



National Audit Office

Improving Dementia Services in England – an Interim Report

Methodology

JANUARY 2010

Methodology

This report examined whether the national health and social care systems in England have the capacity and capability to deliver the transformational change required for the Department of Health's National Dementia Strategy ("the Strategy") to be successfully implemented, and sought to identify risks to its success.

The main elements of our fieldwork, which took place between May and September 2009, were:

Selected method	Purpose
<p>1 Review of key documents</p> <p>We reviewed the Department of Health's National Dementia Strategy and its supporting documents, the Implementation Plan and Impact Assessment.</p>	<p>To inform our understanding of the Strategy and its objectives and the Department's vision for its implementation; and</p> <p>To examine how well the Strategy addresses the issues and recommendations raised in the NAO¹ and PAC² dementia reports.</p>
<p>2 Online survey of GPs</p> <p>We commissioned Doctors.net (who provide internet services to over 164,000 UK doctors) to repeat the NAO's 2006 survey across a cross-section of at least 1,000 of its English GP members during June 2009. The survey included a range of questions covering GPs' attitudes, awareness and practice regarding patients with dementia as well as a dementia knowledge quiz. It also asked about GPs' involvement in, familiarity with and opinions on the National Dementia Strategy. In total 1,001 GPs responded with at least five per cent of the total from each of the ten English Strategic Health Authority regions. The results are used through the report.</p>	<p>To identify:</p> <ul style="list-style-type: none"> ● GPs' views on the clarity and vision of the Strategy; ● the extent of GP involvement in and familiarity with the Strategy; ● GPs' attitudes towards dementia now and how these have changed since our previous survey in 2006; and ● GPs' knowledge of dementia now and how this has changed since our previous knowledge quiz in 2006 and the knowledge quiz undertaken by others in 2004³.
<p>3 Online survey of Consultant Old Age Psychiatrists</p> <p>We developed an online survey of Consultant Old Age Psychiatrists and asked the Royal College of Psychiatrists to inform and encourage its members to complete the survey for us. The survey was completed over July and August 2009. The survey included a range of questions covering availability of specialist services for people with dementia in the consultants' local general hospital, changes implemented since the Strategy's publication and the consultants' involvement in, familiarity with and opinions on the National Dementia Strategy. There are 816 practising Consultant Old Age Psychiatrists in England and we received a total of 218 valid responses (27 per cent) with at least five per cent of the total from each of the ten English Strategic Health Authority regions. The results are used through the report.</p>	<p>To identify:</p> <ul style="list-style-type: none"> ● Consultants' views on the clarity and vision of the Strategy; ● the extent of consultants' involvement in and familiarity with the Strategy; ● the extent of any changes which have been implemented in general hospitals following the publication of the Strategy; ● the extent to which specialist services are available for people with dementia; and ● the main challenges and barriers consultants anticipate in terms of implementing the Strategy.

Selected method

4 Census of Strategic Health Authorities

We developed a census of Strategic Health Authorities (SHAs) and distributed it, via email, to the SHAs Chief Executives. The census was completed between July and August 2009 and all ten SHAs submitted a return. The census included a range of questions about leadership, regional activity on implementation of the Strategy, joint working with others and involvement in, familiarity with and opinions on the National Dementia Strategy. All ten SHAs responded to the survey. The results are used through the report.

Purpose

To identify:

- SHAs' views on the clarity and vision of the Strategy;
- the extent of SHA involvement in and familiarity with the Strategy;
- success of leadership and joint working around implementation of the Strategy in the region;
- the extent of any changes which have been implemented in the regions following the publication of the Strategy and details of any specific initiatives; and
- how SHAs perceive their role in monitoring the implementation of the Strategy.

5 Structured interviews with Deputy Regional Directors of Social Care

We carried out structured face to face interviews with all nine Deputy Regional Directors of Social Care (DRDs) between June and July 2009. The interviews included a range of questions about leadership, regional activity on implementation of the Strategy, joint working with others and involvement in, familiarity with and opinions on the National Dementia Strategy. The results are used through the report.

To understand:

- DRDs' views on the clarity and vision of the Strategy;
- the extent of DRD involvement in and familiarity with the Strategy;
- success of leadership and joint working around implementation of the Strategy in the region;
- the extent of any changes which have been implemented in the regions following the publication of the Strategy and details of any specific initiatives; and
- how DRDs perceive their role in managing the implementation of the Strategy.

