

**Improving care for people living with dementia and complex health needs,
across Kent and Medway**

Update for the Kent Health Overview and Scrutiny Committee (HOSC)

1. Introduction

NHS Kent and Medway Clinical Commissioning Group (KMCCG) is working with its partners to improve dementia care. There is an increased need for dementia care within the population. This work is being led by senior clinicians under the wider system leadership of the Kent and Medway Mental Health Learning Disability and Autism Improvement Board. We have commissioned additional data to support our understanding of the current use of services and the impact of population increases, as well as recent service changes in line with national best practice.

Our ambition to redesign the model of care for dementia patients, including those with complex needs and challenging behaviour, should be seen in the context of some exciting times ahead for improving mental health services in Kent and Medway. Unprecedented levels of funding and investment are available (£51m) to transform mental health services and support over the next five years. Working together as a health and care system, the Kent and Medway Mental Health Learning Disability and Autism Improvement Board – which includes representation from the NHS, local authorities, social care, and the voluntary and community sector - has big ambitions for mental health services. They include:

- Reducing the need for people to be inappropriately admitted to an acute ward (because of no suitable alternative) by improving community-based support
- Improving psychiatric intensive care for women, by developing and providing this specialist service in Kent and Medway, where currently women needing this very high level of care have to be treated out of county
- Developing specialist dementia services for people with complex needs
- Eradicating outdated and unsafe dormitory wards
- Redesigning community mental health services.

We have a great opportunity over the next five-year period, with investment in and focus on mental health, to provide better mental health services, and care which is fit for the future. Mental health care needs to be more easily accessible, provide a

greater range of services and support, and be more joined-up between all those involved in planning and delivering services.

Our intention is to engage more widely with people in Kent and Medway about their experiences, hopes and ambitions for mental health services in general, later this year but in advance of that, we have undertaken targeted engagement in support of the redesign of the care model for dementia patients which we are presenting to Kent Health Overview and Scrutiny Committee (HOSC) members for their information.

2. Work to date

Our work is based on the principle of providing the right support at the right time to enable patients to remain independent for as long as possible, as well as providing support to their families and carers. Early thinking has suggested that the development of an enhanced community model in partnership with local providers should focus on:

1. Reducing unnecessary admissions to hospital (both acute and mental health)
2. Reducing the length of stay in hospital by providing greater support in other more appropriate settings
3. Increasing supported discharges to appropriate care settings
4. Increasing the number of people with dementia (or suspected dementia) who are supported to return home following hospital discharge
5. Increasing support for carers in the community to enable them to continue with their caring roles
6. Increasing assessments for continuing healthcare conducted outside a hospital setting.

Clinical engagement

A workshop involving clinicians from a variety of backgrounds and specialisms relating to dementia care, was held in December 2019. Clinicians discussed the development of a new model of care identifying the need for:

- A community service, a dementia intensive support service, to strengthen support for people with dementia in their own homes and care homes at a time of crisis, or urgent need, with the aim of avoiding hospital admission and supporting people to remain in their usual environment wherever possible.
- A small number of specialist beds for those complex individuals with dementia and behaviours that challenge and who are not able to be managed in most care or nursing homes. Our demand and capacity work

will take these elements of the model of care into account in determining how many beds are required across Kent and Medway.

Engaging with dementia patients, their carers, families and loved ones

Attached to this update is a report of engagement undertaken between mid-October 2020 and mid-January 2021 to gather the views of people living with dementia, their families and carers, support organisations, health and care staff and the wider public.

This research was carried out to inform proposals to improve dementia care for people living with dementia and complex health needs across Kent and Medway at an early stage. It was preceded by three other pieces of research which will also help us to plan effectively:

1. Community engagement with people living with dementia, their families and carers and voluntary sector volunteers and staff, gathering views on existing support services and any additional needs or perceived 'gaps' in community based services and activities.
2. Engagement with 11 families whose loved ones with dementia and complex care needs were receiving specialist residential care at the Frank Lloyd unit run by Kent and Medway Partnership Trust, funded through Continuing Healthcare. The discussions covered both the broader proposed changes for people living with dementia and complex care needs, but focused mainly on the implications for the patients and their families of relocation to alternative long-term residential care
3. Research funded by the NIHR Applied Research Collaboration Kent, Surrey and Sussex (ARCK KSS) and carried out by the Time for Dementia Research team at Brighton and Sussex Medical School, looking the impact of the Covid-19 lockdown on dementia patients and their carers in Kent, Surrey and Sussex.

Using a variety of methodologies including a public survey, focus groups and patient and carer journals, this engagement shows there is a clear need for more support for families and carers supporting a loved one who has dementia and potentially complex needs. The need for this has been made all the more poignant by the pandemic and the pressure of being locked down with many support and public services having to work remotely. Specific suggestions and ideas were made and there was also praise for services and staff along with tangible ideas for improvement.

Undertaking this engagement activity has given us a strong foundation on which to continue to develop and hone proposals. It offers significant insight into the daily experiences of people with dementia, their carers and loved ones and also shines a light on the challenges faced by staff as they support and care for people with dementia.

3. Next steps

Using the Secretary of State's 'Four Tests' and the additional 'Fifth Test' as guiding principles for this work, we are:

- Undertaking a full review of current dementia services being provided to the cohort of dementia patients in Kent and Medway with complex needs
- Undertaking demand and capacity modelling to better understand the requirements of the Kent and Medway population both now and in the future
- Developing a robust 'case for change' for Kent and Medway
- Developing options for the future clinical model for the cohort of dementia patients with complex needs, their families and carers, considering a range of factors including clinical quality and outcomes, patient experience, access, workforce, and value for money
- Developing options for how and where the new clinical model could be delivered, aligned to national policy, clinical best practice, workforce requirements, accessibility factors, and estate capacity amongst other factors
- Ensuring clinical leadership and public and stakeholder involvement are core in developing the case for change, the proposed model of care and the options; and we plan to consult on these as appropriate
- Continuing to engage with HOSC, NHSEI, patients, carers, the public, staff and stakeholders and will carry on doing so before, during and after consultation.

4. Clinical leadership and oversight

A clinical reference group comprising primary care and secondary care clinicians has been set up to provide clinical leadership and recommendations on the proposed new model of care. Clinical model scoping work has been undertaken on the proposed new Dementia Intensive Support service for this cohort of patients.

Commissioners now want to continue development of a robust case for change, and a proposed new model of care in line with statutory duties, aiming to consult on our plans later in 2021 (subject to COVID-19-related requirements). The CCG is committed to regular engagement and formal consultation with HOSC as part of this process and will ensure that regular updates and briefings are presented to Committee members in line with statutory duties and good practice.

5. Recommendation

The Kent HOSC is asked to:

- Note and comment on the recent work to date and next steps outlined within the paper and the engagement report attached as an appendix to this update.
- Agree an appropriate date for the Kent and Medway CCG to return to HOSC to give a further update on progress on this programme, including sharing the case for change in Kent and Medway and proposed new model of care.

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KMCCG

Appendix A - attached

Improving care for people living with dementia and complex health needs, across Kent and Medway, KM CCG engagement report, February 2021