Local Members' Interest

**Healthy Staffordshire Select Committee – 19 March 2019**

**Staffordshire and Stoke-on-Trent STP - Progress Update on Palliative and End of life Care**

**Recommendation/s**

1. Members are asked to consider and comment on the content of the report.

# Report

1. **Background**

1.1. A decision was made in June 2017 to cease the Staffordshire & Stoke-on-Trent End of Life Procurement (the procurement covered Stafford and Surrounds, Cannock Chase, Stoke-on-Trent and North Staffordshire CCGs).

1.2. Following this decision it was agreed that an End of Life (EOL) Programme Board would be established to take forward the palliative and End of Life priorities across all of Staffordshire and Stoke-on-Trent.

1.3. The End of Life Care Ambitions provide a national palliative and end of life care framework for local action. This guidance was used to develop the priorities for the EOL Programme Board work streams. In addition to this the West Midlands Clinical Senate published a blueprint for Palliative and End of Life Care in September 2018 (appendix 1).

1.4. This paper provides an overview of progress to date against the blue print and actions outlined from the Staffordshire CQC local area review.

2. **End of Life Programme Board**

2.1. The system-wide EOL Board has been in place for approximately 12 months and is part of the STP Enhanced Primary and Community Care Programme, sitting alongside work to develop integrated and primary care.

2.2. The programme has a full governance structure with a CEO-level SRO, an Executive-level Programme Director, clinical leads from primary and secondary care and programme management support.

2.3. Following on from the publication of the West Midlands Strategy Unit's report on Palliative and End of Life Care in the West Midlands, the STP EOL Programme Board commissioned the CSU Strategy Unit to run a more detailed report on the hospital usage of patients in their last 12 months of life (split by CCG). The report

indicated that two of the 6 CCGs had higher than average non-elective admissions in comparison to their peers for patients who were within the frail elderly or respiratory condition categories.

2.4. In spring 2018, Staffordshire and Stoke-on-Trent STP were approached by Social Finance to submit an application to the Government Life Chances fund to accelerate the plans the End of Life Programme Board had developed; unfortunately, the bid was unsuccessful.

2.5. The Programme board has identified the priorities for 2018/19 which are outlined in the EOL plan on a page (appendix 2).

2.6. The main areas of work we have undertaken to date are outlined in the next section.

## 3. Palliative Care Registers

3.1. To support the increase coverage of palliative care register the STP reviewed the size of registers and supported practices with the inclusion of palliative and EOL care identification within the GP Membership scheme and Quality Improvement Framework.

3.2. To support this, the EOL GP Macmillan leads provided practices with guidance on how to identify those patients who would be in the last 12 months of life and ensured practices were using the appropriate template on the GP systems to record patient information. To further support this, education and training has been delivered within the CCG localities at both a GP and practice nurse level.

3.3. Through the development of the Integrated Care Teams, MPFT, Tamworth Network of GPs and St Giles Hospice have developed a standard operating framework to further support the identification of EOL/frail elderly patients. It is proposed that this is cascaded across Primary Care Networks.

3.4. We have recently recruited to the Primary Care Nurse Facilitator roles (funded via Macmillan Cancer Care). These posts will support practices with identification and implementation of the new QI metrics within the GP contract.

## 4. Electronic Palliative Care Co-ordination System

4.1. To support the development of the Electronic Palliative Care Co-ordination System (EPaCCs) a working group was established to review the minimum data set and a decision was made in conjunction with the Digital Work stream of the STP (and support of the STP Clinical Leaders Group) that the EOL template would be the priority template when the Integrated Care Record is implemented later in 2019.

4.2. In addition, the four adult hospices have undertaken an options appraisal of alternative clinical systems and the digital requirements to ensure they are able to connect to the ICR, as their current clinical system of CrossCare in not compatible with the NHS Spine. One of the four hospices has made the decision to move to EMIS as their clinical system which will be in place by April 2019.

## 5. Admission avoidance

5.1.A number of admission avoidance schemes have been implemented during 2018/19 which has supported the reduction of non-elective admissions to hospital from patient in their own home or care home.

5.2.The schemes have ranged from low level intervention and education programmes to high level multi-agency schemes. The schemes ensure that end of life outcome measures are included within service specifications such as the High Intensity User Scheme, Integrated Care Teams and District Nursing Specification. These schemes are monitoring via the QIPP programmes within the CCGS.

5.3.We have undertaken a review of the palliative care co-ordination service which supports the North of the County and are in the process of revising the service specification in line with the development of the Integrated Care Teams and hospice service provision.

## 6.Care Homes

6.1.Across the STP we have implemented schemes to support patients in nursing and residential homes to reduce A&E admissions and support resident to maintain care in their own care home during periods of deterioration, illness and to help support those residents on their choice of place of death.

6.2.The schemes have introduced documentation which could be shared across agencies including Respect, DNACPR and ceilings of care. Quality end of life care training covering communication and comfort skills and last days of life care has also been delivered.

## 7.Children and young people

7.1.We have representation from the Children's hospices on the STP EOL programme Board who provide regular updates from the West Midlands-wide Network. We are currently awaiting further guidance regarding the Children's Hospice Grant proposals set out within the NHS Long-term plan.

## 8.Voluntary sector engagement

8.1.NHSE have provided £70k funding to Support Staffordshire and the three South Staffordshire Hospices to develop the South Staffordshire EOL Action alliance, which brings together c.20 voluntary sector organisations such as Men's lunch clubs, Citizens Advice Bureau, Bereavement Charities to facilitate conversations on death dying and advanced care planning.

8.2.A series of workshops and training sessions for the wider voluntary sector and public are planned for March 2019.The Alliance have looked at the Frome model for Community connectors and community development workers and are mapping out what services are currently available.

## 9.Further support required

**9.1.** The STP have requested further support from the Clinical Senate in undertaking both the demand and capacity planning for end of life care and the implementation of the peer review of community specialist palliative care.

## 10. Outcomes of the Staffordshire CQC Local Area Review

**10.1.** The Staffordshire CQC local area review outlined a number of actions in relation to end of life care and an action plan has been developed. The action to agree pathways with Hospices is been taken forward through a shared governance group which includes, hospice, community, primary care and acute sector partners.

**10.2.** The metrics to measure performance have been agreed through the group and the programme board and a business case is in development which will outline the resources required to support implementation.

**10.3.** The impact of the revised pathways for end of life care will be monitored via the end of life programme board.

## 11. Summary

**11.1.** Through the End of Life Programme Board, partners continue to take forward actions to deliver the priorities for end of life care, ensuring that the quality of care is maintained whilst implementing new models of care and pathways.

**Appendices/Background papers**

1. NHS England West Midlands Commissioning Blueprint STP/ICS in palliative and End of life care v0.7 September 2018/19
2. EOL Plan on a page