

Wiltshire Council

Health and Wellbeing Board

19 September 2017

Subject: Adult End of Life Care Strategy Implementation Plan

Executive Summary

On 13 July 2017 the Adult End of Life Care Strategy; 2017-2020 (Appendix 1) was presented and approved at Health and Wellbeing Board. As agreed, the Implementation Plan (Appendix 2) to support the delivery of this Strategy would be developed through the End of Life Programme Board prior to submission to Health and Wellbeing Board in September.

The Implementation Plan will work to ensure best use of the existing resources, building on what has been done to date and develop specific project mandate(s) to continue the collaborative work with and between provider organisations.

The Implementation Plan outlines the prioritised actions to be implemented within the next three years and takes into account the responses from public engagement activities. It encompasses specific outcomes, activities and deadlines to help to ensure that momentum is maintained and that the right progress is achieved in a timely manner.

This Implementation Plan was approved by Wiltshire's End of Life Programme Board on 24 August 2017.

Proposal(s)

It is recommended that the Board:

- i) Discuss and approve the Implementation Plan

Reason for Proposal

At a local level, we remain committed to pursuing continuous improvement and identifying new innovations to drive developments in our End of Life Care services. The Adult End of Life Care Strategy was jointly developed by Wiltshire CCG and Wiltshire Council and the Implementation Plan seeks support this and strengthen our priorities and ensure that the commitments and aims to continued service improvement remain relevant.

Presenter name: Ted Wilson

Title: Community and Joint Commissioning Director

Organisation: Wiltshire Clinical Commissioning Group

Subject: Adult End of Life Care Strategy Implementation Plan

Purpose of Report

This Implementation Plan supports the delivery of the Wiltshire End of Life Care Strategy for Adults 2017-2020. The plan will work to ensure best use of the existing resources, building on what has been done to date and develop specific project mandate(s) to continue the collaborative work with and between provider organisations.

Background

Direction of Travel

The population of Wiltshire in 2016 was approximately 475,870 and this is predicted to rise to 492,630 by 2021¹. Around 4,000 Wiltshire residents die each year with the majority of deaths occurring in adults over the age of 65, following a period of chronic illness. Wiltshire's population is also aging, with the percentage of over 65 year olds predicted to rise from 20.6% in 2016 to 22.3% by 2021². Life expectancy in Wiltshire is 80.9 for men and 84.1 for women, higher than the regional and national averages³. Healthy Life Expectancy is also higher in Wiltshire for females and males compared to national and regional averages⁴. These increases will mean that services for older people are likely to experience increases in demand and there will be a need to plan ahead.

Nationally, most people (67%) express a wish to die at home, but only 22% actually do and 7% of people wish to die in hospital but 51% do. However, 60% of those who initially express a preference to die at home say they would change this view if doing so without support.

In 2015/16 Wiltshire Clinical Commissioning Group (CCG) was ranked 1st in the region for the (lowest) percentage of deaths which take place in a hospital at 38.8% compared to 47% nationally. Home deaths were 26.1% compared to a national average of 23.1%. Overall, 55% of Wiltshire patients died in their usual place of residence with the national average, for 2015/16 at 45.85%.

¹ Based on Office of National Statistics (ONS) interim population projections based on the 2011 Census [<http://www.intelligenenetwork.org.uk/population-and-census/>].

² Based on Office of National Statistics (ONS) interim population projections based on the 2011 Census [<http://www.intelligenenetwork.org.uk/population-and-census/>].

³ ONS. 2015. Life Expectancy at Birth and at Age 65 by Local Areas in England and Wales, 2011-13. See: <http://www.ons.gov.uk/ons/publications/re-reference-tables.html?edition=tcm%3A77-370972>

⁴ ONS. 2015. Healthy Life Expectancy at Birth for upper-tier local authorities 2011-13. See: <http://www.ons.gov.uk/ons/rel/disability-and-health-measurement/healthy-life-expectancy-at-birth-for-upper-tier-local-authorities--england/2011-13/index.html>

Process

We are committed to hearing the voices and stories of patients in order to find out what is working well and identify areas for development. Therefore, during the development of the Adult End of Life Care Strategy, it was shared with the following groups to inform its development:

- Wiltshire Dementia Delivery Board
- Carer Support Wiltshire
- Wiltshire Carers Involvement Group
- Spurgeons
- Wiltshire EoL Programme Board

In addition, Healthwatch Wiltshire facilitated three public events in Salisbury, Royal Wootton Bassett and Bradford on Avon in November 2016. Appendix 3 details the public engagement report.

