

OFFICIAL



Item No: 11

Meeting Date: Wednesday 29th June 2022

Glasgow City Integration Joint Board

Report By: Stephen Fitzpatrick, Assistant Chief Officer, Older People's Services & South Operations

Contact: Ann Cummings

Phone: 07824300070

Mental Health Recovery and Renewal Fund Phase 2 for Dementia Post Diagnostic Support

Purpose of Report:

This report seeks approval for the proposed spend from Mental Health Recovery and Renewal Fund Phase 2 for Dementia Post Diagnostic Support. (PDS).

Background/Engagement:

GCHSCP works at a national level in partnership with Health Improvement Scotland's Focus on Dementia Team to develop best practice to deliver better outcomes for people with dementia, families, and carers post diagnosis.

The proposals in this paper have been considered by the Older People's Core Leadership Group, Older People Mental Health Service Managers, Older People Finance Manager, Alzheimer Scotland.

Feedback from the GCHSCP Care Home Quality Assurance Group has highlighted that families and carers supported this proposed service on the basis that it may have allowed the person with dementia to remain at home for longer before requiring long term care.

Governance Route:

The matters contained within this paper have been previously considered by the following group(s) as part of its development.

- HSCP Senior Management Team
- Council Corporate Management Team
- Health Board Corporate Management Team
- Council Committee

OFFICIAL

OFFICIAL

	Update requested by IJB <input type="checkbox"/> Other <input type="checkbox"/> Not Applicable <input type="checkbox"/>
--	---

Recommendations:	The Integration Joint Board is asked to: a) note the intentions and expected outcomes of this additional funding; and b) approve the spending proposal.
-------------------------	---

Relevance to Integration Joint Board Strategic Plan:

Aligns with HSCP's Older People's Maximising Independence Transformational Change Programme and Shifting the Balance of Care through delivering right support at the right time preventing hospital admission and need for long term care.
--

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	4. Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services. 5. Health and social care services contribute to reducing health Inequalities. 6. People who use health and social care services are safe from harm and. 9. Resources are used effectively & efficiently in the provision of care services.
--	---

Personnel:	The staffing will be offered to health and social care staff as a secondment opportunity.
-------------------	---

Carers:	Carers will be supported and offered an Adult Carer Support Plan in line with Carer Act (2016)
----------------	--

Provider Organisations:	n/a
--------------------------------	-----

Equalities:	An EQIA has been completed and is available at the link below: https://glasgowcity.hscp.scot/publication/eqia-delivering-better-outcomes-people-living-advanced-dementia
--------------------	---

Fairer Scotland Compliance:	n/a
------------------------------------	-----

Financial:	This will be funded from additional Scottish Government funding which has been secured of £417,574 for both 2021/22 and 2022/23. Any unspent funds from 2021/22 have been earmarked and held in IJB reserves. The IJB has approved £340,000 through a previous report. This leaves a balance of £495,148 still to be committed.
-------------------	--

OFFICIAL

Legal:	None
Economic Impact:	None
Sustainability:	The non-recurring nature of the funding will have an impact on long term sustainability.
Sustainable Procurement and Article 19:	None
Risk Implications:	Without endorsement of this paper there is a risk that GCHSCP will be unable to maintain people with advanced dementia as home and they may require long term care
Implications for Glasgow City Council:	None
Implications for NHS Greater Glasgow & Clyde:	None
Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input checked="" type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Purpose

- 1.1 This report seeks IJB approval for the proposed spend from Mental Health Recovery and Renewal Fund Phase 2 for Dementia Post Diagnostic Support (PDS).

2. Background

- 2.1 On 3rd November 2021, the Scottish Government confirmed additional investment in Post Diagnostic Support as part of Phase 2 of the Mental Health Recovery and Renewal Fund. In [March 2022](#), Glasgow City IJB noted approval of £340,000 for one year from this funding to expand capacity within the 5 Pillars Post Diagnostic Support resource for people in early stages of dementia.
- 2.2 During 2021/22 944 people were referred, of which 723 received the service. During this same period 164 people on the waiting list were admitted to long term care.

