

Health Scrutiny Panel

Agenda Item No: 7

7 November 2013

Report Title	Quality Accounts 2012 /13 – progress report against priority: end of life care	
Classification	Public	
Cabinet Member with Lead Responsibility	Sandra Samuels Health and Well Being	
Wards Affected	All	
Accountable Strategic Director	Sarah Norman, Community	
Originating service	The Royal Wolverhampton NHS Trust	
Accountable officer(s)	David Loughton Tel Email	Chief Executive 01902 695950 David.loughton@nhs.net

Recommendations for action

The Panel is recommended to:

- 1. Comment on progress made to improve end of life care provision at Royal Wolverhampton NHS Trust.
- 2. Receive details of the national recommendations on the Liverpool Care Pathway when published and to brief the panel on its response

1.0 Purpose

As part of the current review and update of the End of Life Strategy for Adults in Wolverhampton, a small working group co-ordinated by NHS Wolverhampton City Clinical Commissioning Group (CCG) are looking at objectives and quality markers to further develop the service offered for patients considered to be within the last year of their life, these include:

- Facilitation of Preferred Priorities for Care or Advance Care Plans to involve the individuals, families, carers in decisions about their care and to allow professionals to be aware of the wishes and feelings of those receiving end of life care
- Improved communication between the different agencies through the development of shared record detailing an individual's preferences for care at the end of life
- Development of the workforce across all settings to ensure they have the necessary skills to deliver individualised care such as effective symptom management

2.0 The overarching principles include:

- 1. People approaching the end of life will be encouraged to express their wishes and feelings about how they would like to be cared for at the end of life and where possible, efforts will be made to deliver care in accordance with their wishes and feelings.
- 2. People approaching end of life or in the end of life care phase will be treated with dignity and respect at all times.
- 3. Family and carers will be encouraged and empowered to be involved in decisions concerning the care and support to be provided to their loved ones.
- 4. Where possible arrangements will be made to care for people at the end of life in their usual place of residence.
- 5. To eliminate un-necessary, avoidable admissions to hospital through Advance Care Planning and good communications between services.

It is planned that a launch of the reviewed strategy will take place in late 2013 or early 2014, by holding an Event for key stakeholders, which will be co-ordinated by the CCG.

The completed strategy will be presented to the Royal Wolverhampton Hospital Trust Board once the strategy is completed.

The Trust intends to establish an internal working group, which will be acute and community focused. This group will be set up after the launch of the End of Life Strategy for Adults in Wolverhampton with a view to implementing the identified objectives in the strategy that are purely hospital related. This objective of this group will be to ensure the hospital based priorities receive attention and focus. There is no intention of this group to work outside the agreed strategic objectives or work out with local partners, whom are key to the delivery of good end of life care.

3.0 Progress to date

Independent review of the Liverpool Care Pathway (LCP)

Nationally there has been criticism of the use of the LCP from relatives, which has been widely portrayed in national media. Therefore an expert panel, chaired by Baroness Neuberger reviewed the use and experience of the LCP in England. Subsequently the report, 'More Care Less Pathway' was published by the DoH. The review made 44 recommendations, most of which relate to the need to change national policy. In July 13, the Health Minister Norman Lamb MP wrote to Trusts stating that the principles of care underpinning the LCP are sound and when used appropriately, the LCP supports good care for the dying.

Consequently the Trust reviewed every patient that was on the LCP to find out if they were on it appropriately. No concerns were found with only one patient being on the LCP, which was consultant initiated. Guidance has been sent out to clinical teams on the principals of the End of Life Care Packages by the Medical Director, Dr Jonathan Odum and a paper was submitted to the hospital Trust Board in September detailing all the actions taken.

The national recommendations on the LCP are expected in February 2014 and this will obviously have an impact on Trust and Community planning for end of life care.

National End of Life Quality Markers

The Department of Health published its End of Life Care Strategy Quality Markers and Measures for End of Life Care in July 2008. During its development, the then Strategic Health Authority End of Life Care Pathway Chairs identified that commissioners and providers needed support in delivering improvements in care. The resultant Quality Markers provided a useful framework for tracking progress against them.

Palliative Care Funding Pilot (PCFP) Project - Royal Wolverhampton NHS Trust Wolverhampton and Shropshire.

A project manager current leads the development and delivery of the national funding pilot for palliative care services on behalf of the NHS and independent sector partners across Wolverhampton and Shropshire. This includes: Royal Wolverhampton NHS Trust, Shrewsbury and Telford Hospitals, Shropshire Community Trust, Compton Hospice, Severn Hospice and Atholl Nursing Home in Wolverhampton. The lead also acts as the key contact with the Department of Health with regard to this project. The following is progress to date:

- Bimonthly site strategic steering group meetings
- Engaged clinicians in each organisation outlining the benefits and outcomes of the pilot
- A method of collection of the data agreed across all organisations
- Information governance requirements have been met nationally and locally for the projects
- Developed a local sharing protocol for Information governance

- Submitted information to the Department of Health
- Developed a process to collect information. This includes data for individual data set for inpatients and community data collection
- Progress made on phased rollout across the site and all partners implementation of social care project is now taking place

End of Life Care Workforce Education and Training Bid

The Trust submitted a bid in respect of the funding of up to £25,000 that is available to acute hospitals via the end of life care workforce programme. This will implement the 'rapid discharge home to die' key enabler within the Trust. The Trust has not yet been informed of the outcome of this bid.

4.0 Conclusion:

Clearly, the focus on providing good end of life care for all has rightly become more topical and a national priority. This is to be welcome.

This report provides a high level update on developments and improvements that the Trust is working on solely and more importantly with other key stakeholders and agencies to improve the services, care and understanding about skills required to ensure that end of life planning can be effective and compassionate for those involved.

The committee are asked to note the developments across the End of Life priority.