

MINUTES OF A MEETING OF THE DEMENTIA TASK AND FINISH GROUP HELD AT COUNTY HALL, CHELMSFORD ON 23 JUNE 2010 AT 10AM

Membership comprises three Members of the Health Overview and Scrutiny Committee (HOSC), three members from the Community Wellbeing and Older Persons Policy and Scrutiny Committee, and a representative from each of the North Essex Mental Health Trust and South Essex Mental Health Trust

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| * J Baugh (Chairman) | Mrs M Hutchon |
| R Cox | M Maddocks |
| * S Currell | R Pearson |
| * Mrs S Hillier | * Mrs J Whitehouse |
| * Present | |

Officers in attendance were:

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| Graham Redgwell | - Governance Officer |
| Graham Hughes | - Committee Officer |

Also in attendance:

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| John Carr | - Essex and Southend LINK |
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1. Apologies and Substitution Notices

- Apologies received from County Councillors Mrs M Hutchon and Mr R Pearson, District Councillor M Maddocks and Mr Ray Cox.

2. Declarations of Interest

The following declarations of interest were declared:

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| Councillor John Baugh | spouse works in the National Health Service |
| Councillor Sandra Hillier | Director Friends of Community Hospital Trust |
| | Personal interest as governor of Basildon and |
| | Thurrock University Hospital Trust |
| John Carr (LINK representative) | Member of West Essex Transformation Board |

3. Background Reports

Members had received the background reports listed in Appendix 1 to these minutes. After discussion:

- Members felt they could look to improve patient well-being in the provision of dementia care; could consider improvements to ensure early diagnosis and support; and could look at how to assist carers.

- Members could provide conclusions and recommendations that could be helpful for the improvement and possible reconfiguration of certain localised services.
- Members discussed the cost of long term hospitalisation and nursing/residential care and acute hospitalisation as a percentage of overall dementia care costs.
- It was noted that up to 70% of hospital acute beds could be occupied by older people although admission records were unclear how many of these were actually people suffering from one of the various stages of dementia.
- Members recognised that the overnight cost of hospital beds could be high (at approximately £550-£600 rising to £1800 per night for intensive care beds) and any reduction in hospitalisation could provide significant savings.
- Councillor Hillier would seek updated cost components for dementia care from Basildon and Thurrock Hospital Trust.

4. Other work on dementia being undertaken in the East of England

- Cambridgeshire County Council (CCC) scrutiny group had attended local GP Forums to assess how GPs diagnosed and dealt with dementia.
- Three GP practices visited in the Braintree area did not have any specific process for dealing with dementia and had no specific literature on the subject.
- Had agreed to exchange of information between the two groups.
- Mr Redgwell would continue regular contact and information exchange with other Council colleagues in the Eastern England region.

5. Scoping Document

- Members agreed that reference to “financially viable proposals” should be lower profile and not be included as a specific objective for the Group and that dementia care and best practice should be emphasised.
- Members recognised that any proposals would need to be cost realistic.
- Members agreed the scoping document should also recognise the role of the Third Sector (voluntary and other social enterprise organisations that attracted different funding streams).

- Members discussed generally the opportunities for improving dementia care by encouraging patients to undertake learning and recall activities, and greater use of respite care.

6. Proposed witnesses and date of next meeting

- Members considered witnesses who could provide a link between health care and welfare, including the experience in the different areas where dementia was diagnosed (GP, hospital, care home, etc).
- Members discussed areas in which GPs could become more involved such as helping patients adapt to a more sedentary lifestyle and dealing with falls.
- Members recognised the importance of including personal experience and testimony (i.e. from Committee members).
- The Group agreed that it would be most effective if it could focus on a specific area(s) of scrutiny.

After discussion it was **Agreed** that:

1. Prior to the next meeting each Member of the Group should try to visit a local Alheimers Society centre or similar to generally look at the care process;
2. A copy of the care quality questionnaire used by LINK when they visited care homes would be distributed to Members;
3. The next meeting of the Task and Finish Group be at 10am on 27 July 2010;
4. Jenny Owen, Executive Director, Adults Health and Community Wellbeing should be invited to attend the next meeting of the Group to give evidence;
5. A representative from South Essex Mental Health Trust also be invited to attend the next meeting of the Group to give evidence;
6. After conclusion of the above two witness sessions, to visit the North Essex Partnership NHS Foundation Trust dementia services facility at the Crystal Centre within Broomfield Hospital to see how their services linked to external services and continuing patient/carer needs.

7. Style and format of future work of the Group

- It was agreed that all Members should have the opportunity to hear from all the witnesses giving evidence.
- Members were not minded to split the Group into different work streams at present.
- After formal witness sessions there could be an opportunity for a more general discussion in which witnesses also could ask questions to generate a full frank two-way exchange of information and views.

- It was agreed that further consideration be given as to whether John Carr, the LINK representative should be a Member of the Group rather than as attendee/witness.

The meeting closed at 11.25 am.

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Appendix 1

- (a) Department of Health: Living with Dementia – A National Dementia Strategy ([DEM/01/10](#))

Documents from 2010 National Conference on Dementia

- (b) Mental Welfare Commission for Scotland: A Rights–based approach to a dementia strategy ([DEM/02/10](#))
- (c) Nuffield Council on Bioethics: Dementia: Ethical issues: The needs of carers ([DEM/03/10](#))
- (d) Mental Welfare Commission for Scotland: Protecting the rights of people with dementia: laws and safeguards ([DEM/04/10](#))
- (e) NHS Commissioning Support for London: Implementing the National Dementia Strategy in London ([DEM/05/10](#))
- (f) National Audit Office: What are the levers to improve quality and value for money of dementia services in England, and are they sufficient? ([DEM/06/10](#))

Local reports

- (g) Essex & Southend LINK Dementia Carer Survey: The effectiveness of local health and social care services ([DEM/07/10](#))
- (h) Presentation made to Braintree District Council: North Essex Partnership NHS: Mental Health Services for Older People in North Essex ([DEM/08/10](#))

Further information

- (i) The Royal College of Psychiatrists - Components of Total Cost of Dementia Care bar chart (DEM/09/10)