

Wiltshire County Council's Health Select Committee

Fix Dementia Care

In the UK, one person develops dementia every three minutes¹ and across Wiltshire there are approximately 4,600 people living with a dementia diagnosis and a further 2,400 predicted to be living with the condition undiagnosed². Furthermore, at a national level, it is estimated that the number of people with dementia will increase from 850,000 today to over 1 million in 2025 and to over 2 million by 2050³.

Alzheimer's Society launched a campaign last year – Fix Dementia Care, supported by a report based on qualitative research from listening events across the country with people affected by dementia, social care professionals and dementia lead nurses⁴. This has been a nationally-focused campaign. In developing our work on this we talked to many people affected by dementia and it became apparent that many of the challenges they encountered could be grouped under the headings of cost, quality and access. We know what these challenges mean at a national level but we think the understanding at a local level is ripe for further exploration.

At Alzheimer's Society, we believe a scrutiny committee would be an excellent conduit through which these questions could be explored more thoroughly and ensure that people affected by dementia across Wiltshire receive the best support possible. The findings of a scrutiny review could be useful for local authorities around the country and would allow Wiltshire County Council to position itself as a leader in this area.

Suggested themes for a review to explore

1) Quality

The quality of care for people with dementia varies greatly. There exists a lack of understanding of dementia among the social care workforce, with one third of homecare workers across the country having told us that they have had no dementia training⁵. Furthermore, disjointed pathways of care and a lack of communication between professionals in the health and social care sector are often reported⁶. Dementia is complex and symptoms can present differently. What may be true in terms of need for one person with dementia may not be true for another. It is therefore important that a person-centred approach and robust training frameworks are in place to help support health and social care professionals delivering dementia care.

2) Access

Many people with dementia have told us they have faced difficulties accessing care⁷. Strict eligibility criteria means often only those with less than £23,350 in assets (including their home if they are a homeowner) get state-funded support⁸. In instances where an individual is not eligible for state-funded support they have to cover the costs of their dementia care themselves. Some of those who are required to support themselves end up being rejected by care providers because the funds they have are not sufficient to cover the specialist support needed⁹. This limits people's options and

¹ Matthews, F.E. et al (2016) [A two decade dementia incidence comparison from the Cognitive Function and Ageing Studies I and II](#). Cognitive Function and Ageing Studies (CFAS) Collaboration

² NHS Digital (January 2019) [Estimated dementia diagnosis rates](#)

³ Alzheimer's Research UK, [Dementia statistics hub: Numbers of people in the UK](#)

⁴ Alzheimer's Society (2018) [Dementia – the true cost: Fixing dementia care](#)

⁵ *ibid*

⁶ *ibid*

⁷ *ibid*

⁸ *ibid*

⁹ *ibid*

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many have to look well outside their communities to get the care they need. The health and social care system is also complex and difficult to navigate. As part of our national campaign many people told us they are left unable to access the information, advice and support that might be available to them. Often, it is left to carers to pick up the pieces, many of whom are older and in need of support themselves¹⁰. There are also costs to the NHS. There has been a 70% increase in five years in the number of avoidable hospital admissions among people with dementia¹¹, while delayed discharges cost £170m a year, in addition to the negative health implications for the patient¹². In February 2019, there were 1,374 delayed days across Wiltshire¹³.

3) Cost

Dementia is a progressive, long-term health condition. Unlike other long-term health conditions, people with dementia do not receive the majority of their care free at the point of use through the NHS; they get most of their support from social care and consequently shoulder up to two thirds of care costs in the UK¹⁴. Many people have told us they have had to sell their homes, while others decide to delay accessing care because of the costs.

Based on the information outlined above we believe that dementia would be a suitable topic for a scrutiny review, and we are keen to work with the Committee to explore how to best approach this if it can be accommodated within the Committee's work programme. We look forward to discussing this proposal with the committee and answering any questions that Members might have on these matters.

Matt Whittle,
Regional Public Affairs and Campaigns Officer,
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¹⁰ ibid

¹¹ ibid

¹² ibid

¹³ NHS England (February 2019) [Delayed Transfers of Care data](#)

¹⁴ Alzheimer's Society (2014) [Dementia UK: Update](#)