), then specific interventions to address any inequalities can be investigated
- Specific evidence based interventions to address inequalities in dementia care should be further explored

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## DELIVERY

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To ensure we are making progress towards the strategic objectives laid out in this strategy we will enhance our monitoring and evaluation processes. We will work to improve the quantity and quality of data that is collected. This will include focused activities on monitoring the accessibility of dementia services and redressing any imbalance in diagnosis rates in areas of deprivation.

The partnerships responsible for planning dementia care across Cardiff and the Vale of Glamorgan are ultimately responsible to the Regional Partnership Board and this group will take responsibility for ensuring a strong evaluation plan is in place and is regularly reviewed.

Several participants in the Dementia Health Needs Assessment referenced the need to integrate actions into existing plans to aid delivery, rather than having a separate framework, strategy and plan that sits outside the standard delivery mechanisms. Whereas, others felt it was important to have a separate document that spelled out the direction and all the related actions. This document sets the direction through the overarching vision and describes actions for the first three years in the action plan. It will however be important to encourage partners to include their actions in their own plans, rather than the actions listed here being 'in addition' to the normal workload. This is therefore given its own action point under 'Co-ordination of Services'.

### DEMENTIA PLAN 2014-2017

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The Cardiff and Vale 3 Year Dementia Plan has been in place since April 2014 and ended in March 2017. It has been a driver for much improvement over the last three years. A summary of the actions completed through the existing Dementia 3 Year Plan include:

- Pilot dementia supportive community areas implemented and both received recognition status
- Roll out of Making Every Contact Count
- Telecare/telehealth strategies being implemented
- Dementia Champions Network developed

- '10 minutes of your time' survey widely implemented (within a Mental Health inpatients setting)
- Existing training provision scoped across health and social care, and a future model created
- SPIDER project in reablement services completed
- Mini audit of general hospital inpatients completed
- Single point of access for urgent and emergency referrals within Mental Health created
- Anti-psychotic checklist and dementia drugs pathway ratified and launched
- The refocusing model, within current resource limitations, is fully applied
- Length of stay for people with dementia audited
- District General Hospital Liaison Psychiatry for Older People Service developed
- Carers education pathway developed
- Training on non-pharmacological methods in behaviour management rolled out, covering health and social care staff in pilot areas

The key outstanding actions for Year 3 to be carried forward include:

- To develop memory services capacity further to cope with increasing demand
- To develop the quality of residential and nursing care home placements if appropriate and consider supported living options
- To develop standard guidance on how to conduct an anti-psychotic medication review
- To implement Dementia '2 minutes of your time' Carers survey widely
- To develop respite opportunities by assessing need and then rolling out the new opportunities

- To increase the opportunities for different respite opportunities and publicise them
- To increase opportunities for people with dementia to die at their place of choice
- To roll out of dementia supportive communities pilots, with evaluation of the pilots and consideration given to integrating these across all Cardiff and Vale communities
- To develop primary care Quality and Outcomes Framework 15 month review to a standardised template and train primary care clinicians
- To re-audit the prescribing of anti-psychotics in people with dementia

#### MONITORING OF PROGRESS ON THE 2017-2027 DEMENTIA STRATEGY AND ACTION PLAN

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The current Dementia Taskforce acts as a multi-agency steering group and has overseen the delivery of the Cardiff and Vale of Glamorgan Dementia 3 Year Plan 2014- 2017, and the development of this new 2017-2027 Strategy and Action Plan. From May 2017 this structure will change, and there will be a small Commissioning Group, with a larger Delivery Group, with the latter delivering on the actions set out in the new Dementia Strategy and associated Dementia Action Plan (see Appendix).

## APPENDIX: DEMENTIA ACTION PLAN

Primary responsibility
Secondary responsibility

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
1	<i>Develop a strategic dementia services integrated commissioning plan for dementia that addresses equality and equity of service provision</i>						X	X	X	X		X	X	X	X
2	<i>Dementia related workforce development must address the needs of diverse communities</i>						X					X			X
3	<i>All current and future dementia service</i>									X			X	X	X

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
	<i>developments and resulting services must be subject to an equality impact assessment/EHIA</i>														
4	<i>Develop and implement a multi-agency dementia workforce development plan in line with the Good Work Framework.</i>						X	X			X	X	X	X	X
5	<i>Deliver multi-agency co-ordination of training and development resources in relation to dementia</i>						X	X		X	X				
6	<i>Promote accountability across staff with management responsibility with regards to dementia awareness training for staff</i>						X			X	X			X	X

