

# Derby & Derbyshire Dementia Strategy 2025 - 2030







# This Strategic Vision has been developed in partnership by:



- Plan on a page
- Introduction
- Overview
- Background
- Local Engagement
- National and Local Drivers
- Achievements
- Developing our new vision
- Joint Implementation Plan
- Next Steps



# Contents

# The Dementia Strategy: Plan on a Page



- Ensure wider access to information on Brain Health
- Reinforce the link between Brain & Heart Health

#### Reducing your risk of dementia

- Increase the numbers having an annual review
- Improve access to specialist teams
- Ensure the person and carer are acknowledged as experts
- Improve offers of education
- Expand the Hub model

Access to quality health and social care Reduce waiting times
Expand ways to get a diagnosis

- Reduce the stigma of a dementia diagnosis
- Prepare for new treatment roll out

# Optimising access to diagnosis

- Continue to build community resilience
- Create, support and expand co-production
- Create more opportunities for peer support
- Improve types and offers of accommodation and housing

Supporting safe and accepting communities CONTROLLED



- Ensure resources to aid waiting well are available and easy to access
- Improve signposting to support and advice services

#### Ensuring good support whilst waiting

- Increase the offer of palliative care at the end of life
- Increase the number with advance care plans
- Provide more training in palliative care and advance plans
- Raise awareness of dementia as a life limiting condition

Opportunity to plan for a good end of life

These are the core elements of our Dementia Strategy in summary format.

If you would like to see more detail, you can use the hyperlinks in the electronic format to navigate straight to a specific pathway section.

If you are reading a print version, the detailed pathway plans can be found in the 'Developing Our New Vision' section of the strategy which start on page 17.

# Introduction

1 in 11 people over the age of 65 have dementia in the UK. Dementia is the leading cause of death in the UK<sup>1</sup>, but it is also a disease we can reduce our risk of getting.

The number of people with dementia is increasing because people are living longer. It is estimated that by 2030, the number of people with dementia in the UK will be more than 1 million.

Almost everyone will know family members, friends and colleagues who have dementia or are carers of people with dementia. There is not a typical person with dementia and everyone's experience of the condition is unique. People with dementia come from a range of backgrounds, situations and age groups. Younger onset dementia and other rarer dementia types will have differing support needs to the more common dementias. The strategy aims to reduce inequalities in access, in outcomes and in experience.

This strategy was developed by a collaborative known as the Joined Up Care Derbyshire Dementia Partnership as a joint approach to strengthening early intervention and integrated support. The aim of this Strategy is to respond to the issues that have been highlighted locally and outline how everyone across the system can specifically work together to improve the lives of people living with dementia and their carers.

<sup>1</sup> Dementia is the UK's biggest killer - Alzheimer's Research UK



## What is Dementia?

Dementia is a syndrome in which there is deterioration in memory, thinking, behaviour and the ability to perform everyday activities.

Dementia has a physical, psychological, social, and economic impact, not only on people with dementia, but also on their carers, families and society at large.

**World Health Organisation** 

# The Changing Face of Derbyshire

#### How our older population is shaping the future of care

#### As of 2023, the 65+ population

182,459 ≈ 22.5% of Derbyshire residents are aged 65+, much higher than the national average of 18.7%

... and Derby City has almost 44,000 residents aged 65+

#### Population change (%) by age group 2011 to 2021



#### An increasing 65+ population



#### A changing population

In the last decade, Derbyshire's 70-74 population grew around 30%, while the 40-44 group saw the largest decline, highlighting an ageing population across the County



Total population 65 and over



... and in Derby City, this age group is expected to rise by over 13,000, so that is an **additional** 70,000+ people aged 65+ in Derbyshire and Derby

#### This is equivalent to more than the capacity of two Pride Park stadiums



Total projected 65+ population





North East Derbyshire

# The Growing Impact of Dementia in Derbyshire

Understanding the scale and impact of dementia across our ageing population

#### Dementia numbers

National figures show that in 2024. the number of people aged 65+ in Derby and Derbyshire with a formal dementia diagnosis is just over 10.000 people



These NHS figures reveal that in Derby and Derbyshire, 4,677 people aged 65+ may be living with undiagnosed dementia.

