



Humber and North Yorkshire
Health and Care Partnership



**Humber and
North Yorkshire**
Integrated Care Board (ICB)

Hope of a Life Still to be Lived

Action Plan



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A Hope of a Life Still to be Lived: Action Plan

Summary:

- This plan is aligned to the Humber and North Yorkshire ICB plan and vision for everyone in HNY to live longer, healthier lives. For everyone to start well, live well, age well, and die well.
- Actions are aligned to the lived experience voice of people living in HNY, the Humber and North Yorkshire Design for the future (Blueprint), the NHS Long Term Plan, the Major Conditions Strategy, the National Inpatient Quality Transformation Programme HNY 3 year plan, and the Alzheimer’s Society Local Dementia Strategy recommendations.
- In addition to the below monitoring plan, the action plan and plan will be reviewed annually with performance measures and indicators agreed within the first 12 months.

Action plan monitoring

How and where we will measure it	When we will do it
• Through review of the actions within the Humber and North Yorkshire ICS Dementia Steering Group (lived experience across HNY represented within this group).	• Every 8 weeks.
• Briefing paper detailing progress towards actions through the Mental Health, Learning Disability and Autism Collaborative Executive Strategic Leadership Group.	• Every 8 months.
• Tracking through the dementia programme risk register.	• Every 8 weeks in line with the steering group.
• Monthly monitoring of memory service referrals, waiting list times, and dementia diagnosis rates on the HNY dementia dashboard.	• Monthly
• Engagement with local lived experience groups and individuals, including under-represented groups. • Feedback from lived experience group leads. • Intelligence reports (Patient Advise and Liaison Service, Healthwatch, Datix, Greatix). • Direct feedback to the HNY Dementia programme inbox. • Using the Alzhiemer’s Society Dementia Experience Toolkit Dementia Experience Toolkit Alzheimer’s Society (alzheimers.org.uk)	• Face to face attendance in lived experience engagement groups at least bi-monthly. • Six weekly review of feedback.

Prevention

45% of dementias can be prevented. Improved prevention to help reduce the risk of developing dementia. Better early intervention to help people with dementia to stay well for longer.

What we will do	How we will do it	When we will do it
• Offer targeted interventions to those identified at higher risk of developing dementia and interventions to prevent ill-health following diagnosis.	• Identify who our higher risk groups are using the four inclusion health groups as a starting point (Protected characteristics, socio-economic status, geography, socially excluded and vulnerable groups).	• By November 2025 we will know who and where in HNY these people are.
	• Work with these higher risk groups to identify specific needs to inform future action plans.	• By November 2026.
	• Work with local services to ensure a consistent approach to follow-up care for people with Mild-Cognitive Impairment (MCI).	• By November 2026.
• Offer targeted prevention strategies around modifiable risk factors.	• Work with local communities and HNY system partners to focus communications around the 14 known modifiable risk factors. (Physical inactivity, smoking, excessive alcohol consumption, air pollution, head injury, infrequent social contact, less education, obesity, hypertension, diabetes, depression, hearing impairment).	• Mapping of existing prevention strategies by May 2025 to identify gaps. Identification of priority areas within 12 months. Targeted campaign over the following four years.
	• Use everyday interactions to support people to make positive changes to their physical and mental well-being. (Making Every Contact Count).	
	• Ensure that prevention information is accessible to everyone and in various formats.	• Will commence within the first 6 months and develop across the five years and beyond.

Education

Understanding what’s available for people living with dementia, carers, families and service. Then cocreating improved learning opportunities for all.



What we will do	How we will do it	When we will do it
• Establish a baseline of existing learning opportunities.	• We will share a survey with local people to ask what education or learning opportunities they have had around dementia and the role of being a carer. We will also work with all of our health and care providers to measure what current training is available to their staff.	• By January 2026.
• Cocreate improved learning opportunities.	• We will work with people with lived experience, and those who support them to develop and deliver more relevant learning opportunities.	• Priority groups will be identified and targeted within the first 2 years and a phased roll out and evaluation over the remaining three years.