	Action	Completion Date	Responsible organisation(s)				Strategic objective									
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9	
7	<i>Incorporate dementia awareness training into the mandatory staff training requirements of the health board and both local authorities</i>						X	X				X			X	X
8	<i>Define and deliver outcomes across all primary care and community service outcomes for dementia through the integrated commissioning plan.</i>										X		X		X	X
9	<i>Health Board to implement a joint management arrangement between mental health and medicine for the memory team and related services</i>										X					X

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
10	<i>To agree, publish, and routinely review the pathway to a diagnosis across all relevant primary, community and secondary care services</i>									X		X		X	X
11	<i>Remodel and re-commission day service provision for individuals with dementia in Cardiff</i>						X	X	X	X			X	X	
12	<i>Develop and publish clinical prescribing protocols and guidance for dementia</i>								X				X		
13	<i>Develop, agree and publish a post-diagnostic primary and community care services pathway.</i>								X		X		X	X	



	Action	Completion Date	Responsible organisation(s)				Strategic objective									
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9	
14	<i>Develop all secondary care admissions procedures to improve information gathering, assessment and care planning that takes dementia into consideration (For example using the 'Read about me' tool)</i>						X			X					X	X
15	<i>Consider the viability of introducing the information prescription model for individuals diagnosed with dementia, their carers and family</i>									X	X		X	X		
16	<i>Standardise the questions and referral responses in all health and social care first points of contact with regards to dementia</i>						X			X	X		X	X	X	

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
17	<i>Develop a systematic approach to establishing the non-clinical components of a dementia care plan</i>							X	X		X		X	X	
18	<i>Deliver continuous improvement, quality and value for money across the residential and supported living sectors</i>										X	X			X
19	<i>Improve the quality of residential and nursing care home sector</i>										X	X			X
20	<i>Establish partnership commissioning and delivery structures to support the strategy</i>						X				X		X		X
21	<i>Develop, agree and implement a multi-agency data and performance information framework</i>										X				X

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
	<i>across all dementia services</i>														
22	<i>Map current dementia provision into a live resource that can be continually updated and improved</i>						X			X			X	X	X
23	<i>Help other local groups/committees to embed dementia actions into their work</i>						X			X					
24	<i>Develop and agree a long term research and development programme for dementia that brings together the work of the statutory partner agencies, third sector and the academic community</i>							X							

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
25	<i>Develop and publish guidance on avoiding, identifying and responding to crisis for carers and family members</i>								X	X				X	
26	<i>Ensure that “What to do in a crisis” is clearly identified in every dementia care plan</i>									X				X	
27	<i>Ensure the dementia commissioning plan improves the pathways and experience of end of life for those with dementia and their carers</i>									X	X		X		X
28	<i>Ensure that dementia performance information includes appropriate measures regarding end of life</i>									X					X

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
29	Complete an audit of respite opportunities, and address identified gaps or unmet needs through service commissioning								X				X	X	X
30	Prioritise support for carers, ensuring that the carer feedback is used to support co-production												X	X	X
31	Consolidate carer support services including single point(s) of contact, access to training and support, promoting carer wellbeing, and guidance on carer roles within a dementia care plan												X	X	X
32	Incorporate health promotion, prevention, education, and public awareness into the dementia commissioning plan						X	X	X		X				

	Action	Completion Date	Responsible organisation(s)				Strategic objective								
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9
33	<i>Amend the narrative supporting interventions such as smoking cessation, exercise referral etc. to include dementia</i>						X	X							
34	<i>Continue to use and improve DEWIS CYMRU website as a source of information</i>						X		X	X					X
35	<i>Develop and publish guidance and standards on dementia friendly environments</i>						X			X	X				X
36	<i>Design and implement a series of community projects aimed at improving the quality of life of those with dementia, their carers and families</i>								X	X	X		X	X	

	Action	Completion Date	Responsible organisation(s)				Strategic objective									
			UHB	LA	Third sector	Other	SO1	SO2	SO3	SO4	SO5	SO6	SO7	SO8	SO9	
37	<i>Influence and develop the strategies and plans of other public services to improve outcomes for those with dementia</i>						X	X	X	X						X

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