0,316

This is equivalent to filling nearly 60 double-decker buses







This means that almost 1 in 3 people with dementia may remain undiagnosed, highlighting the need for improved awareness, diagnosis, and support



2020

2019

These projections suggest this could rise to nearly 22,000 by 2030, an increase of over 40%



Given the diagnosis gap, other sources estimated the number of people with dementia in Derby & Derbyshire at around 15.630 in 2019

2025

2030



Public Health, Knowledge and Intelligence Team, Derbyshire County Council, 2025

#### BUS STOP



#### Dementia severity

The progression of dementia to more severe stages brings increasing challenges, requiring greater levels of care and support. By 2030. severe dementia is projected to account for the majority of cases in both Derby and Derbyshire, underscoring the importance of planning for future resource needs

# The Cost of Dementia in Derbyshire

#### Exploring the financial, social, and emotional impact

#### Dementia in the UK





#### 20% 0% 10% Derbyshire **Derby City** England

<mark>A 38</mark>

Fewer than 1 in 5 carers in Derbyshire and just 1 in 4 in Derby feel they have enough social contact, highlighting the isolation many face compared to the national picture



#### Old-age dependency ratio

30%

In Derbyshire, the old-age dependency ratio has grown from 29 to 37 older adults for every 100 working-age individuals between 2011 and 2023. This means there are fewer working-age people to support the growing older population



increase, rose slightly

from 24 to 26 over the

same time period

Public Health, Knowledge and Intelligence Team, Derbyshire County Council, 202

# **Multiple Long-term Conditions (MLTC)**

CONTROLLED



of admission to hospital of people with dementia in Derby & Derbyshire are urinary tract infection, chest infection, fall and fractures.

Delirium is very common complication that people with dementia are highly susceptible to.

Many carers are older or 'peer carers' who may also have their own complex health or MLTC.

An educated workforce and planned preventative care could reduce the number of people experiencing these episodes.

# Local engagement

To inform the new strategy we undertook engagement at various levels and in a range of places with people living with dementia, carers, those important to them and organisations providing statutory and voluntary services.

We received a range of feedback about what is important to people which has helped to shape the new strategy. The full report is available here: <u>Dementia Strategy 2025 -2030</u> <u>Engagement Summary » Joined Up Care Derbyshire</u>

Complementary engagement and research undertaken by key partners has also been taken into account.

# What people said

"Raise awareness of the risks that cause Dementia to help people to identify the areas where they are more vulnerable or are even increasing their own risk".

"Things like the Memory Market Place are important, where people can go and meet all support organisations in one place."

"Younger people with dementia need to be considered more." "Listen to the carer and people who access services, they are the experts on what they need." "Access to Activity groups and support to participate is vital."

"Greater awareness of Dementia and the way it affects daily routines across all services. Too often we have had to explain the challenges the disease bring when accessing healthcare services."

"Respite / breaks which give you the confidence your loved one is still being cared for well, with respect and dignity".

"Have conversations about end of life care planning earlier and by all services to ensure all are aware of the person's wishes."

# Engagement: Key asks from people with lived experience

- More education sessions about living with dementia and a range of topics are needed for all
- More support is needed for carers including; peer support, wellbeing support and respite.
- Dementia care and support needs to be more joined up and accessible to all residents (particularly younger people and those from ethnic minority communities).
- > People should not have to wait long for assessment and diagnosis.
- > There needs to be more education about Brain Health in Derbyshire.
- > Support Pre-Diagnosis is important so people can help and prepare themselves.
- > More support and consideration is needed of end of life care choices.

# **National and Local Drivers**

National and Local strategy and guidance have also influenced the direction of the **Derbyshire Dementia Strategy.** This includes:



The financial backdrop to the strategy sees both Health and Social Care needing to make significant savings to ensure continuity of services

# Achievements in Derbyshire over the last five years

Memory Assessment Services increased capacity and Derby & Derbyshire are above the National target rate for diagnosis.

Dementia Support Services have increased capacity to respond to 40% more referrals.

More dementia specialist nurses are working in acute hospital services.

We have a Dementia Palliative Care Service across Derbyshire and Derby City.

Training in end-of-life care and dementia, advance care planning and diagnosing late-stage dementia have been developed and delivered.

We have a diagnosis rate of 90% in younger people living with dementia, significantly higher than the National average,

and have developed young onset dementia projects across in Derbyshire and Derby City.

We introduced virtual education sessions for carers providing information on a range of important topics related to caring for someone with dementia.

