

Dementia Health Needs Assessment for Devon

September 2014

Executive Summary

1. Foreword

- 1.1 This health needs assessment has been produced to support the work of the Council and Local Clinical Commissioning Groups and provides an overview of dementia by understanding the risk factors, the population and projected growth in Devon. Changes brought in to effect from April 2013 through the health and social care act now place the responsibility for local public health with Devon County Council. The close working relationship with the NHS continues through the provision of public health support and advice to the two clinical commissioning groups covering the area: Northern, Eastern and Western (NEW) Devon Clinical Commissioning Group and South Devon and Torbay Clinical Commissioning Group this is known as the core offer.
- 1.2 This needs assessment is one of many local health needs assessments that are either completed, planned or underway which consider different aspects of health and wellbeing in Devon. Completed needs assessments are published on the Devon Health and Wellbeing website www.devonhealthandwellbeing.org.uk. The findings in this document should be considered alongside other related needs assessments, the Joint Health and Wellbeing Strategy and the Joint Strategic Needs Assessment, to ensure a full picture of need.

2. Introduction

- 2.1 Devon has a growing elderly population and the rate of growth is ahead of other parts of the Country. It will take until 2076 for the 85+ population to reach the same proportion as Sidmouth today. This increase in older people arises due to inward migration and increased life expectancy. The health needs assessment considers the impact of a growing older population on dementia prevalence. The health needs assessment considered the local intelligence (where available), the evidence base following a literature review, consideration of local interventions and discussion with stakeholders. The health needs assessment has been written with the support of the Older Peoples Mental Health Steering Group.

3. The Findings

- 3.1 Dementia is a priority in the Joint Health and Wellbeing Strategy. The health needs assessment was produced to support the development of this priority. The health needs assessment provides population projections of dementia

from 2012 to 2030 and considers the current services being provided in primary, secondary and social care in Devon.

- 3.2 In the UK, there are approximately 800,000 people with dementia. This is estimated to rise to 1 million in 2021 and 1.7 million by 2051. One in 14 people over 65 years have a form of dementia increasing to one in six people over 80 years old.
- 3.3 In 2012, the proportion of people with dementia in Devon was 1.75% compared with the South West region 1.51% and England 1.23%. During this time period 13,312 people were estimated to have dementia in Devon increasing to 22,074 by 2030. East Devon district had the highest proportion of people with expected dementia at 2.35% and Exeter district the lowest at 1.28%. The proportion of individuals with early onset dementia is not estimated to increase, the needs of this group are important as the needs of the individual and their family and carers will be different to the older population.
- 3.4 Overall, Devon is doing well in addressing the needs of individuals with dementia and a range of services are available including support for carers through Devon Carers Centre and a Devon Dementia Care and Support Partnership with independent, statutory, voluntary and community sector partners.
- 3.5 Dementia diagnosis is improving but the latest data (2013/14) shows a diagnosis rate of 44.9% which is lower than South West and England rates.
- 3.6 The current services for people with established dementia symptoms include diagnosis in primary care with liaison from secondary care when necessary. People with mild, early onset, complex or unusual presentations of dementia are referred into secondary care. These local approaches are based on national guidelines and current good practice.
- 3.7 Devon's Dementia Strategy for 2013 to 2015 has prioritised raising awareness (including prevention), getting early diagnosis and supporting people to live well with dementia.
- 3.8 An additional area of need involves supporting dementia carers in Devon who tend to be older than the national average and many have comorbidities. The needs of people with dementia from Black, Asian and Minority Ethnic (BAME) groups, Lesbian, Gay, Bi-sexual, Transgender (LGBT) groups and people with Down's syndrome need full consideration when providing dementia services in the future. The individuals are small in number but may experience health inequalities if services are unable to meet their specific needs.
- 3.9 In order to support the planning of current and future services an evidence review of dementia services in primary, secondary, end of life care and social care was conducted and is provided as a supplement to this report. The review found that there was a paucity of evidence on dementia services with many studies being of low quality. Only a few UK studies were found and evidence on service models were conducted in urban settings which may be

less applicable to rural settings like Devon. The few studies that were conducted in rural areas highlighted the additional challenges faced including shortages of skilled staff, reduced access to services due to lack of transport compared with urban services.

- 3.10 The Dementia Health Needs Assessment and Dementia Evidence review highlights the importance of having prevention as a priority to reduce dementia risk factors which are similar to vascular disease risk factors. These should be addressed as part of the prevention and long term conditions work. Current lifestyle programmes in Devon support this agenda including stop smoking support, substance misuse services and action to increase physical activity and promote a healthy diet to reduce obesity and promote good vascular health. Management of long-term conditions is important including diabetes, dyslipidaemia and hypertension. Raising awareness of the risk factors will allow individuals to take personal responsibility for their health.
- 3.11 The NHS health check programme commissioned by Public Health will provide an opportunity for prevention and early identification of vascular disease.
- 3.12 This Health Needs Assessment overlaps and supports other reports which should be used in conjunction including the Care Home Needs Assessment, Mental Health Needs Assessment and Carers Health Needs Assessment.

4. Recommendations

- 4.1 The HNA recommends that Commissioners, providers and stakeholders in Devon collectively build on the current work to improve the health and wellbeing of individuals with dementia and their carer's through the new Dementia Strategy. Some areas to highlight include:
- Awareness raising should focus on prevention as well as early diagnosis.
 - Increasing dementia diagnosis should remain a priority so that individuals are provided with the support they need.
 - The future projections for dementia diagnosis need to be considered in service design as the increase in diagnosis will be significant.
 - The needs of certain groups in relation to dementia need to be specifically considered; including BAME, LGBT, and individuals with Down's syndrome and individuals with early onset dementia.

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