National End of Life Care programme - overview

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National Clinical Director for End of Life Care
NHS England

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The scale of our challenge

- England and Wales:
  - almost 530,000 deaths in 2015 (501,000 in 2014)

- WHO projections for Euro region:
  - NCD: from 7.9 million to 8.3 million deaths/year by 2030

- Scottish study – over 1 in 4 of hospital inpatients were dead within 12 months; a third of these died during index admission

- 75% of deaths are from non-cancer/long term/frailty conditions

- Increasing evidence of over-treatment and harm
And for End of Life Care in particular:

- Nobody likes talking about death and dying
- Death often seen as a failure of treatment
- Not just a medical or health issue – also a social and societal issue – deeply personal

- Difficult to use conventional metrics
- Those who have died unable to report back on their own experience
- Need to make sure that services deliver for everybody
How can we meet this challenge?
Ambitions for Palliative and End of Life Care:
A national framework for local action 2015-2020

National Palliative and End of Life Care Partnership
Working with our Partners
(27 of them in fact!)

Association for Palliative Medicine; Association of Ambulance Chief Executives;
Association of Directors of Adult Social Services;
Association of Palliative Care Social Workers; Care Quality Commission;
College of Health Care Chaplains; General Medical Council;
Health Education England; Hospice UK;
Macmillan Cancer Support; Marie Curie;
Motor Neurone Disease Association; National Bereavement Alliance;
National Care Forum; National Council for Palliative Care;
National Palliative Care Nurse Consultants Group; National Voices;
NHS England; NHS Improving Quality;
Patients Association; Public Health England;
Royal College of General Practitioners;
Royal College of Nursing; Royal College of Physicians;
Social Care Institute for Excellence;
Sue Ryder and
Together for Short Live
Vision for Palliative and EoLC

“I can make the last stage of my life as good as possible because everyone works together confidently, honestly and consistently to help me and the people who are important to me, including my carer(s).”

‘Every Moment Counts’ National Voices, National Council for Palliative Care and NHS England.

National Palliative and End of Life Care Partnership www.endoflifecareambitions.org.uk
Six ambitions to bring that vision about

01. Each person is seen as an individual

02. Each person gets fair access to care

03. Maximising comfort and wellbeing

04. Care is coordinated

05. All staff are prepared to care

06. Each community is prepared to help

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National Palliative and End of Life Care Partnership
www.endoflifecareambitions.org.uk
The foundations for the ambitions

<table>
<thead>
<tr>
<th>Personalised care planning</th>
<th>Shared records</th>
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<tr>
<td><strong>Education and training</strong></td>
<td><strong>24/7 access</strong></td>
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<tr>
<td>Evidence and information</td>
<td>Involving, supporting and caring for those important to the dying person</td>
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<tr>
<td>Co-design</td>
<td>Leadership</td>
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National Palliative and End of Life Care Partnership

www.england.nhs.uk
By 2020.... “significantly improve patient choice at end of life... including ensuring an increase in the number of people able to die in the place of their choice, including at home.”

Government’s Mandate to NHS England 2016-17
System challenges: how can EoLC help?
<table>
<thead>
<tr>
<th>Gap</th>
<th>Challenge/Driver</th>
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<tbody>
<tr>
<td>Health and well-being</td>
<td>• Behaviour change: how can the NHS work differently?</td>
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<td></td>
<td>• Empowering patients / public</td>
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<td>• Engaging communities – developing partnerships</td>
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<td>Care and quality</td>
<td>• Variations in outcomes</td>
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<td></td>
<td>• Reshape care delivery, e.g. new care models</td>
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<tr>
<td></td>
<td>• Use of innovation and new technologies</td>
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<tr>
<td>Funding</td>
<td>• Relentless pressure on services</td>
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<td></td>
<td>• Estimated funding gap of £30 billion by 2020/21</td>
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<tr>
<td></td>
<td>• Local Authorities under even greater pressures</td>
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<td>• Driving efficiency</td>
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<td>• Local leadership</td>
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Key drivers

• Planning Guidance 2017-19: ‘Must do’s’
  • Implement the UEC Review, ensuring 24/7 integrated care service…. by March 2020…..including a clinical hub that supports NHS 111, 999 and out-of-hours calls.
  • Deliver a reduction in the proportion of ambulance 999 calls that result in avoidable transportation to an A&E department.

• Sustainable and Transformation Plans

• Focus on improving end of life care wherever the person is
How will NHS England oversee and support delivery and improvements in EoLC?
National EoLC Programme Board

• Chaired by Sir Bruce Keogh

• Objectives:
  o NHSE Mandate
  o Choice Review response
  o Ambitions

• Assurance mechanism for DH

• Meets every 2 months

• Membership – NHS England Directors and regional rep, ALBs, DH, social care, Ambitions Partnership reps
NHS England workstreams

1. Enhancing physical and mental wellbeing of the individual

2. Transforming experience of End of Life Care in the community and in hospitals

3. Commissioning quality services that are accessible to all when needed
Programme Highlights

- Patient empowerment video
- Focus on those ‘less visible’
- Personal Health budgets
- Knowledge hub
- EoLC digital plans – including EPaCCS implementation
- National audit for care at end of life in hospitals
- Care after death in the community
- Community of practice in secure and detained settings
- EoLC commissioning toolkit
- Information for commissioners: specialist level palliative care
- Palliative care clinical data set
- Developing metrics for EoLC

www.england.nhs.uk
Lasting thought…

“How people die remains in the memory of those who live on.”

*Dame Cicely Saunders (founder of the modern hospice movement)*
Thank you for listening!

Commitment

england.endoflifecare@nhs.net