OFFICIAL

OFFICIAL

3. Funding Proposal

- 3.1 This report proposes the introduction of a care pathway for people with more advanced dementia who present with more complex needs and associated risks. The key aims are to support people to live at home, avoid the need for long term care and avoidance of hospital admission. These aims align entirely with established IJB policy.
- 3.2 Specifically, the IJB is being asked to approve funding of £180,300 per annum for two years to support up to 150 people with advanced dementia per annum. More detail on the funding breakdown is presented below.
- 3.3 If approved by the IJB, funding would be used to employ three Dementia Practice Coordinators (DPCs), one per HSCP locality, working in partnership with Social Work, NHS Older People's Mental Health Services and Alzheimer Scotland.
- 3.4 The function of the co-ordinator role is defined thus: "a named, skilled practitioner who will lead the care, treatment and support for the person and their carer on an ongoing basis, coordinating access to all the pillars of support and ensuring effective intervention across health and social care".
- 3.5 The introduction of this resource is intended to address the experiences of families and carers of people with advanced/advancing dementia, who report significant problems stemming from lack of coordination between health, social work, and wider community services, leading to carer stress and breakdown.
- 3.6 The Dementia Practice Coordinators would be skilled practitioners qualified in Social Work, Psychiatric Nursing or Mental Health Occupational Therapy and with extensive working knowledge of dementia.
- 3.7 The Dementia Practice Coordinators would seek to support seamless multi-disciplinary interactions within and across services around the needs of people with dementia, their families and carers. Specifically they would be coordinating a model of integrated support, drawing on a range of health and social care professionals to meet needs, manage the risks of individuals and devising and reviewing care plans.



OFFICIAL

- 3.8 The key partners in this multi-disciplinary model will be Old Age Psychiatry, Social Work, Carer Teams and Allied Health professionals. Within primary care, their key partners will be GPs, District Nurses, other condition-specific services for management of long-term health conditions and palliative care.
- 3.9 Engagement and coordination with wider partners to deliver a social model of support will include housing, community and third sector agencies.
- 3.10 An evaluation of the service is being planned that will seek to determine whether the intended outcomes have been met. It will also seek to demonstrate the experiences of DPCs working to this multi-disciplinary approach, managing increasing complexity of dementia services through care coordination.
- 3.11 The National Health & Wellbeing Outcomes will be used to gather service user and carer feedback on the service individually via questionnaire and collectively through focus groups and case studies. Furthermore, it may also allow us to determine the level of resources in terms of staff, social care supports and wider service required to shift the balance of care.

4. Funding

- 4.1 The total cost of this proposal would be £180,300 per annum for two years, to include an allocation for IT, training and evaluation support and would be funded from the Scottish Government Mental Health Recovery & Renewal (MHRR) Funding (post-diagnostic services). Total budget over the two years of £360,600.
- 4.2 If this funding proposal is approved the remaining balance under MHRR will be £135,000. A further report will be presented to the IJB in due course outlining spending proposals in relation to this balance.

5. Recommendations

- 5.1 The Integration Joint Board is asked to:
- a) note the intentions and expected outcomes of this additional funding; and
 - b) approve the spending proposal.

OFFICIAL



Direction from the Glasgow City Integration Joint Board

1	Reference number	290622-11
2	Report Title	Mental Health Recovery and Renewal Fund for Dementia Post-Diagnostic Support
3	Date direction issued by Integration Joint Board	29 June 2022
4	Date from which direction takes effect	29 June 2022
5	Direction to:	NHS Greater Glasgow and Clyde
6	Does this direction supersede, revise or revoke a previous direction – if yes, include the reference number(s)	No
7	Functions covered by direction	Post diagnostic dementia services
8	Full text of direction	NHS Greater Glasgow and Clyde are directed to carry out the recruitment of three Dementia Practice Coordinators (DPCs) as outlined in section 3 of the report.
9	Budget allocated by Integration Joint Board to carry out direction	The total funding budget to be allocated for this direction is £360,600 (£180,300 per annum for two).
10	Performance monitoring arrangements	In line with the agreed Performance Management Framework of the Glasgow City Integration Joint Board and the Glasgow City Health and Social Care Partnership.
11	Date direction will be reviewed	29 June 2023

OFFICIAL