Prime Minister’s challenge on dementia 2020 – implementation plan

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Summary

The Prime Minister’s challenge on dementia contains over 50 commitments intended to make England the best country in the world for dementia prevention, care and support. The challenge implementation plan sets out how the commitments will be delivered over the next five years. Some can be achieved relatively quickly while others will need time to develop, so the plan is divided into two phases.

• 2016 to 2018 – detailed actions to take place over the next 12 to 18 months.
• 2018 to 2020 – longer term actions, the details of which may change over time.

The plan has been agreed by all the delivery partners and signed off by the Dementia Programme Board and government ministers. The documents indicates that the plan was influenced by service users and carers through engagement with Dementia UK, the Alzheimer’s Society and others.

The plan describes actions across four themes:
  • risk reduction
  • health and care delivery, including workforce training and development
  • dementia awareness and social action
  • research (and global leadership).

Briefing in full

Risk reduction – preventing well

The report points to growing evidence that it is possible to reduce the risk of dementia, with about a third of cases world-wide attributable to potentially modifiable risk factors, such as smoking, excessive drinking, high blood pressure, lack of
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physical activity, diabetes, loneliness and depression. Progress in addressing risk in the last eighteen months includes the Blackfriars consensus which makes the case to reduce risk, recently published NICE guidance on delaying age-related illness by taking action in mid-life, establishing the Dementia Intelligence Network (DIN) and investment in the UK biobank.

Three key 2020 delivery priorities have been identified, and will be supported through new dementia public health observatories:

• Enhancing the dementia component of the NHS health check – the health check programme has a mandatory dementia awareness raising component for people over 65; Public Health England (PHE) will review this and will work with others to pilot risk-reduction messages for the under-65s.

• Raising awareness on reducing the risk – the One You PHE campaign to improve health at mid-life will include a dementia component, and can be used by local dementia partnerships. PHE is also working with university partners to develop a personal brain age calculator for individuals to understand their personal risk of cognitive decline. Options for embedding risk reduction messages in dementia friends and dementia champions programmes are taking place. Health Education England and Skills for Care are looking to develop dementia components in training, and there will be a dementia guide linked to the workplace wellbeing charter in place across many local authorities.

• Building on and promoting the evidence for dementia risk reduction and health inequalities – resources will be developed to support strategic planning and commissioning, including a return on investment tool. PHE and NHS England will establish a group to advise on support for people with dementia from a variety of communities, and NHS England will identify opportunities for dementia risk reduction with people with predisposing conditions such as diabetes. The Care Quality Commission (CQC) will look to including more people with early stage dementia in its experts by experience programme.

Health and care delivery

The overall aim is to establish equitable access to consistent, high standard person-centred care. A range of progress has been made in the NHS leading to improved awareness, person-centred planning and consistency. In particular, diagnosis rates have increased from under 50 per cent to 67.2 per cent. In social care, the Care Act provides the right framework for improved assessment and support. NHS England has also developed a draft treatment and care pathway – the well pathway for dementia – and commissioned an expert reference group to develop national standards for access to and delivery of care and support. Key priorities for the well pathway include the following.

Diagnosing well
Diagnosis rates will be made consistent across the country and the waiting time for results will be reduced to six weeks from GP referral.

Supporting well

Support after diagnosis for the individual and their carers was identified as a high priority by the engagement group, who pointed to people left feeling bewildered, frightened and alone post-diagnosis. Information, advice and support will be improved, and the Department of Health (DH) will publish and promote a joint declaration on post-diagnostic care, which will be rolled out locally. It will also commission a number of good practice projects building on current innovations, such as the National Museum of Liverpool’s ‘house of memories’ training for staff, and an online course for carers. The DH will seek to promote the Social Care Institute for Excellence’s (SCIE) dementia gateway to become a one-stop-shop for good practice and resources to support commissioners. There is evidence that dementia advisors can have a positive impact on reducing or delaying the need for residential care, and these should be pursued.

The report emphasises how existing policies in health and social care should be used to improve dementia support. These include the Better Care Fund, the Care Act, the NHS Five Year Forward View, the NHS Mandate, the Five Year Forward View for Mental Health and the forthcoming Law Commission report on Deprivation of Liberty Safeguards (interim report due April).

