



**Alzheimer's
Society**

Together we are help & hope
for everyone living with dementia

Derbyshire Dementia Support Service - Year 4

Annual Report 2022 - 2023



Index

1. Introduction	3
2. Overview of services	3
3. Meet the Team.....	5
4. Demographic Data – Referrals 2022-23	6
• Referral Sources	
• Referrals by Geographical Areas	
• Referrals by Service User Type	
• Age & Gender	
• Ethnicity & Religion	
• Dementia Type & Diagnosis	
• Breakdown of length of time since diagnosis – PWD	
5. Pre Diagnostic and GP Project.	9
6. Awareness Raising & Partnership Working.....	11
7. Quality Assurance	12
8. Our Achievements	14

Introduction

This Annual Report sets out the activity carried out by Derbyshire Dementia Support Service in the period between 2022- 2023.

This is a contracted service commissioned jointly by Derbyshire County Council and Derby and Derbyshire ICB (Integrated Care Board), based on a 2-year fixed contract with the option to extend on a further 36 months by joint agreement.

For the purposes of this report the activity reported on covers the 4th year of the fixed term contract. We are now in the fifth and final year of this contract.

Overview of Services:

Derbyshire Dementia Support Service

- This service provides access to 1-1 support, information and advice for people diagnosed with dementia and their carer's. This includes people who are worried about their memory who have not been formally diagnosed or in the process of being diagnosed, but who need support. Addressing everyday problems, in real time in an accessible way.
- Helping people with dementia and their families to build connections, resilience, and plan for their future, providing support from diagnosis to end of life.
- We provide 5 Dementia Cafes and 5 Singing for the Brain sessions across the Derbyshire region.



Singing for the brain, is designed to help people with dementia feel stimulated through music, enjoy social interaction and peer support.

- We have a number of loyal volunteers that support our groups who by their presence, bring the local links and networks to support community activities.

- We have a service user involvement group for PLWD to share their voice and to review and influence change in the Alzheimer's Society, and other services locally and nationally.
- We support Memory Assessment Clinics (MAS) across the Derbyshire region working closely with memory assessment staff, including supporting those who are worried about their memory who are sat waiting for diagnostic assessments.
- We support the delivery of the 'Living Well Programme' for people who are newly diagnosed and their family/ carers and friends. We work closely with local communities and in partnership with other organisations.
- We provide support to patients accessing GP surgeries, in the form of holding clinics for carer's and PLWD, we also provide support with Dementia reviews clinics, for patients and their carer's as part of an annual review of their condition and needs.
- We work with Hospital staff to ensure patients with a diagnosis of dementia have access to information and services following an admission to hospital for something other than dementia.
- This year has also seen some foundation work with prisons, building links with staff to raise awareness of Dementia, but also to look at supporting prisoners with symptoms or early onset diagnosis of dementia.
- We attend local events to promote the service but also to make links and build networks with other sectors and communities.

Meet the Team



Tracy Cartledge - PS



Barbara White - DA



Jaime Berry - DA



Kirsty Hague - DA



Alice Porkess - DA



Anne Downie - DA



Julia Mellors - DA



Denise Botham - DA



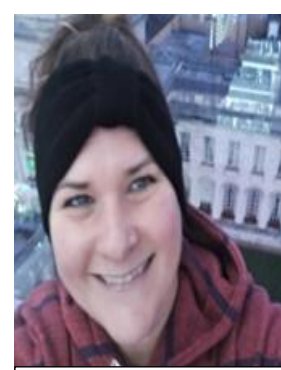
Lara Angus - DA



Sarah Flanagan - DA



Angela O'Neil - SFTB



Sarah Gilbert - GC



Susan O'Malley - LSM



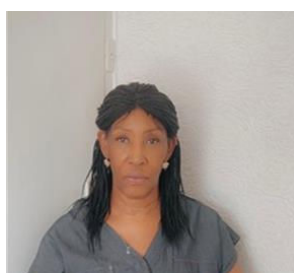
Phil De St Croix - LSM



Anne Graves - LSM



Lisa Byrne - DA



Sonia Edmund - DA

LSM – Local Service Managers
 DA – Dementia Advisors
 PS - Peer Support Group Facilitator
 GC – Group Coordinator
 SFTB – Singing for the Brain Lead

Demographic Data – 2022-23

Referrals

Referral Source	Year 2	Year 3	Year 4
Community Mental Health Team	108	171	132
Consultant	28	23	35
GP/Practice Nurse	96	49	153
Memory Assessment Service	334	488	1054
Social Services/Social Worker	23	14	20
Self-Referral	488	654	871
Voluntary Organisation	142	100	87
NHS/Statutory Authority	29	91	282
Internal Referral	104	146	248
GP Project	N/A	N/A	431
Other	63	27	31
Total	1415	1771	3308

Over the year 2022/23 there have been a total of **3308** referrals received into the service, an average of **275.6** per month and an overall increase of **1537** that's an increase of **86.7%** on last year's figure.

