

**END OF LIFE CARE - UPDATE**

**REPORT OF SUNDERLAND CLINICAL COMMISSIONING GROUP**

**1. PURPOSE OF THE REPORT**

- 1.1 To provide the Committee with an update on the Sunderland Clinical Commissioning Group End of Life Care Strategy.

**2. BACKGROUND**

- 2.1 The CCG had developed the end of life strategy in consultation with stakeholders and is a joint strategy for Sunderland. It is based on current national guidance; Ambitions for Palliative and End of Life Care, NICE Quality Standards for End of Life for Adults, One Chance to Get it Right for Palliative Care Patients and local intelligence/health needs.
- 2.2 The strategy aims to provide high quality and equitable palliative and end of life care services to patients regardless of diagnosis.

**3. CURRENT POSITION**

- 3.1 End of Life care continues to be a priority for Sunderland CCG and is a key part of many areas of transformational change contributing towards equity of services received by patients. The CCG continues to work towards having a whole system approach to end of life across health and social care in Sunderland, which would mean that patients will receive high quality individualised care, delivered at the right time by the most appropriate service. Sunderland CCG is working in partnership with providers to deliver the End of Life Plan.
- 3.2 Representatives from the Sunderland CCG will provide a presentation to the committee which will provide an update on progress on the End of Life strategy. Attached at appendix 1 is an extract from Sunderland CCG's Operational Plan relating to end of life care objectives for 2019-20.
- 3.3 A presentation will also be provided which will provide an update and progress the end of life strategy.

## **4 RECOMMENDATION**

- 4.1 The Scrutiny Committee is recommended to consider and comment on the information provided regarding the end of life care update.

---

**Contact Officer:** Nigel Cummings – Scrutiny Officer  
[nigel.cummings@sunderland.gov.uk](mailto:nigel.cummings@sunderland.gov.uk)

## **NHS SUNDERLAND CLINICAL COMMISSIONING GROUP OPERATIONAL PLAN 2019 - 2020**

### **End of Life**

#### **Overall Goals for 2019 – 2020**

Deliver integrated and patient centred care through the transformation of enhanced primary and community services.

#### **Deliverables for 2019/20**

##### ***Integrated Working***

End of Life is part of the role of the Community Integrated Teams (CITs). The CITs ensure that patients have accurate and up to date care plans which are delivered by the appropriate provider. The aim of this is to ensure that the patient's wishes are met during their care and at end of life.

##### ***Training and Education***

The CCG is continuing its education and training programme in 2019/20, which is delivered by clinical staff at St. Benedict's Hospice. Training is provided across all health and social care organisations, including Care Homes and GP Practices. The training aims ensure that staff delivering end of life care are competent in their roles as well as to be able to provide emotional, psychological and spiritual support to service users, their families, friends and carers both during the patient's illness and into bereavement.

During 2019 we plan to hold the following additional training for GPs;

- Communication skills; this aims to and improve confidence when having difficult conversations with patients and families when someone is thought to be approaching end of life.
- Anticipatory drugs; training is being arranged to ensure that GPs are confident and competent in prescribing anticipatory drugs.

Across Sunderland a number of Care Homes are taking part in the Gold Standard Framework for end of life. Once the pilot has been evaluated it is hoped that the standard will be rolled out to all Care Homes.

Emergency healthcare plan training will take place across the health system to ensure that there is a standard and consistent approach of the use of emergency health care plans.

##### ***High quality end of life care***

We are working with providers to identify areas of improvement in end of life care.

##### ***Electronic Palliative Care Co-ordination System***

The Electronic Palliative Care Co-ordination System, allows different providers of end of life care (such as District Nurses and General Practitioners) to be able to view patient records and input into them. This will

ensure that the most up to date information is available to staff who are then able to respond appropriately to the patient's condition and needs. At present City Hospitals Sunderland, NHS and GP practices are able to view the patient records but there is no interoperability, this is longer term aim.