

5th July 2016

**Commissioning House
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Fareham
Hampshire
PO17 6AR**

SENT VIA EMAIL

Steve Manley
Healthwatch Hampshire

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Dear Steve,

Re: Healthwatch report looking into the experiences of people living with dementia, their carers and families, when accessing health and care services

I am writing to you in response to the recent Healthwatch report, which looked into the experiences of people living with dementia, their carers and families, when accessing health and care services.

Firstly, I would like to say how valuable it is to hear about the experiences of patients and carers living with dementia, and in particular their experiences of local health provision. Such feedback is very important to us, because it offers direct testimony from people who use NHS services, helping us to identify areas of good practice, and areas of concern where improvements may be needed. We would also like to thank Healthwatch Hampshire for positively identifying and highlighting the areas of good practice being demonstrated across Hampshire to improve the lives of those living with dementia and it is our intention to ensure this continues.

Secondly, we have not only shared your report with the adult mental health commissioning team for our two local CCGs but also our colleagues at Hampshire County Council. There has been a considerable amount of work which has taken place recently to address and improve services for patients and carers living with dementia and this process will continue. The combined response to the recommendations raised in your report from both our Clinical Commissioning Groups and Hampshire County Council is set out below.

Responses to specific key recommendations

“We recommend one point of access for signposting and support information. Healthwatch feel that the best placed organisation to do this is the Dementia Advisor Service (DAS). Patients should be referred to their local DAS who will have access to all the local services and information about relevant financial support. This should be done via email or telephone so that they can make contact with the patient and follow up on progress”.

The local NHS and Hampshire County Council is well aware of need to ensure that people can access the many sources of community-based support and there are a number of initiatives aimed at improving the way in which local people can access help, advice, and care.

Fareham and Gosport CCG has been working with the Alzheimer's Society to provide a Dementia Advisory Service and Memory Group which is a carers 'hub' based at Fareham Community Hospital every Monday, and available to all GPs to refer into, as well as to patients and their carers. The services are provided for carers and the cared for to gain both professional, and peer support and advice (including financial advice). For those unable to attend the hub, the referral service is also able to provide home visits.

The Alzheimer's Society and Andover Mind are commissioned by the County Council to increase the awareness of available financial support and how to access it, particularly for carers, via the Dementia Advice Service. The County Council has agreed that this service should prioritise an increased focus on support for carers and this is being discussed as part of the review of the service specification. It is also worth noting that although the service has been providing post-diagnostic support, it has had no control over the decisions GPs may choose to make in regard to any individual case.

The County Council has developed this specification for the Dementia Advice Services in partnership with the CCGs. The county council will encourage the service providers to develop a risk-based approach to following up the progress of their people so that rather than repeatedly contacting the same people they focus their time on those who have identified needs to ensure that the service retains capacity to support additional people. Both the CCGs and the local authority would like to see the Dementia Advice Service develop further with an increased/greater focus on support for carers. Subject to relevant approvals these arrangements will be market tested again from April 2017.

“All new health and social care settings commissioned, built or re-designed should consider the needs of patients with dementia and become ‘dementia friendly’. If a setting is suitable and accessible for someone with dementia”.

We absolutely agree that buildings should be designed to meet ‘dementia friendly’ standards and the process of making GP surgeries across the area dementia friendly is underway. This includes staff training, patient and carer engagement, promoting links to the voluntary sector in the locality via the Surgery Signposters initiative where applicable (see below), an environmental audit, dementia-focussed care planning, and completion of tools to support the person with dementia and their carer.

Both Fareham and Gosport, and South Eastern Hampshire, CCGs have already helped secure ‘dementia friendly’ status for Fareham Community Hospital and Chase Community Hospital at Whitehill and Bordon, and the intention is to extend this to other community hospitals such as Oak Park in Havant.

“All staff who come into contact with people living with dementia should have adequate awareness training”.

During 2015, dementia awareness training was made available to CCG staff, and also to those people volunteering at Fareham Community Hospital and Chase Hospital, as part of the dementia-friendly process. In addition to this, the Wessex Academic Health Science Network set a target as part of their dementia friendly GP practices project for 75% of practices to become “dementia friendly” by the end of 2017/18. We are currently just over 50% towards achieving this, across the Wessex region. GPs are aware of the current interim arrangements for the Dementia Advisors Service (DAS), which is currently operated by the Alzheimer's Society.

In addition to this, our improvement programme within primary care will help increase education in GP practices, which in turn is expected to have a positive impact in terms of ensuring that people can access relevant information. A key project locally is the new ‘Surgery Signposters’ initiative. Surgery Signposters are local, trained volunteers who provide a structured interview to patients or carers, to help assess their non-medical needs, and enable them to access support. The service is commissioned by both CCGs and is currently being rolled out after being successfully piloted in Gosport. The project offers an appointment-based service, where patients can talk to in confidence, receive help and support, and be put in touch with groups who may be able to assist them.