This service has come a long way over the last 4 years and has proven to be a vital source of support for everyone affected by dementia. People diagnosed or in the process of obtaining a diagnosis are facing some of the hardest and most frightening times of their lives and with the continued support from our service, we will continue to provide help, hope, and grow our reach to support even more people in the coming years.

Referrals by Geographical Areas

Number of New Referrals	Year 2	Year 3	Year 4
Amber Valley	184	310	523
Bolsover	77	110	242
Chesterfield	175	178	373
Derbyshire Dales	143	175	296
Erewash	219	312	591
High Peak	135	164	202
North East Derbyshire	128	221	511
South Derbyshire	138	190	395
Out of Area (signposted on)	125	111	175
Total	1415	1771	3308

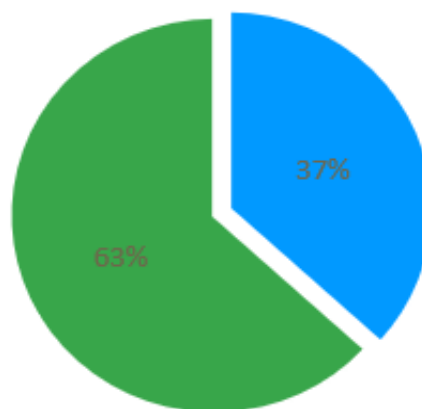
This year we have seen a significant increase in referrals across all areas, some areas have more than doubled their referral rates in comparison to the previous year. Bolsover was the lowest referring area in Year 3, this year they have received **132** more referrals than in the previous year.

North East Derbyshire has also seen an incremental growth in referral rates, receiving **290** more referrals than in the previous year.

Amber Valley and Erewash remain the highest referring areas overall, with North East Derbyshire not far behind. High Peak is the lowest referring area which is largely due to GP practices having their own dementia support service within their practice. We continue to engage in this area and still receive referrals from other sources, this area has seen an increase of **38** referrals compared to Year 3. Overall, we have seen an increase of **133%** in referrals coming into the service since the start of the contract.

Referrals by Service User Type

Type of Service User	Y 2	Y 3	Y 4
Carer of PWD	628	753	1215
Person with dementia	787	1018	2093
Total	1415	1771	3308



Carer of person with dementia

Person with dementia

Demographic Information of People who Access our Service are:-

Age range

- **60%** of referrals have been for people aged between 65 – 84.
- **19%** aged over 85.
- **10.6%** were aged 55- 64.
- **5.4%** were aged 45-54.
- **5%** were at the youngest age 24-44.

Gender

- **63%** of all referrals were female service users.
- **36%** referrals for male service users
- **1%** identified as non-binary.

Ethnicity

- **86%** of people referred to the service identify as White British,
- **9%** did not disclose.
- The remaining **5%** of referrals identified as Black African, Asian Indian, Chinese, and other European.

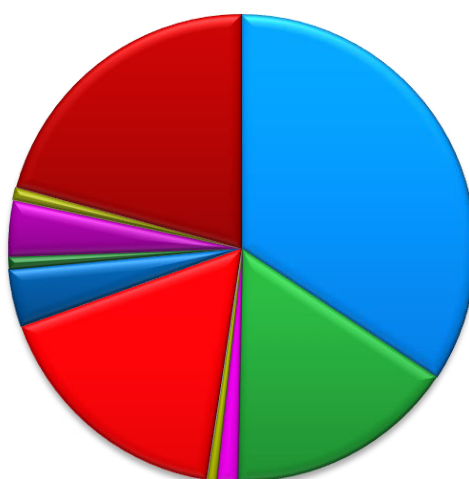
Religion

- **54%** identify as Christian,
- **22.5%** did not have a religion,
- **16.5%** prefer not to say, with
- **7%** being made of Hindu, Buddhist, Sikh, Muslim and 'Other'.

