

HEALTH SCRUTINY COMMITTEE EXTRAORDINARY MEETING

Meeting: 22 October 2009

At: 6.00 pm

PRESENT

Councillor Tom McGee (Chair) in the chair; Councillors Walter Brett, Chris Gordon, Sylvia Humphreys, Iain Roberts, June Somekh and Craig Wright.

ALSO IN ATTENDANCE

Nicole Alkemade	-	NHS Stockport
Maggie Kufeldt	-	NHS Stockport
Phil Cheetham	-	Pennine Care
Jackie Kindell	-	Therapy manager - Pennine Care
Bridgid Flanagan	-	CHHT Manager - Pennine Care
Neil Jones	-	Service Manager - Pennine Care
Clare Mullins	-	Community Development Manager, Age Concern, Stockport
Tony Johnson	-	Alzheimer's Society & Stockport Link
John Leach	-	Stockport Link
Sheilagh Peel	-	Stockport Link/Age Concern

1. DECLARATIONS OF INTEREST

No declarations of interest were made.

2. CALL-IN

There were no items to consider.

3. SCRUTINY REVIEW ON DEMENTIA SERVICES

At the meeting of the Health Scrutiny Committee on 15th September, 2009, it was agreed that an extraordinary meeting of the Committee be held to explore the possibility of carrying out a Scrutiny Review of Dementia Services.

The Assistant Chief Executive (Strategy and Democracy) submitted a report (copies of which had been circulated) detailing background information on Dementia Services and an overview of current work in this area in order to help identify areas in which the Scrutiny Committee could add value and to discuss the scope of a prospective Scrutiny Review. In addition, Councillors received a copy of a scene setting video which detailed different needs from different perspectives, all aspects of support services, together with a section in respect of pre-planning and a focus on living with dementia. It was noted that 3000 copies of the DVD had been produced and circulated to appropriate people in the Stockport area.

The Committee was informed that The Department of Health had identified 17 topics for improvement across the following key areas;

- (a) Increased awareness of dementia;
- (b) Earlier diagnosis of intervention; and
- (c) Higher quality care.

In addition, the Committee was informed of consultation arrangements. It was commented that consultation should be carried out with BME groups and nursing homes in order to provide a greater focus of identified topics. The following seven “priority” objectives were seen as essential foundations to progress:

- i) Good quality early diagnosis and intervention for all;
- ii) Improved community personal support services;
- iii) Implementing the Carers’ Strategy;
- iv) Improved quality of care for people with dementia in general hospitals;
- v) Living well with dementia in care homes;
- vi). An informed and effective workforce for people with dementia; and
- vii) A joint commissioning strategy for dementia.

Discussion ensued and it was commented that it was essential to identify effective ways of engaging GPs with awareness training, with particular regard to early diagnosis, which was seen as the most essential priority objective. Initial diagnosis from GPs was a key factor in identifying the need for initial/early support. However, as there were often few noticeable effects from the outset, GPs were reluctant to refer cases. Awareness sessions had been provided in Stockport for GPs, practice nurses and primary care professionals and these had been well attended.

As well as older people, the Committee was informed that a significant number of people between the ages of 40-65 suffered from dementia and that the illness was more difficult to recognise at a younger age. This was often compounded as GPs had no treatment to offer in certain circumstances.

The Committee expressed the need to consider the crossover in respect of from non-support to support for dementia patients. In addition, the Committee was informed of the various organisations within the voluntary sector that provided support together with their role. The Committee recognised that the amount and variation of services on offer could be overwhelming and commented on the need for a coordinated approach.

The Committee outlined the following key issues for future consideration:

- Training and early identification of dementia.
- What can and can’t be funded through public services.
- Low cost, long term measures.
- Invest to save in Stockport.
- What can the Panel do to impact on memory services?

It was agreed that an appropriate GP be invited to attend the first session of the Panel in order to comment on the availability and types of training available. The second session should focus on local and affordable help together with improvement of future support and that the appropriate representatives of the local hospital should be identified and invited.

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RESOLVED – (1) That a Scrutiny Panel be set up in order to review dementia services in Stockport comprising of all members of the Health Scrutiny Committee and that the inaugural meeting be held on Tuesday 17 November 2009 in meeting room 3.

(2) That GPs with a special interest in dementia should be invited to attend the Panel together with an appropriate representative from the Acute Foundation Trust and the Chair of the local BMA.

(3) Stockport PCT be requested to provide information on how they influenced interest in the subject.

The meeting closed at 6.30pm.