Communication

Improved communication for everyone about help, support and staying well. Improving communication for people who may have additional or different communication needs.

What we will do	How we will do it	When we will do it
• Make sure that health and care services know when a person has dementia, or is a carer for someone with dementia, so they can make reasonable adjustments.	• Using learning from the Butterfly Scheme, we will ensure that all of our local health and care services have a way of recording when a person has a dementia diagnosis or is a carer for someone with dementia. This will include hospitals, GP surgeries, dentists, social care services and emergency services.	• Priority order agreed by November 2025 and all services within the five years.
• Work with system partners to ensure fully joined up services through information sharing agreements.	• Make sure that partner agencies have agreed processes for sharing important information in a timely manner. This will be done through an audit/ review of existing arrangements and developing arrangements where they do not yet exist.	• Audit to be undertaken by and new arrangements agreed by year 3.
• Improve how we communicate and share information with people living in HNY about dementia.	• Develop a website that shares up to date and relevant information about topics relevant to people with dementia.	• Initial website will be launched by April 2025 and updated regularly.



Accessibility

The process of getting a diagnosis needs to be clear, simple and consistent. The impact of receiving a diagnosis needs to be acknowledged. A diagnosis should be delivered in a practical and sensitive way.

What we will do	How we will do it	When we will do it
• Improve access to timely and good quality dementia diagnosis, recovering the Dementia Diagnosis Rate to 66.7%.	• Provide education around the importance of timely diagnosis and the benefits to a person's quality of life.	• Will start by March 2025.
	• Work with Memory Assessment Services, Primary Care and Secondary Care to reduce waiting times for appointments, diagnostics, and support.	• First business cases approved by November 2025.
• Improve access to timely, meaningful, and effective support, working towards being able to reach the nationally recommended wait of six weeks from referral to diagnosis.	• Engagement with people living in HNY on what types of support/activity/groups they would want to see included.	• Public engagement and mapping to commence by May 2025 Timeline to be agreed based on findings.
	• Establish a directory of all types of support available across HNY, including how to access. Publish this directory in various formats to ensure it is accessible to as many people as possible.	



Research and Innovation

What we will do	How we will do it	When we will do it
• Collaborate with Dementias Platform UK (DPUK2) on the Blood Biomarker Challenge.	• Ensure as many of our organisations as possible are signed up to the Trials Delivery Framework so that DPUK2 research can be accessed by more people in HNY.	• Over the next five years.
• Develop and Humber and North Yorkshire Dementia Research Group in partnership with the Innovation, Research and Improvement System (IRIS) team.	• We will invite research leads from all organisations along with people with lived experience to a quarterly research group. Work with the HNY Innovation and Research Team to develop HNY into a thriving research hub that attracts greater opportunities for research.	• Commencing late 2024.
• Share research opportunities	• Aligned with the Communications priority, we will ensure people living in HNY know how to access research opportunities both as partners and as participants. Share current research findings with the public through trustworthy and accessible sources.	• Over the next 5 years.



Future-Proofing

Enabling dementia services to adapt to the growing numbers of people needing support from them. Services need to plan for the changing needs of our local population and ensure that any positive changes are sustainable in the longer term.



What we will do	How we will do it	When we will do it
• Ensure that our services can meet the needs of a growing and more diverse population.	• Use prevalence modelling to plan services based on current need and expected need over the 15 years.	• By April 2025.
	• Work with NHS England to understand the future treatments on the horizon for dementia, and what would be needed within HNY to make sure they are accessible.	• By April 2027.
	• Work with the public and services to understand the diversity across HNY and develop action plans to ensure services and support are appropriate for everyone.	• Over the next 3 years.



Humber and North Yorkshire
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If you would like to find out more about the Humber and North please get in touch.

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