Dementia Type and Diagnosis

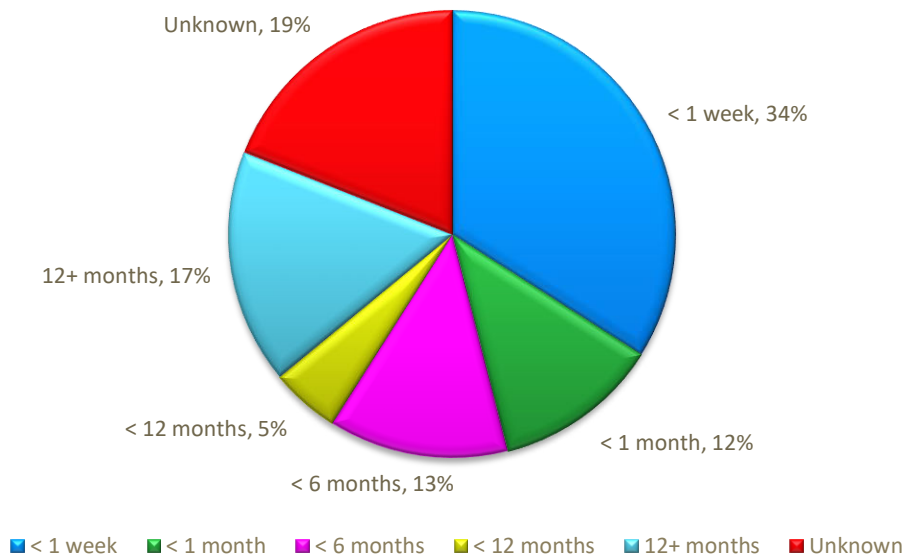
The most common type of dementia diagnosed is Alzheimer’s disease at **34%**, then, mixed dementia followed by vascular dementia. The graph below shows statistical data regarding other types and their prevalence –

Diagnosis Type	%
Alzheimer’s Disease	34%
Vascular Dementia	16%
Dementia with Lewy bodies	1.4%
Frontotemporal Dementia	0.6%
Korsakoff’s Syndrome	0.1%
Mixed Dementia	17.1%
Mild Cognitive Impairment	4.1%
Parkinsons Disease related Dementia	0.8%
Worried about memory	4%
Parkinson’s disease related dementia	0.8%
Picks Disease	0.1%
Awaiting Diagnosis	21%



- Alzheimer's Disease - 34%
- Vascular Dementia
- Dementia with Lewy bodies
- Fronto Tempural Dementia
- Korsakoffs Syndrome
- Mixed Dementia 17%
- Mild Cognitive Impairment
- Parkinsons Disease related Dementia
- Worried about memory
- Parkinson’s disease related dementia
- Picks Disease
- Awaiting Diagnosis

Breakdown of the Length of time people waiting.



This year we have seen a reduction in the number of people awaiting a diagnostic appointment, over the past 12 months this figure has dropped from **28%** in year 3 to **17%** in year 4. We believe this is mainly down to collaborative working with Memory Assessment Service (MAS) in a joint project commissioned last year, whereby people awaiting a diagnostic appointment (6- 9 months) were offered 1-1 pre assessment support, carried out by a dedicated Dementia Advisor, this 1-year post was in place from January 2022 – to until January 2023, when funding for this project ceased.

Pre-assessment Support Service

During the span of the project, we received **209** referrals via Memory assessment services, this was in addition to the main referrals from people who were newly diagnosed.

This significantly increased the overall support provided to Memory Assessment Service patients, from **21%** in year 3 to **34%** in year 4.

What we found – outcome of project

- As a consequence of our input, patients stated that they did not feel alone or isolated in their wait for a diagnosis, concerns were mainly alleviated, and people left the service feeling they had a responsive and appropriate support at the time they needed this.
- We found patients referred to the service were at varying stages of the dementia, some more advanced than anticipated from a pre-diagnostic perspective, however this is likely due to the pandemic and the impact of not being able to access services at the point of early on set.

- We were able to identify those people who are living in chaotic environments, some of which were frightened and isolated, and did not understand their symptoms or the impact their symptoms/behaviour had on their family members, friends, and their relationships.
- Some patients' mental capacity had deteriorated, impacting on their ability to make informed decisions and choices about their life and the types of care they want to receive or access.
- A number of patients declined the service and wanted a diagnosis before receiving support, particularly when symptoms were mild.
- We found there was limited literature and research for people worried about their memory.

GP Project - Pre diagnostic Support for GP Practices

Following a successful bid by the Derbyshire Health Care Trust, additional funding was made available to support a one-year GP pilot project, with the overall aim of:-

- Identifying patients who are worried about their memory, who may not have been referred to the memory assessment service or who are awaiting an assessment (pre diagnosis)
- Working with patients and their carers who have a diagnosis of dementia where complex dementia needs are prominent within their care and who are struggling to cope in their own home or community.
- People discharged from hospital where their admission is unrelated to their dementia but has significant impact on their dementia condition (co-morbidities).

