# Dementia consortia: Collective action for greater impact

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In the Business of Smart Social Investment







- 1. Challenges in providing integrated, personcentred response for people with dementia
- 2. Dementia consortium as one solution
- 3. Opportunities presented by emerging ways of working:
  - a. Collective impact/collective action
  - b. People powered health



#### How do we view dementia?

- A medical condition/disease?
- What about other dimensions?
  - Personal
  - Family
  - Emotional
  - Community
  - Social
  - Environmental



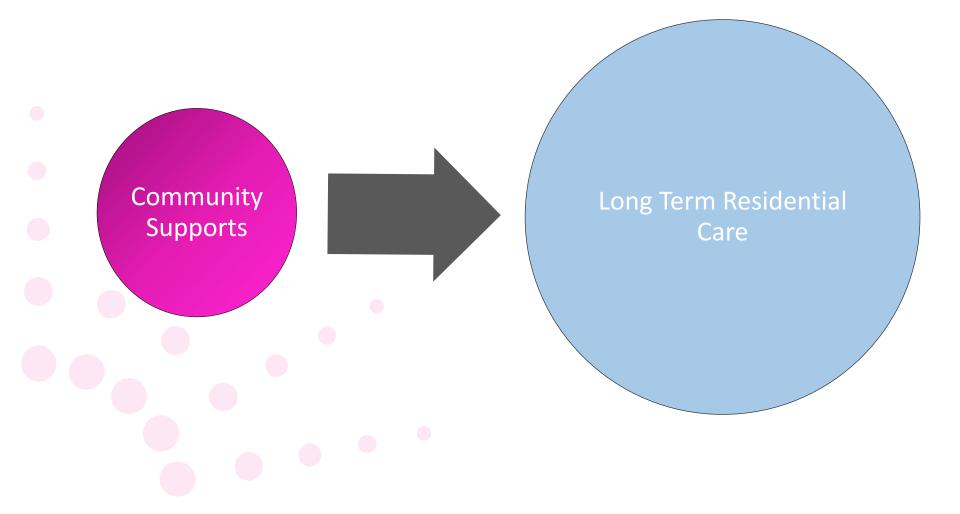
#### Challenges... or opportunities?

- 1. Multiple actors/stakeholders
- 2. Gaps in service provision & lack of integration
- 3. Misalignment of policy and services
- 4. Unsustainable current service model





#### **Continuum of services and supports?**





#### **Policy: support people to remain at home?**

Residential care	Remain at home
€1 billion (for approx. 20,600 people)	€400 million (for remainder of 65+ population)
Full package (whether it's needed or not)	Get what's available rather than what you need
Certainty (bed for life)	Lack of certainty on range and quantum of services
Confidence for families	Generally insufficient level of support
Confidence for the system	Not responsive and often late intervention
May not be person's choice at that time	Evidence is that people want to be supported at home for as long as possible



#### **Current model unsustainable**

- Increasing numbers of people with dementia – double in 2026
- Expense of residential model
- Lack of alternatives to full-time residential care



### **Complex issue**

- Multi-dimensional
- Multiple actors/stakeholders
- • Long-term disorder often co-morbidities
- Service gaps & lack of integration
- Unsustainable service model

No single service/agency has the expertise or resource to address all the needs of the person



#### Dementia consortia

Why this is a potential option...

- Brings all interested stakeholders together in a specific way
- Increases integration
- Creates a forum to develop new responses
- Reduces duplication
- Potentially more cost-effective way of working



## Are You Lonely??

#### Don't like working on your own? Hate making decisions?

#### Then call A MEETING!!

#### You can...

- SEE people
- DRAW flowcharts
- FEEL important
- IMPRESS your colleagues



....all on COMPANY TIME !!!



#### **Dementia consortium – what is it?**

GENIO

- People with dementia and carers
- HSE health and social care services for older people
- GPs and primary care team members
- Voluntary and community groups
- 'Mainstream' agencies and organisations such as County Council, Gardai, Family Resource Centres
- Transport, local radio and others

13

7th april 2014



#### How does it work?

- Strong leadership facilitative and inclusive
- Agreed governance structure and Memorandum of Understanding on how to work together to achieve agreed outcomes
- Sub-groups to address specific issues
- Lots of time!
- Resource to support the workings of the consortium



#### What is Collective Impact?

- A different approach to address 'intractable' social issues that require a large scale or system-wide response
- Where one organisation alone cannot achieve the changes required
- Not about introducing a new model or programme
  - Realisation that large-scale social change comes form better cross-sector coordination rather than the isolated intervention of individual organisations

#### Five conditions of collective success

- 1. Common Agenda
- 2. Shared measurement systems
- 3. Mutually reinforcing activities
- 4. Continuous communication
- 5. Backbone support organisations

