

Queen's Speech Debate – Education, Welfare, Health and Public Services – 17 May 2022

For more information, please contact Alex Osborne at <u>alex.osborne@alzheimers.org.uk</u>.

This briefing includes:

- 1. Key Messages
- 2. Background
- 3. Dementia diagnosis rates

1. Key Messages

- This debate is taking place during Dementia Action Week (16-22 May). This year's focus is dementia diagnosis.
- It is vital that efforts to clear the Covid-19 backlog within the NHS address stagnation of dementia diagnosis rates. Alzheimer's Society estimates that without specific action to address this, it would take 4 years to clear the current dementia diagnosis backlog.
- Dementia diagnosis rates are currently at a five-year low, with over 30,000 more people living with undiagnosed dementia compared to pre-pandemic diagnosis rates. This equates to around five people per GP practice.
- While there are national strategies to deal with the backlog in elective care and cancer diagnosis, there's no specific plan or funding to deal with the dementia diagnosis backlog.
 Alzheimer's Society is calling for just £70m to allow the NHS to address this by tackling the backlog in secondary care while making allowances for increased primary care costs.

2. Background

There are an estimated 900,000 people living with dementia in the UK.¹ Dementia is a progressive, long-term health condition with huge care costs attached. It has been estimated that 70% of care home residents and over 60% of home care recipients are people with dementia.²

This debate is taking place during Dementia Action Week (16-22 May), for which this year's focus is dementia diagnosis.³ The Queen's Speech mentions efforts to fund the NHS to clear the Covid-19 backlog; Alzheimer's Society calls on the Government to ensure that this includes efforts to address the stagnation in dementia diagnosis rates during the pandemic, which have now hit a five-year low.

3. Dementia diagnosis rates

Getting a dementia diagnosis can be daunting. However, 91% of people affected by dementia agree that it's better to know: a diagnosis allows people to unlock vital support, plan for the future, and participate in research. It also enables clinicians to offer health and lifestyle advice and interventions to modify disease progression.

According to the most recently available figures, only 62.0% of people living with dementia aged 65 and over have a diagnosis.⁴ The national target is 66.7%. With diagnosis rates at a five-year low, over 30,000 additional people are now living with undiagnosed dementia compared to pre-

dementia-diagnoses/march-2022.

¹ Wittenberg, Raphael et al. Projections of older people with dementia and costs of dementia care in the United Kingdom, 2019-2040. 2019. Care Policy and Evaluation Centre, London School of Economics and Political Science.

https://www.alzheimers.org.uk/sites/default/files/2019-11/cpec_report_november_2019.pdf.

² Alzheimer's Society. Dementia UK: Update. 2014.

https://www.alzheimers.org.uk/sites/default/files/migrate/downloads/dementia_uk_update.pdf.

 ³ Alzheimer's Society. Dementia Action Week 2022. <u>https://www.alzheimers.org.uk/get-involved/dementia-action-week</u>.
 ⁴ NHS Digital. Recorded Dementia Diagnoses, March 2022. <u>https://digital.nhs.uk/data-and-information/publications/statistical/recorded-</u>



pandemic diagnosis rates. This means they don't have access to the vital care and support a diagnosis can bring.

Memory Assessment Services remain vastly overstretched due to the pandemic. While people are still being referred into services, staff are unable to address referrals at the same rate. Due to delays in the system, people are approaching services with more advanced dementia than pre-pandemic.

A dementia diagnosis is not just beneficial for the individual. It could also reduce pressure on the NHS: up to 65% of emergency hospital admissions for people living with dementia could be avoided if they had the right support.

In order to address dementia diagnosis rates, the Government must take steps to explore barriers to diagnosis both generally and in relation to specific factors such as ethnicity and region. Alzheimer's Society is calling for just £70m in funding to address this issue, which is a crucial aspect of the wider Covid-19 backlog within the NHS. This funding could be used to tackle the backlog in secondary care while making allowances for increased primary care costs. £17m was allocated to the issue in the last financial year, but this was insufficient to meet demand, and improved diagnosis rates by just 0.1%.

Alzheimer's Society research has found that diagnosis rates are influenced by regional factors, particularly rurality and deprivation. NHS Digital data before COVID-19 in January 2020 shows considerable variation of diagnosis rates across England's CCGs, from 53% to 90.7%. This demonstrates how crucial it is to improve the accessibility of diagnosis. Alzheimer's Society recommends that this is addressed through proactive case-finding, including the use of existing data sets, increasing dementia screening, and providing additional resource to GP practices in areas with high levels of deprivation.

Research by Alzheimer's Society has also found that people from ethnic minority communities experience an inequity of dementia diagnosis. In order to address this, it recommends:

- The provision of cultural link workers, as well as the inclusion of organisations representing ethnic minority communities in service design. This would reduce community barriers to diagnosis, which include language, stigma and cultural perceptions of dementia and caregiving.
- Improvements in the identification and referral processes to increase timely and equitable access to a diagnosis.
- Enabling services to become more culturally appropriate to help mitigate instances of people delaying seeking help for dementia symptoms.
- Improving access to, and quality of, interpretation services as well as ensuring services can access validated cognitive tools to facilitate a better-quality diagnosis.
- Encouraging better demographic data collection to enable commissioners and services to plan and deliver services more appropriate for their populations.