The focus areas identified were practices in, North East Derbyshire & Bolsover, Erewash, Derbyshire Dales and South Derbyshire. With 4 fulltime Dementia Advisors and 1 x14hr manager, the service was named - **'Pre-Diagnosis Support'**.

In addition to the aims, objectives were set around:-

- Scoping the needs and demographics of patients in the identified areas
- Build working relationships and share best practice.
- Seek the 'best fit' referral pathways.
- Look at other avenues of support that would assist practices.
- Explore new initiatives for people worried about their memory or living with dementia, supporting carers' needs in addition to the person with dementia.

During its first year we received a total of **431** referrals **36** Apr-June, **81** July-Sept, **162** Oct-Dec and **152** Jan-Mar 23

To help put the impact of this project into perspective, in 2021/22 we received in total **49** GP referrals. One year on (2022/23) referrals from GPs, not included in the GP project areas, this figure increased to **92**.

Taking the above into account the overall impact of the project, this year alone we have received **431**, combine this with **92** referrals received from other practices, this equates to **523** referrals from the GP sector alone.

An overall increase of **474** more referrals than received from GP practices in 21/22.

Due to the overall success of this project, we have managed to secure funding for a further year.

Awareness Raising and Partnership working.

Over the year we have continued to develop relationships with organisations and services across the county through awareness raising and partnership work. This collaborative way of working is achieved through a hybrid approach including face to face meetings, virtual contact and sharing publications and research.

The "Derbyshire Dementia Support" website has also been a popular choice for people to find out about our and other services, resulting in an increased hits on the webpage.

Our partnerships this year have included -

- Derbyshire Carers Association.
- Derbyshire Befriending Website.
- STP Dementia and Delirium.
- Memory Assessment Service.
- Live Life Better Derbyshire.
- HMP's Sudbury and Foston Hall.
- Community Mental Health Team's.
- Community Voluntary Support networks.
- Derbyshire NHS TRUST Carers Q and A's and Carers Engagement meetings.
- High Peak Dementia Subgroup.
- Join Dementia Research/University of Derby Research team.
- Live Well Programme.
- Chesterfield and Derby Hospitals

Quality Assurance

As part of the organisations commitment to meeting the needs of those we support we carry out assurance checks on internal systems to ensure that they are meeting expected standards. Part of this is to ask those who have accessed our service locally to complete an exit survey where we ask about the direct support provided, outcomes that were met and how they were achieved. The feedback we collate helps us to reflect and plan ahead and focuses our approach to meet the needs of our client group, addressing areas that require change or adaptation.

We have carried out **81** exit surveys this year with an overwhelmingly positive response, evidenced in the quarterly reports.

Feedback

“At the café.....it’s the first time, in a long time, I’ve seen mum laugh. Like really laugh. And it wasn’t forced, it was wonderful”. Carer

“Julia came to see me. She was really wonderful and really helped me a lot.....Thank you and Julia very, very much for all your help – it was wonderful to have someone like Julia to talk to” Person with dementia.

“I’m just ringing to thank you for all your time the other day...it was very reassuring, what you said...good to know about all the things you could do or get.” Carer of person with dementia.

“Thank you again for the empathy you showed to (person with dementia) last week, you were very good with her.” Email from Carer

“Thank you for the time you made for our face-to-face discussions, and for giving me the prompt and helpful details of the continence service as well as the promise of a leaflet on what I think is called “When to make decisions about care” and the one covering criteria about long-term fees and payments liability. And thank you also that I may contact you again in case of otherwise unresolved need.

You brought to our discussions the authority of experience and the sympathy of not only one who deals with Dementia issues, but also the sympathy of one who has closely travelled with someone on a dementia journey” Email to DA following a home visit.

Case Study

Ms G was referred to our Service by the Memory Assessment Service for pre-diagnosis support.

Ms G was at the early stage of the assessment process and was awaiting a brain scan and a memory assessment before diagnosis.

Ms G currently has carers that assist with her personal care four times a day and is a wheelchair user.

Ms G previously had a very active life, and her previous occupation was a music teacher which she was very passionate about. However, now Ms G often feels lonely and does not leave the house unless it is for hospital appointments. Ms G only has social contact from her carers as her daughter lives in Wales and she does not visit often. I asked Ms G about her memory loss, and she said that her long-term memory was very much intact, and she surprises herself sometimes at what she can remember, however she has noticed her short-term memory has deteriorated. Examples of this are forgetting dates, forgetting if a carer has helped her with something such as putting cream on her legs even if they have done that only a few minutes earlier and repeating herself.

