

# Dementia Joint Strategic Needs Assessment (JSNA)

Health and Wellbeing Board

Date: 10<sup>th</sup> July 2013

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Author: Acting Director of Public Health

Wards: All

Locality Affected: All

Parishes Affected: All

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## 1. Purpose and Reasons

- 1.1 To inform the Health and Wellbeing Board (HWB) of the Dementia JSNA, seek support for its recommendations and raise awareness of the issues facing people with dementia in Swindon
- 1.2 The Dementia JSNA is an objective analysis of the current and future needs of people with dementia in Swindon. Based on available data, it identifies the current population, services used, risk factors and includes views from service users, carers and different organisations involved in supporting people with dementia. The recommendations from the Dementia JSNA together with national guidance, quality standards and good practice will inform the development of a Dementia Strategy and Action Plan for Swindon.

## 2. Recommendations

The Committee is recommended to:

- 2.1 Note and agree the recommendations from the Dementia JSNA Bulletin.
- 2.2 Support the development of a Dementia Strategy and Action Plan for Swindon
- 2.3 Identify how the Board would like to be kept up to date on progress on dementia work in Swindon

## 3. Detail

- 3.1 Dementia was identified as a priority for Swindon from the 2012 Joint Strategic Needs Assessment, leading to a dementia specific JSNA focusing on the needs of those with or at risk of dementia in Swindon.
  - 3.2 Dementia causes damage to the brain resulting in a progressive decline in more than one area of function, including memory, reasoning, communication skills and the skills needed to carry out daily activities. It affects people differently depending on the type of dementia, stage of illness and the individual affected.
  - 3.3 People are more likely to have a type of dementia as they get older although it can affect people under 65, which is known as early onset dementia. As more people live longer, the number of people with dementia is likely to increase.
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Further information on the subject of this report can be obtained from Cherry Jones, 01793 444681, [cherryjones@swindon.gov.uk](mailto:cherryjones@swindon.gov.uk) or Penny Marno [pmarno@swindon.gov.uk](mailto:pmarno@swindon.gov.uk)

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- 3.4 In Swindon there are estimated to be over 2000 people over age 65 with dementia, half of which are undiagnosed. This equates to about 7% of the total population over 65.
- 3.5 The number of older people is forecast to increase in Swindon over the next 20 years. Estimates suggest an increase of 700 people with dementia by 2020.
- 3.6 The Dementia JSNA has been produced in the context of a National Strategy for Dementia and the Prime Minister's Dementia Challenge. Dementia is a national priority and funding is available for innovation projects to develop an understanding of how best people with dementia can be supported.
- 3.7 The Dementia JSNA has included consultation with officers in Swindon Borough Council, members of the Clinical Commissioning Group (CCG), staff at the Great Western Hospital and Avon and Wiltshire Mental Health Partnership, and members of the voluntary and community sector. It also reflects discussions with service users and carers: their on-going involvement in the development of a strategy and action plan will be vital.
- 3.8 Recommendations require a multi-agency and multi-sector approach to:
  - 3.8.1 Establish a dementia steering group to take work in this area forward
  - 3.8.2 Continue to develop a more detailed understanding of the role of carers and ensure the additional funding SBC are putting into caring services reflects carers' needs, recognising that people need different support at different times.
  - 3.8.3 Ensure people with memory loss who do not meet the criteria for dementia have appropriate information about adopting a healthier lifestyle and coping independently
  - 3.8.4 Encourage organisations to sign up to the Dementia Action Alliance and commit to the seven common principles defined by people with dementia and their carers:
    - I have personal choice and control or influence over decisions about me
    - I know that services are designed around me and my needs
    - I have support that helps me live my life
    - I have the knowledge and know-how to get what I need
    - I live in an enabling and supportive environment where I feel valued and understood

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I have a sense of belonging and of being a valued part of family, community and civic life

I know there is research going on which delivers a better life for me now and hope for the future