We improved the Delirium in Dementia Awareness training package to make it more accessible.

We have set up a Rare Dementias Group to better engage with professionals, organisations, people living with rare

dementias and their Carers.

# **Developing our new vision**

- We based our local engagement on the priorities in the previous strategy so that people could have their say on these and any gaps.
- We continue to use the NHS Well Pathway for Dementia to structure our vision and the services we offer.



- We have added 'Waiting Well' to the Pathway to assure people who are waiting for an assessment or diagnosis that they can access services whilst waiting.
- On the following slides we set out our vision over the next five years of how we will collectively use these priorities to guide service development.
- A glossary can be found at the end of the slides; key terms have this symbol and hyperlinks which will take you straight to the slide the definition is on.

# **Preventing Well**

#### The Vision:

There is accessible information for people to make decisions and take steps to improve their brain health and reduce their risk of developing dementia, or dementia progression.

#### **Priority:**

Only a third of people in the UK realise that it's possible to reduce their dementia risk<sup>1</sup>. We want to ensure the people of Derbyshire have information about dementia and are aware of ways in which they can reduce their risk of developing dementia.

### PREVENTING WELL



"I was given information about reducing my personal risk of getting dementia"

<sup>1.</sup> Brain health basics - Think Brain Health - Alzheimer's Research UK

# The 14 modifiable risk factors for dementia

### FACTORS LINKED TO DEMENTIA RISK



The percentage figure refers to the reduction in worldwide cases if this risk factor were eliminated. In the UK, a 1% reduction = 10,000 people.

Adapted from The Lancet standing commission on dementia prevention, intervention and care, 2024.



Registered charity numbers - 1077089 & SC042474

More information on brain health and dementia risk factors can be found by visiting:

- <u>Can dementia be prevented -</u> <u>NHS</u>
- Managing the risk of dementia | Alzheimer's Society
- <u>Reducing your risk of dementia -</u> <u>Alzheimer's Research UK</u>.

#### The Think Brain Health Check-in

gives simple tips on how to keep our brains healthy and help reduce the risk of dementia later in life.



Key Messages

<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dementia isn't an inevitable part of getting older
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	There are <u>14 things</u> that we can change to prevent or delay up to 4 in 10 dementia cases. Making even a couple of changes can go a long way to improve your health, and it's likely you'll be reducing your dementia risk too.
<b>•</b>	What's good for your heart is good for your brain.
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	It's never too early or late to start thinking about our <u>brain health</u> .
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Although there are some risks we can't control (e.g. age and genes), we <i>can</i> reduce our risk by looking after our heart health, keeping mentally active and staying social.
	Many of the things that can help reduce our risk of dementia, can also reduce our
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	risk of other health conditions such as heart disease, cancer, and diabetes.

# Preventing Well Commitments

- We will implement a wider dementia awareness and information programme, so people are aware of how to protect brain health.
- > We will work in partnership across Derbyshire to share risk reduction messages.
- > We will ensure risk reduction messages are accessible to everyone living in Derbyshire.
- We will promote prevention, particularly for those in midlife to maintain good brain health throughout their life.

# **Diagnosing Well**

#### The Vision:

There are accessible services to deliver a timely, accurate diagnosis, care plan and review.

### **Priority:**

When people know their diagnosis they can plan their future, get information, advice and support to live as well as possible, and the length of time they can stay well at home is increased.

### DIAGNOSING WELL



Timely accurate diagnosis, care plan, and review within first year

"I was diagnosed in a timely way"

"I am able to make decisions and know what to do to help myself and who else can help"

# **Diagnosing Well** Key Messages



# **Diagnosing Well**

> We will continue to work to reduce waiting times for assessment and diagnosis.

- > We will develop more pathways to a dementia diagnosis.
- We will improve information so that people understand the benefits of a diagnosis and the process of diagnosis.

**Commitments** 

- > We will improve information to help reduce the stigma of seeking a diagnostic assessment.
- > We will continue to improve the support and information for people waiting for an assessment.

> We will work closely with NHS England to prepare for new disease modifying treatments.

# **Waiting Well**

#### The Vision:

Enabling people to take proactive steps around self-care, future planning, support, and advice.

### **Priority:**

Increasing accessibility to support, information, and advice whilst awaiting assessment and diagnosis can reduce anxiety and aid with managing symptoms.