Ms G requested a Home Visit to discuss what support may be available to her to help with her memory loss whilst she waited for an assessment from the Memory assessment service.

Initial conversation with Ms G to find out if she would be open to support from our service and to arrange a Home Visit. At the Home Visit we discussed the following actions of support:

Memory Aids- I suggested Ms G looks in to purchasing a memory clock to show the day, date, and time so that she has a visual reminder of this in her living room. Ms G said she does try to keep a diary and write down her thoughts and feelings which I encouraged her to continue doing as it gives her something to reflect on if she does feel forgetful. I also provided Ms G with The Memory Handbook which includes further ideas around memory aids and information on memory loss.

Social Network – Ms G said she has a real passion for music and singing so I suggested that she attends the Singing for the Brain Group. This group would enable her to do something that she enjoys whilst also meeting new people and having a social network. It would also mean that she is surrounded by others who are also experiencing memory loss so she has people that she can relate to. Ms G is booked on to the August group due to having hospital appointments on the other dates. I also suggested that I could refer Ms G to a befriending service so that she could have a regular visit from someone and form a friendship with them. Ms G really liked this idea and was happy for me to put a referral in to the 'Elderfriends' befriending service.

Community Transport- Ms G mentioned that she only leaves the house for hospital appointments and always uses hospital transport. Therefore, I suggested that for the Singing for the Brain group she could use the Derbyshire Community Transport 'Dial a Ride' service which is a wheelchair friendly service. I provided Ms G with their leaflet so that she could make a booking with them.

Health - Ms G mentioned that she currently uses two wheelchairs that she has to be transferred between these when travelling because one of them has a faulty belt and the other one does not fit through her door. I provided Ms G with the Derbyshire Wheelchair Service phone number so that she could report this to them and get a wheelchair that was fit for purpose or have her current one repaired.

Lasting Power of Attorney– I discussed Lasting Power of Attorney with Ms G as she did not currently have this in place. I suggested that I could refer her to Citizens Advice Bureau for further support with completing the forms. Ms G said she wanted to discuss this with her daughter first and would come back to me if she would like a referral. Therefore, I provided Ms G with the Lasting Power of Attorney factsheet so that she could speak about this further with her daughter.

Outcomes -Ms G is attending the Singing for the Brain group where she can take part in an activity she enjoys and meet new people. Ms G informed me that she contacted the Derbyshire Wheelchair service and arranged for her wheelchair to be fixed, making her transportation to appointments much easier than it previously had been.

Ms G also now has a contact for support if needed whilst waiting for her diagnosis and post diagnosis.

Overall Our Achievements 22/23 are:-

- Exponential Increase of the number of people supported with dementia overall.
- Increased number of people attending groups meaning **1,184** people attended the Dementia Cafes and **925** people attended Singing for the Brain.
- Working with the Integrated Care Service (ICS) - Dementia and Delirium Group to help develop, trial, and launch a new training programme (launching in Q1 of 2023).
- Web site development and review
- Attendance at various community events across the county, including Liberation Day in Swadlincote, a cultural and diversity presentation in Chesterfield and a carers networking event in South Normanton, to name a few.
- Support to the Arts Council, Derby Cathedral and Derby Theatre by collaborating with projects in the fields of painting and acting.
- Develop and grow the Carers Engagement Sessions, seeing a consistent increase in attendance figures achieving a total of **122** attendances by the end of the year.
- The strengthened relationships with the NHS Trusts MAS, CMHT's, GP practices, Local Police, fire service, Prisons and Hospitals.
- Increased support to people who are worried about their memory and who are awaiting diagnostic pathway.
- New ways of working with GP practices i.e., Supporting dementia reviews and care and PLWD clinics.

Alzheimer's Society Derbyshire
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Email address for the **Derbyshire Dementia Support Service:**

Derbyshire@alzheimers.org.uk

Our Web Page www.dementiaderbyshire.org.uk

Our Values



Determined to make a difference

We're passionate, we're focused and we make a lasting impact for everyone living with dementia.



Trusted expert

We're listening, we're learning and we use experience and evidence.



Better together

We're open, we combine our strengths and we achieve more together.



Compassionate

We're kind, we're honest and we don't shy away from challenges.



Alzheimer's Society

Together we are help & hope
for everyone living with dementia



Derby and Derbyshire
Integrated Care Board