

Dementia

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Produced by



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Introduction

Dementia is a progressive and largely irreversible clinical syndrome that is characterised by a widespread impairment of mental function. Dementia is associated with complex needs and especially, in the later stages, high levels of dependency and morbidity. As the condition progresses, people with dementia can present carers and social care staff with complex problems including aggressive behaviour, restlessness and wandering, eating problems, incontinence, delusions and hallucinations and mobility difficulties that can lead to falls and fractures. The impact of dementia on an individual may be compounded by personal circumstances such as changes in financial status and accommodation, or bereavement.

Key Issues and Gaps

• In Kent, the expected number of elderly people >65 yrs with a limiting long-term illness is expected to increase from 120,000 in 2012 to 145,000 in 2020. Of these, the expected number of elderly people with dementia is expected to increase from just under 20,000 in 2012 to just under 25,000 people in 2020.

Based on 2015 estimates, the observed prevalence of dementia (number of dementia patients on QOF registers) is approximately 59% of the expected prevalence across Kent or 12,687 which is a considerable improvement from 37% based on estimates made in 2011. This is possibly the result of better diagnostic and assessment effort by General Practitioner (GPs) as a result of NHS England is setting up Direct Enhanced Services to improve the measurement of dementia prevalence over the last two years.

Who's at Risk and Why?

Table 1: The consensus estimates of the population prevalence (%) of late-onset dementia

		ous estimate entia UK 200		Current estimates (Dementia UK 2014)			
Age (years)	Female	Male	Total	Female	emale Male		
60-64	(0.1)*	(0.2)*	(0.2)*	0.9	0.9	0.9	
65-69	1.0	1.5	1.3	1.8	1.5	1.7	
70-74	2.4	3.1	2.9	3.0	3.1	3.0	
75-79	6.5	5.1	5.9	6.6	5.3	6.0	
80-84	13.3	10.2	12.2	11.7	10.3	11.1	
85-89	22.2	16.7	20.3	20.2	15.1	18.3	
90-94	29.6	27.5	28.6	33.0	22.6	29.9	
95+	34.4	30.0	32.5	44.2	28.8	41.1	

^{*} In the Dementia UK 2007 report, the prevalence of dementia among those aged 60-64 was estimated as part of the young-onset dementia consensus

Early onset

Dementia is much rarer in people under 65 as it is estimated that only 2.2 per cent of people who have dementia have young onset dementia. Based on latest estimates from the Kent Integrated Dataset, there are at least 400 people currently estimated to have young onset dementia. However, according to the Alzheimer Society's 2007 report 'Dementia UK: Full Report' the prevalence of early onset dementia could be up to three times higher as it is often missed or undiagnosed.

Dementia and learning disability

People with Down's Syndrome have an increased risk of developing Alzheimer's disease. Three per cent of people with Down's Syndrome in their 30s have dementia, rising to 40 percent in their 50s.

By the age of 60 people with Down's Syndrome have a 55 per cent chance of developing dementia compared to a five per cent chance within the general population. The actual numbers are small but with more people with Down's Syndrome now reaching older age there will be increasing numbers of people with Down's Syndrome and dementia, who will require specialist assessment and support.

The prevalence of dementia in people with other forms of learning disability is also higher than in the general population. Some studies (Cooper 1997, Lund 1985, Moss and Patel 1993) suggest that the following percentages of people with learning disabilities not due to Down's Syndrome have dementia:

50 years and over: 13 per cent65 years and over: 22 per cent.

This is about four times higher than in the general population.

Black and minority ethnic (BME) population

Currently prevalence rates for dementia in people from black, Asian and minority ethnic communities in the UK have not been identified. Six per cent of people from black, asian and minority ethnic (BMAE) communities with dementia experience early onset dementia compared with only 2.2 per cent for the population as a whole, reflecting the younger age profile of these communities. Evidence shows that certain communities such as BME have higher incidence and prevalence of cardiovascular disease, which will make them more prone to vascular dementia.

There is likely to be significant growth in the number of people with dementia living in BME communities as the current, relatively young population ages.