6 Semi-structured interviews with care home providers

We carried out semi-structured telephone interviews with six care home providers. The providers were selected to cover a range of different services including small, independent providers, to larger chains with multiple homes. Some homes had dementia registered beds or units whilst others did not, to enable a cross-section of different providers and experiences. The sample is small and not intended to be representative; rather to identify specific issues and aspects of dementia care and the Strategy that care home providers feel strongly about. The results are used through the report.

To understand:

- the views of care home providers on the clarity and vision of the strategy;
 - the extent of care home involvement in and familiarity with the Strategy;
 - the extent of any changes which have been implemented in the homes following the publication of the Strategy;
 - views on training and education of care home staff; and
 - what barriers care home providers anticipate in terms of implementing the Strategy.
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Selected method	Purpose
<p>7 Web discussion forums</p> <p>We commissioned IpsosMORI to host eight web-based discussion boards in July 2009. The eight boards spanned commissioners, hospital based nurses, mental health liaison staff, memory clinic leads, community staff, dementia trainers, care home managers and social workers. A range of questions were asked about involvement in, familiarity with and opinions on the Strategy. We also asked about communication of the Strategy, leadership, changes implemented since its publication and barriers to its implementation. The high level findings are used to triangulate with other evidence and the results are used through the report.</p>	<p>To understand:</p> <ul style="list-style-type: none"> ● the views of managerial and frontline health and social care staff on the clarity and vision of the Strategy; ● the extent of staff involvement in and familiarity with the Strategy; ● the extent of any changes which have been implemented in the staff's work environments following the publication of the Strategy; ● views on training and education of health and social care staff; and ● what barriers and challenges health and social care staff anticipate in terms of implementing the Strategy.
<p>8 Interviews with key staff from the Department of Health</p> <p>We spoke to a range of key staff from the Department of Health, including staff on the Programme Board, Finance team, the Core Implementation Team and economists. We also liaised via email with staff involved in implementing the Carers' Strategy.</p>	<p>To inform our understanding of the Strategy and the Department's vision and plans for its implementation.</p>
<p>9 Interviews with a range of external stakeholders</p> <p>We spoke to numerous stakeholders in the field of dementia, including representatives of professional bodies, Royal Colleges, sector skills councils, third sector groups and regulators. We also consulted with experts and academics in the field.</p>	<p>To establish</p> <ul style="list-style-type: none"> ● the views of external stakeholders about the clarity and vision of the Strategy; and ● what barriers and challenges key external stakeholders anticipate in terms of implementing the Strategy.
<p>10 Analysis of existing data</p> <p>We analysed data from the Quality and Outcomes Framework requirement on GPs to keep a register of patients with dementia and undertake reviews of them and also dementia prevalence data. We reviewed analysis of this data undertaken by the Alzheimer's Society in their recent report for commissioners.⁴</p>	<p>To inform our understanding of the prevalence of dementia and to identify the current and projected dementia gap by region and PCT. This has enabled us to identify the regions facing the biggest challenge in terms of addressing the dementia gap, as demonstrated in Figure 6.</p>
<p>11 Review of existing literature and research</p> <p>We reviewed publications since our 2007 dementia report was published and also reviewed Departmental strategies on other conditions such as stroke and long term conditions and data on international comparisons.</p>	<p>To compare the approach taken to the dementia Strategy with that taken for other conditions and in other countries.</p> <p>To inform our understanding of developments in dementia care and research.</p>

Selected method	Purpose
12 Good practice We identified through meetings with the Department and DRDs and our census of SHAs areas of good or notable practice and these feature throughout the report as case examples.	To highlight how certain areas are overcoming particular challenges and barriers to implementation of the Strategy and share this practice more widely.
13 Expert panel We brought together a ‘virtual’ expert panel of representatives from other national bodies with an interest in the subject of dementia to discuss our proposed methodology and the emerging findings of our report.	To confirm the reasonableness of our methodology and conclusions.
NOTES	
<ol style="list-style-type: none">1 Report by the Comptroller and Auditor General (2007) <i>Improving Services and Support for People with Dementia</i> HC 604 Session 2006-2007.2 House of Commons Committee of Public Accounts (2008) <i>Improving Services and Support for People with Dementia</i> Sixth Report of Session 2007-2008.3 Turner S, Iliffe S, Downs M, Wiicock J, Bryans M, Levin E, Keady J and O’Carroll R, (2004) General practitioners’ knowledge, confidence and attitudes in the diagnosis and management of dementia <i>Age and Ageing</i>; 33: 461-467.4 Alzheimer’s Society, <i>Dementia: What Every Commissioner Needs to Know – Guidance on Delivering the National Dementia Strategy for England, 2009.</i>	

We would also like to thank all the other key contributors who have assisted us in producing this report.