HEALTH AND WELLBEING BOARD: MARCH 16 2017

POSITION STATEMENT FROM THE CHAIRMAN

Focusing on Improving End of Life Care across Leicester, Leicestershire and Rutland

On a global scale, the UK is generally considered to be performing well, and was ranked number one in the world for "best quality of death" in a 2015 Quality of Health index published by the Economist Intelligence Unit. Nevertheless, there remains clear room for improvement, as demonstrated by the National Survey of Bereaved People, which has consistently found that around 10% of bereaved relatives say the care their loved one received at the end of life was poor.

There have also been challenges and controversies relating to end of life care pathways in hospital, and a particular emphasis on the need to avoid a "tick box approach" and, instead, to treat each person as an individual, seeking to understand and prioritise their wishes and preferences holistically. At the same time, the reality of resource constraints and increasing demand across the health and social care system must be recognised, and services at the end of life must be able to cope with these challenges.

Improving services for patients at the end of life has therefore been prioritised in a number of national policies, strategies and guidelines over recent years. These have included the following documents:

- End of Life Care Strategy: Promoting high quality care for all adults at the end of life. (Department of Health, 2008) https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136431/End_of_life_strategy.pdf
- End of Life Care for Adults Quality Standard QS13 (National Institute for Health and Care Excellence, updated 2013) https://www.nice.org.uk/guidance/qs13

- One Chance to Get it Right: Improving people's experience of care in the last few days and hours of life (Leadership Alliance for the Care of Dying People , 2014) https://www.england.nhs.uk/ourwork/qual-clin-lead/lac/

- Actions for End of Life Care, 2014-16 (NHS England, 2014) https://www.england.nhs.uk/wp-content/uploads/2014/11/actions-eolc.pdf

- What's important to me: A Review of Choice in End of Life Care (Choice in End of Life Care Programme Board, 2015) https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/407244/CHOICE_REVIEW_FINAL_for_web.pdf

- Ambitions for Palliative and End of Life Care: A national framework for local action 2015-2020 (National Palliative and End of Life Care Partnership, 2015) http://endoflifecareambitions.org.uk/

Working Group (Across Leicester, Leicestershire, and Rutland)	LLR End of Life Care (one of several groups governed within the LLR STP Integrated Locality Teams workstream)
LLR End of Life SRO	Caroline Trevithick, Chief Nurse, WLCCG
LLR End of Life Project Lead	Arlene Neville, WLCCG
LLR Lead Commissioning Organisation	WLCCG

Summary of local position/case for change:
- Multiple providers currently doing several elements of Palliative/EoLC
- Not one provider can offer everything – they all need each other to do their "bit"
- Very fragmented services in LLR
- Premium offer for a small number of patients but a sub optimal offer for the majority
- Lack of co-ordination of care
- Several points of access – LPT, LOROS, UHL etc
- Increasing demands on Social services
- Capacity and demand issues generally across the sector/services
- Inordinate demand on specialist services due to lack of capacity/capability and confidence in other generalist services

(LLR EoL Health Needs Assessment, July 2016)

Consequences of problem:
- Patients don't always die in their place of choice
- Patients die in hospital waiting for appropriate packages of care at home
- Current services no longer fit for purpose/lack capacity to meet demand
- Over reliance on "Fast Track" discharges, as the best/quickest means of getting patients home, when routine services should be more available/responsive to End of Life cases, *(LLR EoL Health Needs Assessment, July 2016)*

Proposed solution – An Integrated, Community Based Palliative Care Service/Team
- Integrate existing providers into a Lead Provider Model/Alliance arrangement – this will become a core team spanning the various components currently provided by LPT, LOROS, Marie Curie
- Building in a single point of access for patient/carers and referring clinicians
- Building in a co-ordination centre/function
- Increasing night time service provision
- Increasing the generalist offer available during the day to support District Nursing/GP's

(Specification developed March 2017– Clinically led with all agencies across LLR)
(LLR Strategic Case for Change developed January 2017 – Clinically led with all agencies across LLR)

Expected benefits
- Increase in the number of patients dying in their place of choice/usual place of residence
- Decrease in the number of inappropriate requests for social care through fast track process
- Decrease in the number of patients being admitted inappropriately to hospital
- Domiciliary Care agencies can meet the need of appropriate patients needing care
- Patients will know who to call when in need day or night
- Patients will be seen when needed by the right team
- GP's and District Nurses (generalist service) will be supported to manage their EoL patients

A SELECTION OF NATIONAL PUBLICATIONS

Sustainability and Transformation Plans (STPs)