The Level of Need in the Population

Approximately 20,813 people aged over 65 are estimated to have dementia in Kent based on 2013-14 estimates. By 2017 it is predicted that this figure will increase to 21,991.

Diagnosis rates for dementia in Kent are around 44%. One of the key objectives within the Kent and Medway strategic plan is to increase these rates to 60%. However, CCGs are coming under increasing pressure from NHSE to increase rates to 67% by March 2015, in line with the commitment given in the Prime Minister's Dementia Challenge and their progress towards this target is being measured on a monthly basis.

Tables two and three show the current situation in terms of the prevalence of dementia and how many patients are on the QOF registers. The estimated growth has then been calculated to 2015 showing the increase in numbers of people with dementia depending on diagnosis rates. Figures have been described by Local Authority and CCG respectively. The tables show that by 2015, assuming a 60% diagnosis rate, 14,455 people will be diagnosed with dementia across Kent and Medway. This means that in two years an additional 6,189 people will need to be assessed as they enter the dementia pathway as people who are newly diagnosed.

Table 2: Estimates of prevalence of dementia aged 30+, at varying levels of ascertainment, 2015-16 projected to 2020

Local authorities

_				2020	2020 - Showing expected numbers at different l				levels of ascertainment			
		2015-16		Estimated prevalence		Ascertainment levels						
Local authority	Expected prevalence	QOF register	Percentage ascertained		At 2015-16 QOF level	50%	60%	70%	80%	90%		
Ashford	1,633	909	55.7	1,951	1,086	976	1,171	1,366	1,561	1,756		
Canterbury	2,363	1,583	67.0	2,674	1,791	1,337	1,604	1,872	2,139	2,407		
Dartford	1,133	943	83.2	1,323	1,101	662	794	926	1,058	1,191		
Dover	1,777	1,105	62.2	2,117	1,316	1,059	1,270	1,482	1,694	1,905		
Gravesham	1,326	617	46.5	1,490	693	745	894	1,043	1,192	1,341		
Maidstone	2,171	1,457	67.1	2,585	1,735	1,293	1,551	1,810	2,068	2,327		
Sevenoaks	1,814	779	42.9	2,065	887	1,033	1,239	1,446	1,652	1,859		
Shepway	1,895	1,139	60.1	2,132	1,281	1,066	1,279	1,492	1,706	1,919		
Swale	1,741	1,073	61.6	2,075	1,279	1,038	1,245	1,453	1,660	1,868		
Thanet	2,299	1,311	57.0	2,516	1,435	1,258	1,510	1,761	2,013	2,264		
Tonbridge & Malling	1,609	806	50.1	1,890	947	945	1,134	1,323	1,512	1,701		
Tunbridge Wells	1,686	965	57.2	1,968	1,126	984	1,181	1,378	1,574	1,771		
Total Kent	21,447	12,687	59.2	24,786	14,678	12,393	14,872	17,350	19,829	22,307		