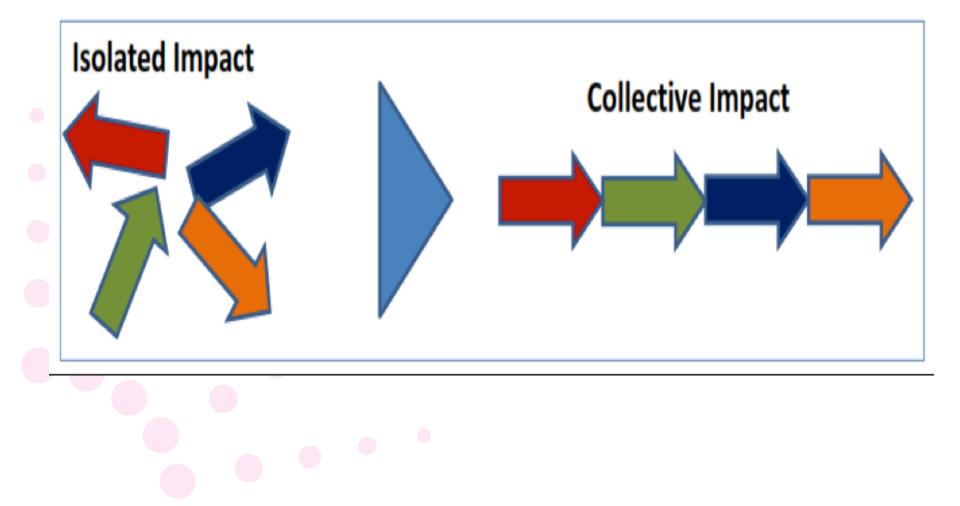
From: Kania and Kramer (2011) Collective Impact. Stanford Social Innovation Review. Winter Issue



- 1. Common agenda
- Shared vision for change
- Common understanding of the problem
- Agreed actions for solving it through a joint
  approach
- All participants must agree on the primary goals for the collective impact initiative



#### 3. Mutually reinforcing activities





#### **People powered health – what is it?**

- Putting people more in control of their health and well-being
- Overcoming fragmentation and a different focus on community resources
  - Drivers:
    - financial pressures on public health services
    - Significant increase in long-term (chronic) health conditions



#### **Significant transformation**

- Recognising people as assets
- Building on people's existing capabilities
- Promoting mutuality and reciprocity
- Breaking down barriers between professionals and recipients – harnesses spirit of co-production
  - Facilitating rather than delivering



#### **NHS Five Year Forward View**





"The NHS in England could realise savings of at least £4.4 billion a year it is adopted People Powered Health innovations that involve patients, their families and
communities more directly in the management of long-term health conditions."

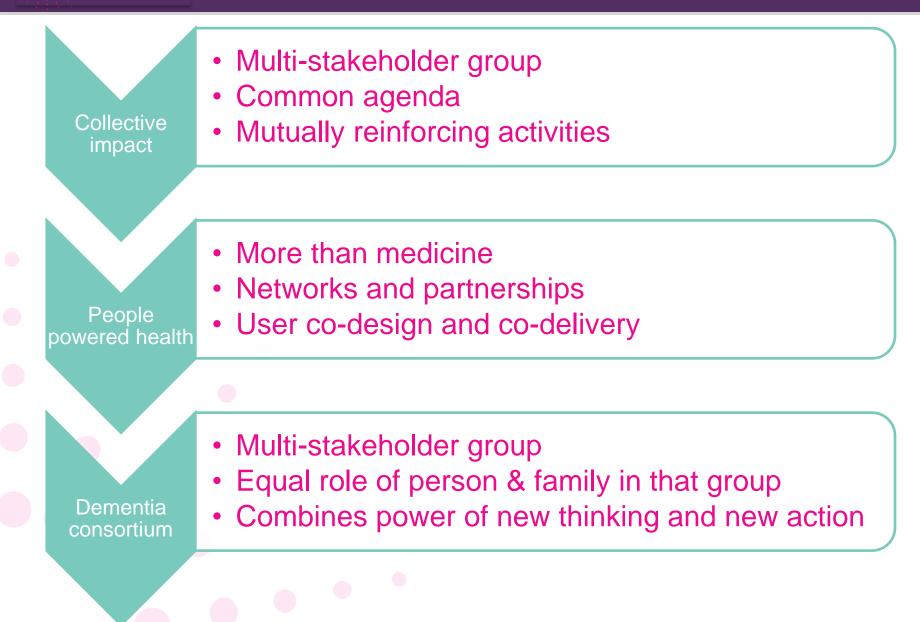
Nesta 2013 The Business Case for People Powered Health



#### **Five areas of practice**

- 1. More than medicine (new services)
- 2. People helping people (peer support)
- 3. Redefining consultations
- 4. Networks and partnerships
- 5. User co-design and co-delivery







#### **Outcomes**

- 13 dementia consortium have come together and are working well
- Multiple new services developed
- Over 800 people with dementia and carers directly benefitting
- Over 28,000 hours of individualised supports as well as many other supports and interventions



#### Reflections

- Consortia harness the power of all the members so that the result is greater than the sum of its parts
- Gives diverse agencies a role of equal value – recognising unique contribution
- Involves person and family centrally and equally
  - Releases lots of other 'resources'



#### Links and resources

http://www.nesta.org.uk/what-we-have-learntpeople-powered-health

http://collectiveimpactforum.org/