- 3.8.5 Work in partnership to improve the speed from referral to diagnosis
- 3.8.6 Develop campaigns to ensure people are aware of the risk factors for dementia and in particular that lifestyle factors such as healthy eating, physical activity and not smoking can benefit cognitive ability as well as protecting against cardiovascular disease
- 3.8.7 Encourage all staff working with the public, including GPs, to have dementia awareness training
- 3.8.8 Investigate innovative approaches to developing dementia friendly and age friendly communities which can be included as part of housing and planning development
- 3.8.9 Use the NICE quality standards developed for social care settings and services working with and caring for people with dementia inform the commissioning of services
- 3.8.10 Encourage people with dementia, even if they do not meet social care criteria, to have a named person (this may be a family member or someone from the voluntary sector) who supports them and acts as a single point of contact across organisations
- 3.8.11 Encourage partnership working to promote independence for people post diagnosis
- 3.8.12 Identify best practice for encouraging local businesses such as cafes, chemists, post offices and hairdressers to become dementia aware so people with dementia and carers know that they provide a supportive environment
- 3.8.13 Work in partnership to consider opportunities to extend support for social activities and opportunities for people to benefit from others experiencing the same challenges, and reducing the risk of social isolation. This could include extending activities using volunteers such as Singing for the Brain to year round.
- 3.8.14 Develop a briefing paper on best practice around supported and extra care housing for people with dementia to inform the planning and development of this type of housing in the future

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- 3.9 The recommendations have informed a service redesign workshop run jointly with the CCG, and a Dementia Steering Group has been established.
- 3.10 A copy of the Dementia JSNA Bulletin, as approved by the JSNA Steering Group is attached as Appendix One.

## **4. Alternative Options**

- 4.1 Not to proceed to develop a dementia strategy for Swindon

## **5. Implications, Diversity Impact Assessment and Risk Management**

### Financial and Procurement Implications

- 5.1 If additional resources are needed a detailed business case will be developed. A directory of external funding sources is being developed. Supporting people to maintain independence and stay at home has been shown to reduce costs for health and social care in the longer term.

### Legal and Human Rights Implications

- 5.2 Legal and Human rights have been taken fully into account in compiling this report. It is considered that the recommendations within this report are compatible with Convention Rights.
- 5.3 In consideration of any future guidance and an understanding of best practice from elsewhere, the council will work with the NHS and other partners in order to ensure that equalities and a respect for human rights are at the heart of the development of the Swindon JSNA and that everyone in Swindon has fair access to services and are free from discrimination.

### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.4 The Dementia JSNA highlights a number of key areas of focus that will provide the opportunity to improve outcomes for people with and effected by dementia.
- 5.5 The development of the dementia strategy and action plan will inform commissioning and the impact and actions required to positively impact on health and wellbeing outcomes for people with and effected by dementia.

### Links to One Swindon, Strategic Objectives, Plans and Policies

- 5.6 This links directly to the One Swindon priority of creating a healthy, caring and supportive place.
- 5.7 It also will help deliver the corporate priorities of 'Together, find new ways to reduce vulnerability and improve health for all' and 'Work with people and

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families to help them fulfil their potential'. The latter is particularly pertinent in seeing people with dementia as an active and involved member of the community, reducing social isolation and working creatively with people with dementia to see beyond the diagnosis.

- 5.8 Some of the recommendations are being considered as part of the adult demand programme workstreams.

## **Diversity Impact Assessment**

- 5.9 Dementia can affect everyone. The Dementia JSNA includes an assessment of its impact on different communities. Any service redesign will reflect the needs and diversity of Swindon communities. The dementia strategy will include a diversity impact assessment.

## **Risk Management**

- 5.10 No specific risks identified at this stage for this report

## **6. Consultees**

- 6.1 The Board Director Finance, Revenues, Benefits and Property (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

## **7. Background Papers**

- 7.1 None

## **8. Appendices**

- 8.1 Dementia JSNA Bulletin