“We would recommend that all commissioners encourage GP surgeries to become ‘dementia friendly’. The iSPACE model is a good example of how this could be achieved, but other options are available”.

GP member practices are now starting to get involved in the iSPACE initiative being spearheaded by Wessex Academic Health Science Network (Wessex AHSN), across Hampshire, Dorset, IOW and South Wiltshire. Benefits include an improved experience for patients and their carers and staff being better equipped to deliver high quality dementia care, and we fully support this initiative.

Wessex AHSN hopes to get 75% of all practices in the region signed up to iSPACE by April 2018 and is working with the CCGs to support practices through the engagement and delivery of the iSPACE programme. Alongside increasing dementia diagnosis rates, iSPACE benefits all older people, not just those living with dementia. Clear signage, an uncluttered environment and a team trained to understand dementia are just some of the changes iSPACE recommends.

“Services for people living with dementia require consistency of service between Health and Social Care settings so Healthwatch Hampshire recommend the continued use of integrated teams to ensure smooth transitions between services at all stages of the patient pathway”.

Promoting the integration of health and social care teams delivering out-of-hospital care is an overriding priority for Fareham and Gosport, and South Eastern Hampshire CCGs.

We entirely accept that people living with dementia – as is also the case with many, many groups of patients – not only want a more joined-up network of NHS and social care support, but indeed actively benefit from such an integrated approach. We know that the need to ‘tell your story’ repeatedly to different members of staff and different teams is deeply frustrating to many people, and that the traditionally fragmented systems of care has tended to result in delays and duplication which serve neither the patient nor the health service well.

Given what we know about the central importance of greater integration of care services, we applied – successfully – to be one of the first participants in the national ‘Vanguard’ programme, and we are now into our second year of this major initiative. The first tangible benefits of this approach are already being seen, but we fully accept that there is much more to be done.

Ultimately, the ambition is to truly join together teams of NHS and social care staff – both in terms of physically bringing them together, and in terms of the way they work together. Recent improvements include the start of a ‘same-day service hub’ for people in parts of Gosport to be able to benefit from faster access to primary care when they believe they need to contact a clinician urgently, and we are also making key progress with regard to some of the essential ‘behind the scenes’ work which underpins that ambition, such as the drive to standardise IT systems used for holding patient data.

Alongside the ‘Vanguard’ work, the three CCGs serving people across the Portsmouth and south east Hampshire area are all looking again at how we can improve the support that we give to people with long-term conditions – this includes both mental health conditions in general, and dementia specifically. We have already conducted extensive local engagement on this issue – our survey generated more than 700 responses, and that was followed by a series of face-to-face discussions with groups of patients and carers - and we are now seeking to use the feedback we have gained to further inform discussions with clinicians regarding the best way forward.

I hope that this offers a comprehensive response to your recommendations – all of which offer us a pertinent and relevant challenge to continue to seek to improve the support that we are able to provide to people living with dementia, and their carers.

I would add only that Hampshire County Council is keen to directly address one issue raised in your report, concerning domiciliary care – both in terms of its performance, changes to provider arrangements, and the perceived impact of those changes.

The County Council fully accepts that the survey was carried out during a particularly challenging period for the service. However, two replacement providers were set up in South Eastern Hampshire in February 2016 and the service response has now improved as a result.

The County Council would also like to respond to the point made in the third 'key theme' in the Healthwatch report, which refers to 'a reduced provision of Hampshire County Council approved care agencies, which has resulted in a reduced quality of experiences for some people in receipt of council funded care'.

Although it is indeed the case that there has been a reduction in the number of **lead** domiciliary care service providers, the stated figures are represented incorrectly. The County Council has a new framework, a Panel of Preferred Providers and "spot purchases" care for people. As a result of the introduction of the new framework, 30 providers have been specifically selected to work with the County Council to promote and focus on higher standards, greater transparency and increased quality of care.

Although the initial implementation of the new framework was affected by local issues, particularly relating to workforce, over recent months there has been active intervention to resolve the issues including the "Change Lives – start with yours" recruitment campaign. It is therefore likely that whilst some case studies highlighted in the report reflected the experience of people at the time of the review, the situation has changed markedly in the intervening months.

Once again we would like to thank Healthwatch Hampshire for highlighting good practice where it was identified, and for providing us with a clear direction of travel in terms of the recommendations for the future. I hope that this response provides reassurance that this is an area of care which the local NHS is committed to improving. I also hope that the work we are currently doing to re-shape care for people with long-term conditions (see above) demonstrates that we are also committed to involving local patients and carers when seeking to make changes for the future.

With kind regards

Yours Sincerely,



Alex Berry
Chief Officer (Acting)
Fareham & Gosport & South Eastern Hampshire
Clinical Commissioning Groups