#### WAITING WELL

Increasing awareness and access to support, intervention and advice.

"I am able to access services while I wait to be diagnosed"

# **Waiting Well**





# **Waiting Well**

Commitments

- > We will make resources readily available to inform people how to 'wait well'.
- > We will improve our communication with people whilst they are waiting for services.
- We will increase awareness that you do not need to have a dementia diagnosis to access advice, support, and intervention.
- We will listen to those awaiting services and their carers, to understand what they need to 'wait well', so the offer can be developed and improved.
- > We will promote self-care and forward planning, providing education, and advice around this.
- > We will provide information in a variety of formats including, written and electronic.

# **Supporting Well**

#### The Vision:

There is high quality, accessible and integrated support for people with dementia and their carers at every stage and including prediagnosis.

### **Priority:**

When people have access to the right information, support and treatment at the right time, in an integrated manner their experiences are improved and outcomes are better.

### SUPPORTING WELL



Access to safe high quality health & social care for people with dementia and carers

"I am treated with dignity & respect"

"I get treatment and support, which are best for my dementia and my life"

# Supporting Well Key Messages

<b>⊙</b> ⇒⇒ (	Having support to access the dementia pathway in a timely manner is important.
<u>⊙</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	It is important that wherever health and care services are accessed, the person and their carer should be respected as experts on their needs and situation.
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Outcomes are improved when specialist dementia teams work with colleagues in other health and care settings to share skills, knowledge and education.
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	When managed with care and sensitivity, the sharing of care and health information reduces the need for people and their carers to repeat themselves.
	Improving knowledge and recognition of rarer dementias will help improve treatment and care plans.
$\bigcirc \Longrightarrow \langle$	If carers' own health needs are supported, they are better able to continue caring.
	Peer support is a valuable resource for people and their carers. It empowers them to take ownership of, and have more control over, their health and wellbeing.
<b>⊙</b> , , , , , , , , , , , , , , , , , , ,	Shaping information and education on dementia and aspects of life impacted by dementia is helpful for carers.

# **Supporting Well**

> We will work hard to ensure that you and your carer are respected as experts on your needs.

> We will focus the Dementia Partnership to find ways to reduce gaps in services and build resilience.

**Commitments** 

- > We will increase the numbers of people receiving annual dementia care plan reviews.
- > We will continue to develop and expand the Hub model so that people can access advice, support and information regularly, in one place and as locally accessible as possible.
- > We will improve education and skill sharing so that this is taken into account when planning care.
- > We will work with care homes to support onward pathways of care.
- > We will improve access to specialist dementia community teams at the point of need. If someone does need a specialist hospital bed, we will work with them and their carer to minimise their length of stay.
- > We will improve recognition of rarer dementias for staff and people living with rarer dementias.
- > We will host dementia education sessions in a variety of locations and media formats to maximise the number of people we reach and will review and revise offers through engagement processes.

# **Living Well**

#### Vision:

People living with dementia are understood, are included, respected and supported in their local communities.

### **Priority:**

When local communities have an understanding of dementia and use that to tailor what is on offer then people with dementia and their carers have better access to community resources and support.

### LIVING WELL



People with dementia can live normally in safe and accepting communities

"I know that those around me and looking after me are supported"

"I feel included as part of society"



	Further <u>Co-production</u> opportunities $-$ for people living with dementia and their carers are needed as they are the experts by experience.
	Carers need more support options including respite care, peer support groups and training courses.
	Support navigating the care system and understanding support options is key.
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	People living with dementia will benefit from new <u>extra care</u> extra care options.
	Technology enabled care or assistive technology of for people living with dementia can help support independence.
	Culturally diverse communities - require more input to help shape access to services
	Community understanding and inclusion of people with Dementia is important.



**Commitments** 

- > We will continue to build community resilience and foster inclusivity and awareness of dementia
- We will increase co-production of services, ensuring people living with dementia, and their carers are involved in designing, developing, and reviewing services
- We will proactively develop housing and accommodation options for the increasing number of people living with dementia
- > We will create more opportunities for peer support and promote through education sessions
- We will seek to maximise the use of Technology Enabled Care (TEC) or Assistive Technology (AT) to help keep people living safely in their own homes and local communities
- We will provide support, training and advice for carers, including respite care, peer support groups and training courses

# **Dying Well**

#### **The Vision:**

People with dementia have opportunity to plan for and to die with dignity in a place of their choosing.