Nuffield Report "Shifting the Balance of Care"
Considers the available evidence base surrounding out-of-hospital care and what can be considered effective - https://www.nuffieldtrust.org.uk/files/2017-02/shifting-the-balance-of-care-summary-web-final.pdf

Reform – Saving STPs
Proposes 5 recommendations to ensure STPs deliver. http://www.reform.uk/wp-content/uploads/2017/02/Saving-STPs.pdf

British Medical Association
On the finanical implications of STPs, and the risks of lack of capital funding to support delivery of the plans https://www.bma.org.uk/news/2017/february/nhs-needs-9-5-to-transform

Kings Fund
Analysis of the 44 STPs - https://www.kingsfund.org.uk/publications/delivering-sustainability-and-transformation-plans
Blog on STP leadership - https://www.kingsfund.org.uk/blog/2017/03/stps-extraordinary-leadership

House of Commons Briefing Paper (Health and Social Care Integration Policy)-
http://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7902

Institute of Public Care - on Outcomes Focused Integrated Care
http://ipc.brookes.ac.uk/publications/Outcomes-focused%20integrated%20care%20-%20lessons%20from%20experience.pdf

Health and Wellbeing

Public Health Transformation Four Years On:

This compilation of case studies shows how local authorities continue to make progress on improving health and wellbeing and tackling health inequalities since public health was formally transferred from the NHS in April 2013. These case studies aim to show what potential there is for public health, if properly resourced, to make inroads in improving health and wellbeing.
http://cdn.basw.co.uk/upload/basw_43234-4.pdf

Wider Determinants of Health

This tool (from Public Health England) brings together local indicators and resources about the wider determinants of health. It is designed to draw attention to the broad range of individual, social and environmental factors which influence our health. It will provide the public health system with intelligence regarding the wider determinants of health to help improve population health and reduce health

inequalities. The tool presents data for available indicators at England and local authority levels, with links to further resources.
https://www.gov.uk/government/statistics/wider-determinants-of-health-march-2017

Cheap as Chips: Is a healthy diet affordable?

This report compares the price of food in two ways: between healthy and less healthy substitutes, and healthy and less healthy products by edible weight. It finds that there is little difference between the price of regular food products and their healthier substitutes in most categories. It argues that in light of these findings, taxes or subsidies are unlikely to have a significant impact on dietary choices.
https://iea.org.uk/publications/cheap-as-chips-is-a-healthy-diet-affordable/

Inheriting a sustainable world: Atlas on children's health and the environment

More than a decade after WHO published Inheriting the world: The atlas of children's health and the environment in 2004, this new publication presents the continuing and emerging challenges to children's environmental health. This new edition is not simply an update but a more detailed review; we take into account changes in the major environmental hazards to children's health over the last 13 years, due to increasing urbanization, industrialization, globalization and climate change, as well as efforts in the health sector to reduce children's environmental exposures.
http://www.who.int/ceh/publications/inheriting-a-sustainable-world/en/

NICE

Smoking Cessation: This self-assessment framework aims to support NHS acute trusts to develop local plans to reduce smoking prevalence and the use of tobacco. It is based on NICE guidance and covers four key areas: the systems required to implement the guidance, communication required, staff training requirements, and treatments to support staff and service users.
https://www.gov.uk/government/publications/smoking-cessation-in-secondary-care-acute-and-maternity-settings

Drug Misuse: This NICE guideline highlights the role that local authorities can play in targeting people who use drugs or are at risk from doing so. It argues that local authorities can work together with gyms, nightclubs, festivals, sexual health services and supported accommodation for homeless people to make clear the support services and advice available. https://www.nice.org.uk/guidance/NG64

NICE 2017 Conference: Taking place on 18-19 May in Liverpool, with further information at https://www.niceconference.org.uk/

NHS England

Annual NHS Staff Survey - results of the 2016 survey can be found here:
https://www.england.nhs.uk/2017/03/staff-survey/

King's Fund on Latest NHS Performance Figures including A&E Position/Performance Nationally

http://qmr.kingsfund.org.uk/2017/22/ - quarterly NHS performance overview

https://www.kingsfund.org.uk/projects/urgent-emergency-care/urgent-and-emergency-care-mythbusters?utm_source=The%20King%27s%20Fund%20newsletters&utm_medium=email&utm_campaign=8077016_NEWSL_The%20Weekly%20Update%202017-03-09&utm_content=aemythbustersbutton&dm_i=21A8,4T49K,FLWOSX,I4PDL,1 – further analysis on national position for A&E performance

For more resources please visit http://www.healthandcareleicestershire.co.uk/health-and-care-integration/resources/