

# End of Life Strategy Update

## Dr Khalil, Medical Director All Together Better

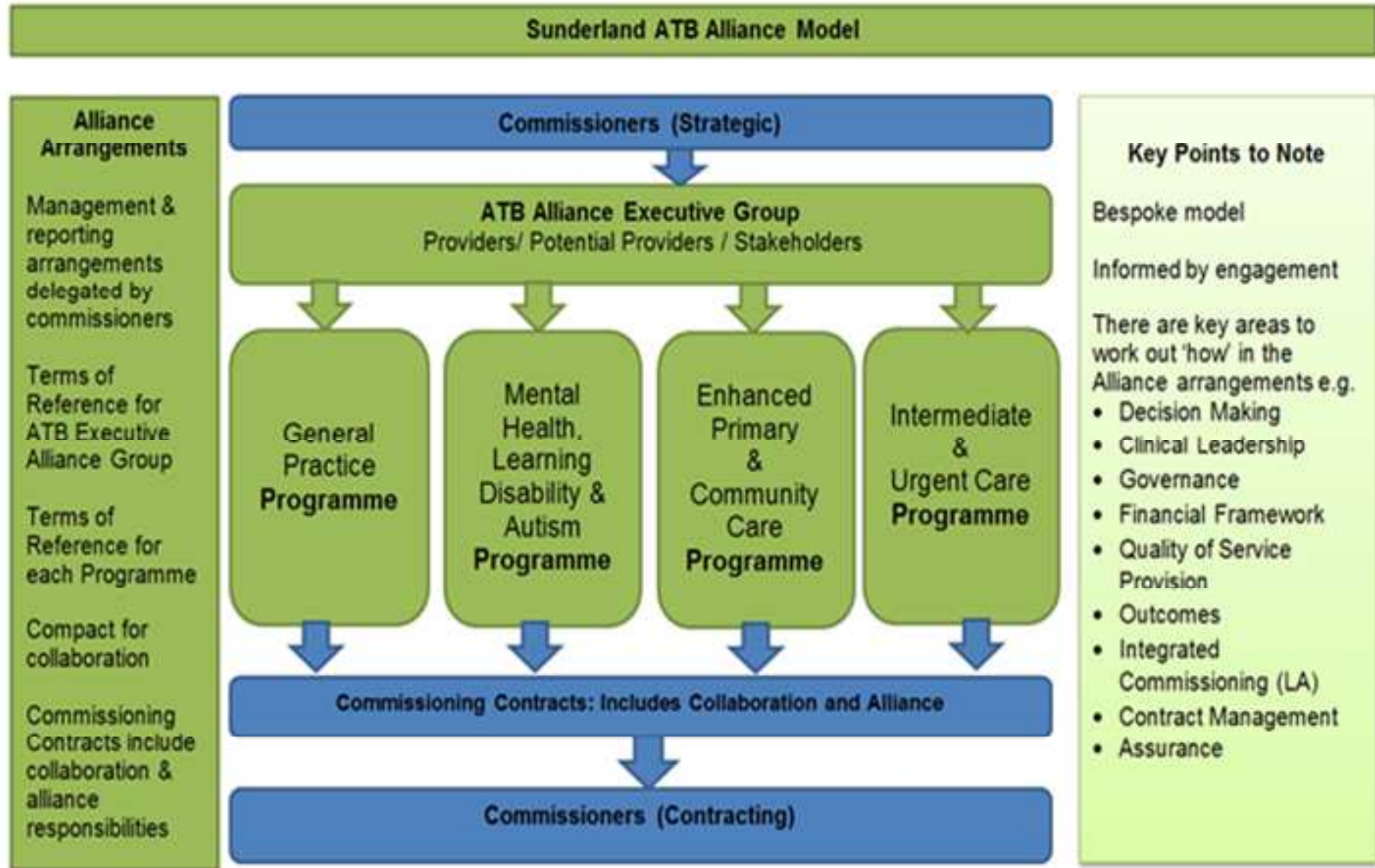
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# All Together Better Alliance April 2019