Source: POPPI, PANSI, ONS, QOF, KPHO

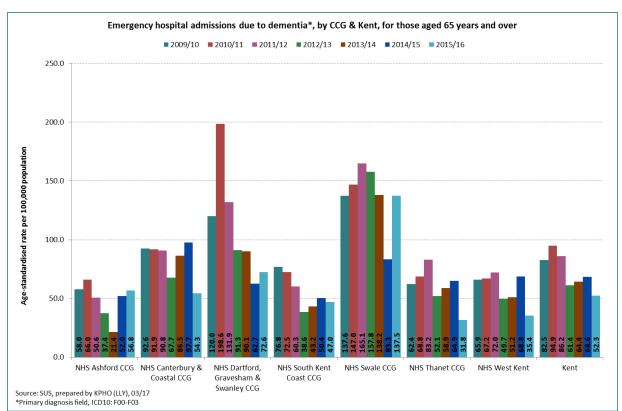
Table 3: Clinical commissioning groups

				2020 - Showing expected numbers at different levels of ascertainment						ent
	2015-16				At 2015-	Ascertainment levels				
CCG	Expected prevalence	QOF register	Percentage ascertained	Estimated prevalence	16 QOF level	50%	60%	70%	80%	90%
NHS Ashford	1,633	940	57.6	1,951	1,123	976	1,171	1,366	1,561	1,756
NHS Canterbury & Coastal	3,009	1,986	66.0	3,444	2,273	1,722	2,066	2,411	2,755	3,100
NHS DGS	3,195	1,813	56.7	3,651	2,072	1,826	2,191	2,556	2,921	3,286
NHS South Kent Coast	3,395	2,052	60.4	3,919	2,369	1,959	2,351	2,743	3,135	3,527
NHS Swale	1,372	831	60.6	1,635	990	818	981	1,145	1,308	1,472
NHS Thanet	2,299	1,311	57.0	2,516	1,435	1,258	1,510	1,761	2,013	2,264
NHS West Kent	6,544	3,754	57.4	7,670	4,400	3,835	4,602	5,369	6,136	6,903
Total Kent	21,447	12,687	59.2	24,786	14,662	12,393	14,872	17,350	19,829	22,307

Source: POPPI, PANSI, ONS, QOF, KPHO

Figure one depicts change in emergency admission rates for dementia across the seven CCGs in Kent. In comparison with earlier analysis, a decrease or stabilisation in rates appear to show in most CCGs except in Swale.

Figure 1:



Current Services in Relation to Need

KCC has commissioned a range of services and support for People Living with Dementia and their Families/Carers:

- A 24hr Dementia Helpline offering practical and emotional support to, on average, 50 families per month.
- A dementia friendly Kent website listing a variety of different information about events, activities, services and projects across the county.
- Dementia cafes for patients and their carers offering mutual support in twenty five areas, each hosting up to two sessions per week.
- Dementia peer support groups where people in the early to middle stages of their illness can meet and share experiences and offer mutual advice and support.
- Grant funded social opportunities/day services through organisations such as Age UK, Alzheimer's Society and Alzheimer's and dementia support services across Kent.
- Befriending services.
- Tele-technology known as 'Just Checking', a system to remotely monitor people's
 activity and ensure accurate management of risk and the tailoring of care and support.
- Advocacy service working with the Alzheimer's and Dementia Support Service to provide dementia specific assistance.
- Care reviews, serious medical treatment, safeguarding and care reviews.
- Dementia Outreach Workers through the Alzheimer's and Dementia Support Service, the Alzheimer's Society, Age UK Herne Bay, AGE UK Deal and Age UK Faversham.
- Alzheimer's and Dementia Support Services ADSS (covering north west Kent) provide dementia day care and dementia support services.
- Alzheimer's Society (covering a large proportion of East and South West Kent) provide dementia day care and dementia support services.
- carer support such as Carers Assessments and Carers Short Breaks Services.
- Crossroads Care Kent is also funded to provide other dementia specific carers support services such as Cognitive Stimulation Groups (COGS).
- Kent Enablement at Home.
- Dementia Home Care.
- Emergency Support and Crisis Prevention commissioned by KCC and the seven CCGs.
- Dementia Friendly Community Programme consists of a large range of community led dementia cafes which are run by volunteers.
- Small innovations grants available for each district/borough supporting local dementia action alliance projects.
- Other Dementia Friendly initiatives include Working to Become Dementia Friendly recognition for businesses and organisations.

Projected Service Use and Outcomes in Three to Five Years

As stated above the expected number of elderly people >65 yrs with a limiting long term-illness is expected to increase from 120,000 in 2012 to 145,000 in 2020. Of these, the expected number of elderly people with dementia is expected to increase from just under 20,000 in 2012 to just under 25,000 people in 2020.

User Views and User Engagement

Work is currently under development.

Recommendations for Commissioning

Kent's vision for Dementia Friendly Communities is an inclusive community where people living with dementia and their carers are active participants within community life. The above services represent KCC's efforts in developing a whole system approach to dementia friendly communities, working alongside key organisations.

Recommendations for Needs Assessment Work

Over time, hundreds of dementia patients and their carers have accessed services and met with positive feedback. However, a robust evaluation framework is required to determine the impact of dementia friendly initiatives on health and social care demand, and establish the case for further investment in this area.

Key Contacts

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