Sandwell Health & Wellbeing Board

NHS Black Country Integrated Care Board

Sandwell Palliative End of Life Care Work

Black Country Integrated Care Board

Sandwell PEoLC Self – Assessment Summary

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5
Ambition 1: Each Person Seen as an Individual	18.2%	9.1%	18.2%	9.1%	45.5%	0.0%
Ambition 2: Each person gets fair access to care	40.0%	0.0%	20.0%	10.0%	30.0%	0.0%
Ambition 3: Maximising comfort and wellbeing	6.3%	6.3%	0.0%	6.3%	75.0%	6.3%
Ambition 4: Care is coordinated	0.0%	29.2%	0.0%	29.2%	29.2%	12.5%
Ambition 5: All staff are prepared to care	0.0%	25.0%	0.0%	62.5%	12.5%	0.0%
Ambition 6: Each community is prepared to help	0.0%	75.0%	25.0%	0.0%	0.0%	0.0%

What's working well in Sandwell

- Whilst there are always areas that can be improved the self-assessment tool has shown that in Sandwell the following are areas where delivery against the ambitions is going well:
  - Ambition 3 – Maximising comfort and wellbeing
  - Ambition 1 – Each person is seen as an individual.

Key Areas for Action

- The self assessment has highlighted areas for action but in particular the following are areas where there are the biggest opportunities for growth and improvement:
- Ambition 6 – Each community is prepared to help
  - The importance of connecting with communities and developing links with the voluntary and community sector has been highlighted through the development of the Sandwell 6 promises for PEoLC. Work is underway to turn these promised into actions.
- Ambition 5 – Care is co-ordinated
  - Whilst there is a system wide EPACCS working group, the need for a place focused group in Sandwell has been recognised
- Ambition 2 – Each person gets fair access to care.
  - Whilst some this are being done well work needs to be done on primary care data and analysis of existing data in terms of ethnicity and deprivation.

Primary Care Data

- To achieve ambition 2 early identification of patients in their last year of life is key.
- National benchmarking suggests and 1% of a practices registered population should be on a Palliative Care Register, possibly higher in deprived areas.
- For practices across Sandwell the average is 0.3% of a practice's registered population are identified on a palliative care register.
- There is therefore a need to look at this and consider use of tools e.g EARLY to support primary care clinicians to identify patients needing palliative care earlier to enable better co-ordination and advance care planning across multi disciplinary teams.

Sandwell Better Endings – End of Life Care Strategy 2021 – 2026: Aim: To deliver 6 promises for people in Sandwell

1 Able to prepare

Key Outcome:

To ensure people who are approaching the end of life can access the right information at the right time, in the right place

2 Talking Openly

Key Outcome:

To normalise open conversations about death and dying.

To make sure those at the end of life have the opportunity to plan ahead, receive good end of life care and be able to die in accordance with their wishes

3 Knowledge for All

Key Outcome:

To ensure patients / the public have access to a range of educational opportunities around death and dying

4 A Confident Workforce

Key outcome:

To ensure professionals coming in to contact with those at end of life will receive the support, awareness and training needed.

5 Care designed with our communities

Key outcome:

Ensure that there is earlier access to care and support , by improving services and reaching out as widely as possible.

To improve people's end of life care experience regardless of setting and organisations involved.

To achieve outcomes for end of life care as identified by the Sandwell Integrated Care Partnership Board

6 Policy

Key Outcome:

To ensure that key local organisations lead by example in the review and implementation of policies

To ensure those living and working in Sandwell can benefit from agreed policies

Improvement Plan

- Align with the 6 national priorities and Black Country ICB system PEoLC strategy
  - Work will be driven by the following working groups

Workstreams
Primary Care
Education & Training
Policy & Strategy
Comms
Compassionate Communities

- Other groups to be established – Digital, CYP

Key Metrics

Sandwell Place will collect and report on data required to fulfil the national core metric requirements as follows:

- 1. Identification and personalised care and support planning a. Total number of people identified in their last year of life and b. percentage of these people who have had a PCSP conversation.
- 2. Establish a baseline across the regions of available services 24/7 related to PEoLC for all ages and measure against this on an ongoing basis.
- 3. Evidence of improved staff confidence, knowledge and skills in PEOLC, focussing on Personalised Care and Support Planning (PCSP) at EoL in line with the LTP commitment.
- 4. At least 33% of ICS level / ICB in each region have PEoLC as a strategic priority in their ICS / ICB plans.
- Local outcome metrics have also been drafted.

What we are working towards in Sandwell

- provide seamless, integrated care for patients approaching end of life
- deliver care in a timely and caring way, in a setting of the patient's choice, retaining their choice and dignity.
- develop advance care plans with patients and their families and supporting families and carers pre and after death.
- adopt a compassionate communities approach to supporting the diverse communities of Sandwell
- have a transparent communications approach that is timely, appropriate and accessible (including digital inclusion)

How this will be achieved

- Each thematic area creating their own terms of reference / aims & objectives
- Each thematic area being accountable to the Sandwell PEoLC Board
- Completion of needs assessment with support from Sandwell Public Health Intelligence team
- Completing community engagement activities ensuring patient voice is heard and included in decision-making
- Utilising a population health approach and actively seeking additional resources to enable completion of planned activities

Thank You

Any questions?