# ATBA Leadership

<b>GP Chair</b>	Dr Martin Weatherhead	<b>CCG Clinical lead</b>	Dr Fadi Khalil
<b>Managing Director</b>	Philip Foster	<b>CCG Commissioning Lead</b>	Scott Watson
<b>Director of Finance</b>	David Chandler	<b>LA Commissioning Lead</b>	Graham King
<b>Director of Nursing and Quality</b>	Ann Fox	<b>Medical Director</b>	<b>Dr Fadi Khalil</b>
<b>General Practice</b>  Jon Twelves Senior Responsible Officer, Dr James Bell Senior Responsible Clinician	<b>Mental Health Learning Disabilities &amp; Autism</b>  Lisa Quinn Senior Responsible Officer, Anthony Deary & Eirini Zochiou Senior Responsible Clinician(s)	<b>Enhanced Primary &amp; Community Care</b>  Peter Sutton Senior Responsible Officer, Louise Burn Senior Responsible Clinician	<b>Intermediate &amp; Urgent Care</b>  Sean Fenwick Senior Responsible Officer, Dr Tracey Lucas Senior Responsible Clinician

# New way of working

- Same work – but completely new way of working
- Partnership of commissioners and providers working collaboratively together to do the right thing for the system – not the organisation
- Exciting opportunities to transform care in out of hospital settings and smooth out interfaces between care sectors
- Shared sense of purpose across all partners to work better as a system and strengthen, build and transform how neighbourhoods can drive change.
- Important that we have our collective resources in the right place to support this new way of working



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# Overview of end of life in Sunderland

## Deaths

- 2998 deaths in 2018/19

## Cause of death

- 28.1% cancer
- 22.6% circulatory disease
- 15.4% respiratory disease
- 33.9% Other



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# Overview of end of life in Sunderland

## Place of Death

Place	Sunderland		North East		England	
	2017/18	2018/19	2017/18	2018/19	2017/18	2018/19
Hospital	51.4	49.3	48.1	45.2	46.7	45.4
Care Home	18.1	18.2	22	23.2	22.6	22.5
Home	23.4	24.4	24	25.1	22.8	23.8
Hospice	4.5	5.6	3.5	3.7	5.6	5.9
Other	2.51	2.4	2.41	2.7	2.16	2.4

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# Targets and outcome

- Preferred place of death recorded
- Preferred place of care recorded
- Increase the number of patients on the general practice palliative care register
- Reduction in number of avoidable emergency admissions for palliative patients
- Need for emergency hospital care in last 30 days of life

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# What has been achieved so far

## Primary Care engagement

### Achieved

- Supporting practices to increase their palliative care register – increase from 0.32% to 0.52% (national aim 1% of the practice population)
- Standardised coding so practices are now recording the preferred and actual place of death

### Future work

- Review and refresh the current guidance and communicate to practices
- Support practices who have a low number of patients on the register (threshold to be agreed)
- Review practice profiles for end of life performance and local data to identify practices who would benefit from additional support
- Further develop working relationships with PCNs and influence their work plans to support the end of life targets



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# What has been achieved so far

## Training

### Achieved

- Communication training delivered to GPs
- Emergency Health Care Plan training to GPs
- Gold Standard Framework:
  - 6 care homes in Sunderland have recently been accredited
  - 3 care homes about to be accredited
  - a further 6 about to commence in February 2019
- After death audit completed by practices, the themes will inform the training strategy
- After death audit completed by STSFT, which indicated that the majority of deaths in hospital were care home residents

### Future work

- Development of a sustainable system wide training strategy
- Evaluation of the GSF to decide whether to continue training homes with this method

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# What has been achieved so far

## Last days of life

### Achieved

- Improved the care of the dying patient documentation process by simplifying the documents and developed an electronic template within the clinical system
- Improved the anticipatory medicines prescribing process by developing an electronic process that assists with the prescribing of medication e.g. dosage and compatibility
- Currently being piloted in the two West Primary Care Networks (PCNs)

### Future work

- Review and refresh the current guidance and communicate to practices
- Support practices who have a low number of patients on the register (threshold to be agreed)
- Implement across Sunderland from April 2020

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# Future work areas

Strategy workshop held with partners identified 5 work streams:

## 1) Identifying the palliative care patient

- as outlined earlier, work with practices to increase the numbers on the PCR

## 2) Care co-ordination

- commission an integrated service, which meets national guidance
- reduce hand offs
- work with Continuing Health Care
- single point of access for palliative care services

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# Future work areas

## 3) Last days of life

- continue with pilots and implementation
- continuous monitoring and improvement of the process
- training in the other PCNs to support implementation

## 4) Bereavement

- to scope out the current provision of bereavement services, identifying any gaps and opportunities for improvement

## 5) Training

- development of a sustainable system wide training plan



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## Future work areas

# End of life strategy in Sunderland

*‘One vision, one system wide strategy in Sunderland’*

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# Questions?

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