Feedback from the public engagement sessions highlights a number of areas which were important to people who were at the end of life and their unpaid carers:

- Symptom control (especially controlling pain).
- Being treated with respect and dignity.
- Choice – about the location where end of life care is provided.
- Information – provided in an accessible manner for patients and carers.
- The importance of having early discussions about individual wishes.
- Support for unpaid carers and family members.
- High quality staff with end of life training and the ability to put it into practice.
- Continuity of care from clinical professionals and domiciliary carers.
- Good communication between professionals and with the patient and family.

As such, this plan outlines the prioritised actions to be implemented within the next three years (2017-2020) whilst taking into account the responses received from the public engagement activities.

Summary of Priorities

As outlined in the Strategy, the continuing key priorities are:

- For individuals to be able to access appropriate high quality care at all times, to include access to information, education and support to inform decision making and choice relating to end of life care
- To provide improved patient, carer and family centred care.
- To develop a community approach to end of life care with flexibility of services.
- To ensure individuals are empowered to plan for their end of life care.
- To ensure all providers competent in delivering high quality EOL care.
- To support the people of Wiltshire to be cared for and die in their preferred place of care.

Recognising that significant progress has been made in recent years in terms of improving the care of individuals who are approaching the end of life and their carers and that there are a range of high-quality services across the local healthcare economy, there are still important areas for development. Utilising the

public feedback that we received to shape ongoing work and service development and the national framework of Ambitions for Palliative and End of Life Care, progress on whether the aims of Wiltshire's End of Life Strategy are being achieved will be measured by:

- Increase in advance care plans and Treatment Escalation Plans offered
- Reduction in emergency admissions to hospital of people who are approaching end of life care
- Increase in people who die in their preferred place
- Increase in engagement with communities about end of life
- Improved care at home

Subsequently, the Implementation Plan encompasses specific outcomes, activities and deadlines to help to ensure that momentum is maintained and that the right progress is achieved in a timely manner.

Conclusion

This Implementation Plan is intended to support Wiltshire's End of Life Care Strategy, which sets out the local vision for end of life care as personalised, well co-ordinated and empowering patients to make informed choices about their care. Wiltshire's vision is that all patients at end of life, together with those closest to them, are able to express their needs and wishes, and that as far as clinically appropriate and practically possible, these needs and wishes are met.

Partnership working has remained key for many years in delivering improvements in End of Life Care across Wiltshire. Continuing to learn and enhance work in a joined-up manner across health, social care and the voluntary sector will be fundamental to our approach as we move forward.

The improvement in service delivery that is expected from the delivery of the strategy, through this plan, will require ownership and leadership from across the system in partnership with carers, patients, families and others that are important to them.

Next Steps and Recommendations

In September 2015, the National Palliative and End of Life Care Partnership published a national framework for local action 2015-2020⁵. This national framework for action sets out six 'ambitions' – principles for how care for those nearing death should be delivered at local level and eight principles which are the foundations to build and realise the ambitions.

Responsibility for implementing the ambitions of the new framework spans the commissioner and provider spectrum, putting onus not just on CCGs, but on providers, NHS England, Public Health England, local councils, and third sector organisations to take action, monitor progress and influence change.

⁵Ambitions for Palliative and End of Life Care: A national framework for local action 2015-2020
[<http://endoflifecareambitions.org.uk/>]

Acknowledging this, the Implementation Plan sets out to embed the 'ambitions' recommendations though:

- Personalised care planning
- Shared Records
- Evidence and information
- Involving and supporting carers
- Education and training
- 24/7 Access
- Informing Co-design of services
- Leadership

The Implementation Plan was approved by Wiltshire's End of Life Programme Board on 24 August 2017 and will provide 6 monthly progress updates to Wiltshire's Health and Wellbeing Board.

The Health and Wellbeing Board are invited to discuss and approve this Implementation Plan.

Presenter name: Ted Wilson

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