### **Priority:**

Raising awareness of palliative care in dementia and integrating approaches across health and care services will improve care for people with dementia, ensuring they have the opportunity to discuss and share an advance care plan and die with dignity in a place of their choosing.

### DYING WELL

People living with dementia die with dignity in the place of their choosing

"I am confident my end of life wishes will be respected"

"I can expect a good death"



<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Palliative care  approaches benefit people with dementia during the later stages and at the end of life.	
	The opportunity for a dignified death in a place of their choosing is improved if that choice is recorded and shared.	
	Providing education about advance care planning can help people to describe and plan for end of life.	
	People should be able to stay or return home to die with adequate and appropriate support if that is their choice.	
	People who have cared for someone who has died with dementia can benefit from support following the persons' death.	
	Carer involvement in end of life care planning and end of life care improves outcomes.	
<b>⊙</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Encourage people to record end of life care planning earlier so their wishes are respected.	



**Commitments** 

- > We will continue to work to offer specialist dementia palliative care to people at the end of their life.
- We will promote palliative care education, encouraging people to plan ahead and have important conversations earlier.
- We will continue to integrate dementia palliative care to wherever people living with dementia receive care.
- We will deliver education and training into care homes and wherever people living with dementia receive care to support advance planning and palliative care approaches.
- We will work more closely with acute care services to enable people to return home with optimum support.
- We will build community resilience by raising awareness of dementia as a life limiting condition and the importance of palliative approaches to care.

# **Joint Implementation Plan**

Implementation Action	Pathway	Lead	2025 -26	2026 -27	2027 -28	2028 -29	2029 -30
Implement a broader dementia <b>risk reduction</b> information programme	Preventing Well	All Partners					
Maintain the <b>dementia diagnosis</b> rate above the national target of 67%	Diagnosing Well	DHCFT					
Improve people with dementia and carer's confidence in <b>navigating the health and social care system</b> and understanding support options available	Waiting Well Supporting Well	All Partners					
Continue to improve the <b>in-patient experience</b> and develop <b>hospital discharge pathways</b> that improve outcomes and quality of care	Diagnosing Well, Supporting Well	Acute Hospitals, DHCFT, DCHSFT, Hospice Care					
Embed <b>end of life care</b> planning and improve quality of <b>advance care plans</b> undertaken by professionals supporting people living with dementia	Supporting Well, Living Well, Dying Well	DHCFT, DCHS and Acute Hospitals, ICB					
Increase awareness that people can access advice, support, and intervention while waiting for a dementia assessment or diagnosis	Waiting Well	All Partners					

A more detailed live plan will be held & updated by the Dementia Strategy Group. Priority actions in progress are highlighted in purple, indicating that increased priority will be placed on that action during that time frame.

# **Joint Implementation Plan**

Implementation Action	Pathway	Lead	2025- 26	2026 -27	2027 -28	2028 -29	2029 -30
Improve and integrate training to improve <b>staff skills and</b> <b>knowledge</b> about dementia and delirium across the statutory, voluntary and private sector	Diagnosing Well, Supporting Well	All Partners					
Work with partners, particularly Derby Homes in the City and District and Borough Councils in the County to develop <b>new</b> <b>extra care accommodation options</b> for people living with dementia	Living Well	Derbyshire CC, Derby CC					
Work closer with <b>people from ethnic minority communities</b> to improve understanding and access to services and support for people living with dementia	Supporting Well, Living Well	DHCFT, DCHS, Derbyshire CC, Derby CC					
Improve and focus the offer and uptake of <b>technology</b> <b>enabled care (TEC)</b> or <b>assistive technology (AT)</b> for people living with dementia to increase their independence	Supporting Well Living Well	Derbyshire CC Derby CC					
Increased <b>co-production of services</b> and support involving people living with dementia and their carers in a more meaningful way	Waiting Well, Supporting Well, Living Well	All partners					

A more detailed live plan will be held & updated by the Dementia Strategy Group. Priority actions in progress are highlighted in purple, indicating that increased priority will be placed on that action during that time frame.

