## **Update on the Wiltshire End of Life Care Programme**

Following discussion at the last Health and Wellbeing Board meeting, the multi-agency Wiltshire End of Life Care Programme Board is working to deliver the aims of the End of Life Care Strategy. The Stakeholders involved in the development of the strategy itself have identified the vision as:

The patient and their family/carer receive the care and support that meets their identified needs and preferences through the delivery of high quality, timely, effective individualised services. Ensuring respect and dignity is preserved both during and after the patient's life.

The key aim is therefore is to have patient and family centred care that improves patients' and family's experience. Planning and delivering this requires the involvement of a wide range of agencies and the membership of the Programme Board and the associated working groups reflects this. There are presently in excess of 20 organisations and interest groups in the programme's work (see the appendix below) and this membership is under continual review. In working towards this aim of improving the experience of care the following objectives have been identified:

- To ensure that Individuals can access appropriate high quality care at all times. To
  deliver this we will need to ensure that all providers are skilled and competent in
  delivering high quality EOL care services. Services will need to be effective and efficient
  and this will need to include cost effectiveness.
- To reduce inappropriate transfers of care from all settings
- That people are empowered to plan their care and supported to die in their preferred place of care
- That patients and families have choices and feel informed about them
- That services are flexible and there are equitable services for those with dementia

To deliver these objectives the Programme Board has targeted its action plan to deliver initial work in eight key areas. These are likely to be added to as their work progresses. Three of the work streams are designed to provide important information to support the planning work and our measurement of success. These are needs assessment, current service mapping, and user experience. These work streams are being led by associated agencies: Public Health, CSCSU<sup>i</sup>, and the Patients Association.

In addition, five further work streams have been set up to consider the operational and care provision areas that stakeholders believe show the clearest opportunity for improvement. These have been identified during the development of the strategy as the Electronic Palliative Care Co-ordination System (EPaCCS), Allowing a Natural Death (encompassing the Treatment Escalation Plan and DNACPR<sup>ii</sup>), CHC fast track system<sup>iii</sup>, End of Life Care provided in the patient's home<sup>iv</sup> and education. Each of these groups, with the exception of education, has project management resource provided by the CCG and multi-agency involvement in the groups. The arrangements for the education work stream are presently being confirmed following the appointment of a project lead and will differ according to the area being supported. This will include areas such as support to staff in implementing the treatment escalation plan

and care planning discussions with service users, implementing the new electronic patient care co-ordination record and the identification of the dying phase to ensure that appropriate care is provided. The Allowing a Natural Death and Needs Assessment work streams are nearing completion.

The first meeting of the care at home group was held on 27 August. This is a major project considering the range of care to be provided in the individual's usual place of residence and will clarify a model of care for Wiltshire. It was opened with a carer providing their story of their varying experiences of care when each of her parents died. The other work streams are all underway.

The Programme Board met again on 4<sup>th</sup> September to review progress and provide direction. A full update will be provided on the work on End of Life Care at the next Health and Wellbeing Board meeting on 20 November.

Jacqui Chidgey-Clark NHS Wiltshire CCG

## Stakeholders involved in the End of Life Programme Board and associated work groups

- Patient and carer representatives
- Various GP's from across the county
- Dorothy House Hospice
- Prospect Hospice
- Salisbury Hospice
- Great Western Hospital
- Great Western Community Services
- Royal United Hospital
- Salisbury Foundation Trust
- Wiltshire Council
- Medvivo
- Cruse Bereavement
- Patients Association
- Marie Curie

- Community Team for People with Learning Disabilities
- South Western Ambulance Service
- BaNES CCG
- The Complete Group
- Order of St John's Care Homes
- Somerset Care
- Mi Homecare
- Carers Programme
- Macmillan Cancer Support
- Healthwatch
- Harmoni 111
- Avon and Wiltshire Mental Health Partnership
- Motor Neurone Disease Association

<sup>&</sup>lt;sup>i</sup> Central Southern Commissioning Support Unit

ii Do Not Attempt Cardiopulmonary Resuscitation

The CCG Process for commissioning fast response services for people requiring end of life care

<sup>&</sup>lt;sup>iv</sup> The patient's normal place of residence which may be their own home or a care home