Living well – enabling people to live at home for longer

The DH will continue to support the Health and Housing Memorandum of Understanding, and will work with the Dementia and Housing group to promote good practice. NHS England will look at testing dementia-friendly options in some of the healthy new town pilots. Developing the role of technology and assistive technology provides great opportunities to improve support – this includes using familiar gadgets, such as phones, and new ones such as technology to remind people to take their medication. The DH will also work with SCIE to develop a design tool to help people to make their home more dementia friendly.

Dying well

NHS England will work with partners to make clear the good practice that should be in place for people with dementia, and the DH will work with the National Council for Palliative Care to establish a pilot scheme to improve end of life care in care homes.

Training well

The report sets out a number of measures to improve education and training in dementia care. A standardised training framework was agreed by an expert advisory group in October 2015 and will be implemented by the national education, skills and workforce organisations.
Dementia awareness and social action

Dementia is the greatest health concern for people over 55, a fear compounded by the stigma and discrimination that people with dementia experience. Progress has been made on encouraging businesses, local authorities, the wider public sector and civil society to work together to tackle discrimination through dementia friendly communities. The Alzheimer’s Society has already led the process of recruiting 1.4 million dementia friends; businesses such as Marks and Spencer and Lloyds Banking Group have created dementia-friendly workplaces; and there are over 130 dementia friendly communities, and 22 dementia friendly school pilots creating inter-generational relationships. The first awards ceremony, celebrating dementia friendly initiatives, took place in 2014.

The Alzheimer’s Society will continue to work with partners to develop dementia friendly communities and businesses. By 2020 the aim is for over half of people with dementia to live in a friendly community. The Department of Health will refresh online materials and resources for councils that want to create dementia friendly communities. Findings of the dementia friendly business pilot will be published this summer.

Research and global leadership

The document sets out plans for developing research based on priorities identified through engagement with people with dementia and their organisations:

• providing more opportunities for people with dementia and carers to be involved in research
• developing capacity in the research workforce
• coordinating and alignment of research initiatives
• encouraging interdisciplinary working and innovation.

Following the G20 dementia summit, the UK government is working with international partners to develop dementia support, including:

• piloting a new Global Dementia Observatory
• dementia friendly communities adopted in 11 countries
• a UK dementia research institute
• joint EU action
• an international prevention benchmark.

Monitoring progress

The Dementia Programme Board, chaired by Jane Ellison, Minister for Public Health and made up of senior leaders from partner organisations, will be responsible for overall monitoring of progress on the challenge. This will be supported by a Citizens Panel of people with dementia and carers who will review progress and report to the board. A formal review will take place in 2018.

The plan also describes how partners will drive and measure progress through benchmarking local performance and reporting in a transparent and accountable
way. Public Health England’s (PHE) Dementia Intelligence Network aims to provide data and intelligence that complements the NICE dementia pathway and supports improved outcomes. The dementia profile launched in January collects new and existing data at both CCG and local authority level. This covers six domains across the dementia pathway: prevalence, preventing well, diagnosing well, living well, supporting well and dying well.

The DIN has also created the first dementia catalogue which will identify and categorise dementia-related data to ensure gaps are filled and best use is made of the data. Current areas of work include making available Alzheimer’s Society data on dementia friends and champion initiatives, scoping the availability of information held by the CQC and emergency services, and aligning with the new mental health services data set.

Dementia is one of the clinical areas on which CCGs will be assessed in the Ofsted-style ratings being introduced by the government in the new improvement and assessment framework overseen by NHS England. The dementia challenge plan will be aligned with work on the NHS Five Year Forward View and sustainability and transformation plans.

Research is also being undertaken to investigate the feasibility of using patient reported outcome measures (PROMS) routinely with people with dementia with a view to inclusion in the NHS outcomes framework.

**Comment**

The implementation plan has had significant involvement from organisations and individuals with an interest in dementia and has been welcomed across the health and care sector. The big question hanging over the plan is whether there are sufficient resources to implement it effectively in the current dire financial climate. This is an extremely detailed action plan – particularly Annex two which provides a ‘roadmap to delivery’. The detail that is lacking is financial arrangements – the only costed sections are those relating to research initiatives.

Some developments will take place in the NHS – the mandate to NHS England requires it to agree an affordable dementia implementation plan – however unfortunately those relating to local government are likely to remain patchy and dependent on local prioritisation. In some areas, for instance, public health or adult social care has taken a lead on supporting dementia friendly communities, but this is not consistent across the country.

**Related briefings**

[Dementia friendly communities: sharing learning from Bradford and York](#)
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The Five Year Forward View for Mental Health

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