# Outcomes

# By 2030, people living with dementia and their carers in Derbyshire will:

- Have access to information to improve awareness of ways in which they can minimise their risk of developing dementia
- Have access to proactive dementia diagnosis and post diagnosis support to help them to understand their condition and plan how they can live well with dementia
- Be cared for and supported by a workforce that is constantly improving their knowledge and skills to support people living with dementia and their carers
- Receive dementia care and support that is both integrated and coordinated around themselves and their carers and recognises them as experts
- Have access to good quality post dementia diagnosis, treatment and support
- Live in communities where understanding of dementia is growing, and people living with dementia and their carers are respected, included and supported
- Have support to describe and share future preferences and improved end of life care and support
- Have access to dementia care and support that strives to meet the needs of different and diverse groups across the community



- We will review the joint implementation plan annually to ensure we are working towards our overall ambition to provide the best quality care possible for people living with dementia in Derbyshire.
- We will monitor population changes covering the numbers of people predicted to develop dementia in Derbyshire over the next ten years.
  - We will track the impact, demand and capacity within our pathway to identify further resources required to support our shared priorities.





#### **Dementia Risk reduction**

Dementia risk reduction refers to actions and lifestyle choices aimed at lowering the likelihood of developing dementia. The goal is to protect brain health and reduce factors that contribute to cognitive decline over time.

#### **Brain Health**

A term referring to keeping our brains in good working order at all stages of life. Brain health is affected by a number of factors including age, genes and a range of lifestyle choices. While some of these factors are within our control, others are not. By considering ways to look after our hearts, stay mentally sharp, and keep connected to people, we can all take steps to keep our brains healthy and reduce our risk of developing dementia later in life (Alzheimer's Research UK 2024).

#### **Disease Modifying Treatments**

A range of treatments in development for mild Alzheimer's disease, aimed at slowing down the progression of the condition.

#### Young Onset Dementia

When symptoms develop under the age of 65. The impact of young onset dementia on the person, their family and their future requires specialist information and support.

#### Palliative / End of Life care

Care that focuses on making a person's quality of life as good as possible by relieving discomfort or distress, this care approach is for anyone diagnosed with a life-limiting condition, including dementia. It is an approach supporting patients and their families facing the problems associated with life threatening illness.

#### **Diagnostic Services / Dementia Diagnosis**

Services or healthcare professionals such as Memory Assessment Services which specialise in testing for and / or diagnosing dementia.

# **Key Terms**

#### **Dementia Pathway**

The NHS framework which outlines how to support the delivery of quality dementia care and services.

#### **Extra Care Accommodation**

Specialist retirement housing designed for older people. It is self-contained housing but also offers help with personal care and household chores.

#### **Co-production**

Where an individual or a group of people work together to influence the way services are designed and delivered.

#### Culturally diverse communities / people from ethnic minority backgrounds

Communities encompassing different backgrounds, languages, traditions, and beliefs, not just gender, race, ethnicity, ability, religion, or sexual orientation but also the distinct voices, experiences, and backgrounds of community members.

#### Technology Enabled Care (TEC) or Assistive Technology (AT)

Any item, equipment or software which is used to increase or improve independence and capabilities.

#### **Related brain illnesses**

Parkinson's disease, multiple sclerosis, Huntington's disease are other forms of brain illnesses which may have similar symptoms to Dementia such as mood swings, difficulty in thinking, problem solving, problems with speech or swallowing

# Acronyms

**MAS** Memory Assessment Clinic

**JUCD** Joined Up Care Derbyshire. The local integrated care system partnership between health and social care, with the priority of making improvements to the Derby and Derbyshire population's life expectancy and healthy life expectancy levels.

**DCHS** Derbyshire Community Health Services

**DHCFT** Derbyshire Healthcare NHS Foundation Trust

**ICB** Integrated Care Board – the organisation which brings local NHS services together to establish strategic priorities and improve population health

Derbyshire CC Derbyshire County Council

Derby CC Derby City Council

**NICE** National Institute for Health and Care Excellence

Acute Services those services which provide treatment for individuals with short-term or severe medical needs

# How to get in touch with us

We would welcome your views on this strategy. If you would like to discuss any part of it, are interested in getting involved, have comments or require more information, please contact:

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<u>ASCH.ac-commissioning@derbyshire.gov.uk</u> or <u>ddicb.jucd@nhs.net</u>

We would like to extend a huge thank you to those with lived experience of Dementia and other partners who helped us to develop this Strategy.

