

HEALTH OVERVIEW AND SCRUTINY COMMITTEE 30 SEPTEMBER 2020

END OF LIFE CARE AND ReSPECT

Summary

1. The Health Overview and Scrutiny Committee (HOSC) is to be briefed on End of Life Care and Recommended Summary Plan for Emergency Care and Treatment (ReSPECT).
2. The importance of end of life planning and better promotion of the ReSPECT¹ initiative was added to the HOSC work programme following its scrutiny of the performance of acute hospital services in Worcestershire, and a 'select style' meeting with representatives of health and social care organisations across Worcestershire in March this year.
3. Representatives have been invited from NHS Herefordshire and Worcestershire Clinical Commissioning Group and Worcestershire Health and Care NHS Trust.

Background

4. End of life care is support for people who are in the last months or years of their life. The NHS website states that '*End of life care should help you to live as well as possible until you die and to die with dignity. The people providing your care should ask you about your wishes and preferences, and take these into account as they work with you to plan your care. They should also support your family, carers or other people who are important to you.*'
5. In April 2019 an End of Life Care workstream was set up across the Herefordshire and Worcestershire Sustainability and Transformation Partnership (STP) to ensure a focus on end of life care across the two counties. The Worcestershire End of Life Network was already well established which had a good level of engagement from a range of providers.
6. In October 2019, a STP workshop to set priorities in this area was held. The workshop was led by the West Midlands Quality Review Service and attended by representatives from the health, care and voluntary sector. The following outcomes were agreed as key areas of focus across the STP:
 - Increased and early identification of people who would benefit from end of life support and personalised care planning
 - High quality care for people at the end of life, their families and carers in every setting
 - Accessible, coordinated and digitally-enabled palliative and end of life services for all patient groups

¹ The ReSPECT process creates personalised recommendations for a person's clinical care and treatment in a future emergency in which they are unable to make or express choices

- A workforce with the appropriate skills to provide people at the end of their life with high quality care and support
- High quality bereavement care, support and information available to all
- An embedded ReSPECT process which supports compassionate, effective and timely Advanced Care Planning in all care settings.

7. An initial focus was therefore to increase the identification of patients in their last year of life. This included the following:

- Promoting the identification of those living with severe frailty to ensure they are offered personalised end of life care planning.
- Working with Neighbourhood Teams to ensure an appropriate focus on end of life care and increasing the identification of those thought to be in the last year of life particularly those patients living in care homes. This has led to increased frailty assessments being carried out and greater numbers of ReSPECT conversations taking place
- Holding a quality improvement workshop for GPs to identify and suggest possible areas for improvement in terms of increased identification and support to those who would benefit from a palliative approach
- Successful national funding application to support work with a Primary Care Network (PCN) to increase identification and personalised care planning by developing advanced communication skills.

8. Improving outcomes and evaluating the experiences of those at the End of Life and their carers is fundamental to ensuring high quality of care and the following approaches have been taken to improve quality of care and learn from these experiences:

- Including an End of Life component in the Promoting Clinical Excellence GP contract which goes over and above the usual Quality and Outcomes Framework (QOF) requirements for GP practices and ensures that all practices complete an audit to identify learning
- Mortality reviews of patients dying within 48 hrs of attending an Emergency Department
- A workshop to identify cross system learning in relation to End of Life Care support for patients out of hours.

9. This learning has shaped the current strategy for personalised End of Life Care, focussing on an integrated urgent response for patients at the end of their lives.

Covid-19 Response

10. During the response to the Covid-19 pandemic an STP-wide task and finish group was set up. This group was responsible for providing clinical advice and support relating to excess mortality and the management of end of life patients. This in turn enabled rapid system-wide policy implementation such as symptom control guidance and remote verification of expected death. The group met weekly to ensure close monitoring of the response and any capacity issues.

11. Worcestershire hospices are a key part of the Covid-19 response. Additional

funding allocations were made to support their ongoing sustainability and to ensure a continued focus on system priorities such as supporting end of life training for the care home workforce.

12. The ability to deliver a high-quality bereavement support service with increased capacity and the ability to manage increasingly complex referrals was recognised and a rapid service mapping exercise was carried out to understand provision across all sectors. A provider group was established to support best practice and to support rapid information sharing. An information leaflet was developed for relatives of deceased patients to outline changes due to the pandemic. Additional funding was sought to support hospices in delivering additional bereavement support capacity. A system wide group has now been established to support ongoing commissioning decisions and the sharing of best practice.

Personalised End of Life Care Strategy

13. The programme is now refocussing on the STP Personalised End of Life Care Strategy with the following priorities:

- 24/7 single point of access to timely support and advice
- Education and training focussing on communication and clinical skills to improve timely recognition of dying, promoting personalised care and advanced planning discussions
- Access to hospice at home and transitional services for children
- Shared access to electronic patient information
- Embedded ReSPECT process across all care providers

14. The development of a Single Point of Access for staff, relatives and carers needs to take into account the complexity of the end of life pathway and the number of organisations involved in supporting patients at this time, as well as generic existing and emergent urgent and out of hours support. It is anticipated that there will be an initial focus on out of hours support for people in their last few weeks of life. Work is also being undertaken to understand the benefits of the integrated model developed in Herefordshire with the potential to apply that learning.

ReSPECT

15. Worcestershire was an early adopter of the ReSPECT process led by Worcestershire Health and Care NHS Trust and supported by Macmillan funding for two years. Funding for a further year has been agreed by the CCG.

16. As part of the Covid-19 response the STP End of Life Group developed 'My Plan or Covid' as a way of proactively contacting the very frail about their general wellbeing. This was implemented in partnership with VCS organisations by social prescribers across all Primary Care Network areas. Patients who requested it were offered the opportunity for a follow up conversation with their GP. Initial data indicates that ReSPECT form completion rates have increased since April.

17. Current priorities for ReSPECT include the roll out of ReSPECT, promoting a quality process to ensure that - where appropriate - forms are co-produced, and a focus on care homes and hard to reach groups.

Purpose of the Meeting

18. Members are invited to consider and comment on the information discussed and agree:

- whether any further information is required
- whether any further scrutiny work is required at this stage

Contact Points

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Background Papers

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

- NHS website 'What end of life care involves' [NHS website](#)
- Agenda and Minutes from the Health Overview and Scrutiny Committee on 2 March, 18 June and 20 July 2020 – available on the website: [Health Overview and Scrutiny Committee Agendas and minutes](#)
- Agenda and Minutes from COVID-19 Report to Cabinet on 4 June and 25 June 2020 – available on the website: [Cabinet Agendas and minutes](#)