

Health Overview and Scrutiny Board

15th December 2015

End of Life Care Update Sandwell and West Birmingham CCG

1. Summary Statement

- 1.1 The End of Life Care procurement was discussed at both the July and September Health Overview and Scrutiny Board meetings.
- 1.2 At the September meeting, the CCG were unable to share who the contract had been awarded to due to a challenge from another Provider. This has now been resolved and we are able to confirm that the winning bidder was Sandwell and West Birmingham Hospital Trust (SWBHT).
- 1.3 It was initially hoped that the new service would commence in January 2016, following mobilisation. However due to the challenge and resulting delays, a new commencement date of 1st April 2016 has been proposed.
- 1.4 All of the current End of Life Care contracts were due to cease on 31st December 2015. In light of the delay and the reduced amount of time for mobilisation, all of the current Providers are being offered an extension in their contract until 31st March 2016.

2. Background Information

- 2.1 In 2012 'experience-led commissioning' work in End of Life Care was conducted across Sandwell to gain feedback from patients, carers and service providers on the services available to them. This resulted in a report which was adopted as an End of Life Care Strategy. In order to identify key actions to move forward and deliver the Strategy, the CCG successfully bid to be a site for a Department of Health pilot, utilising Social Investment Bonds in healthcare. A series of stakeholder

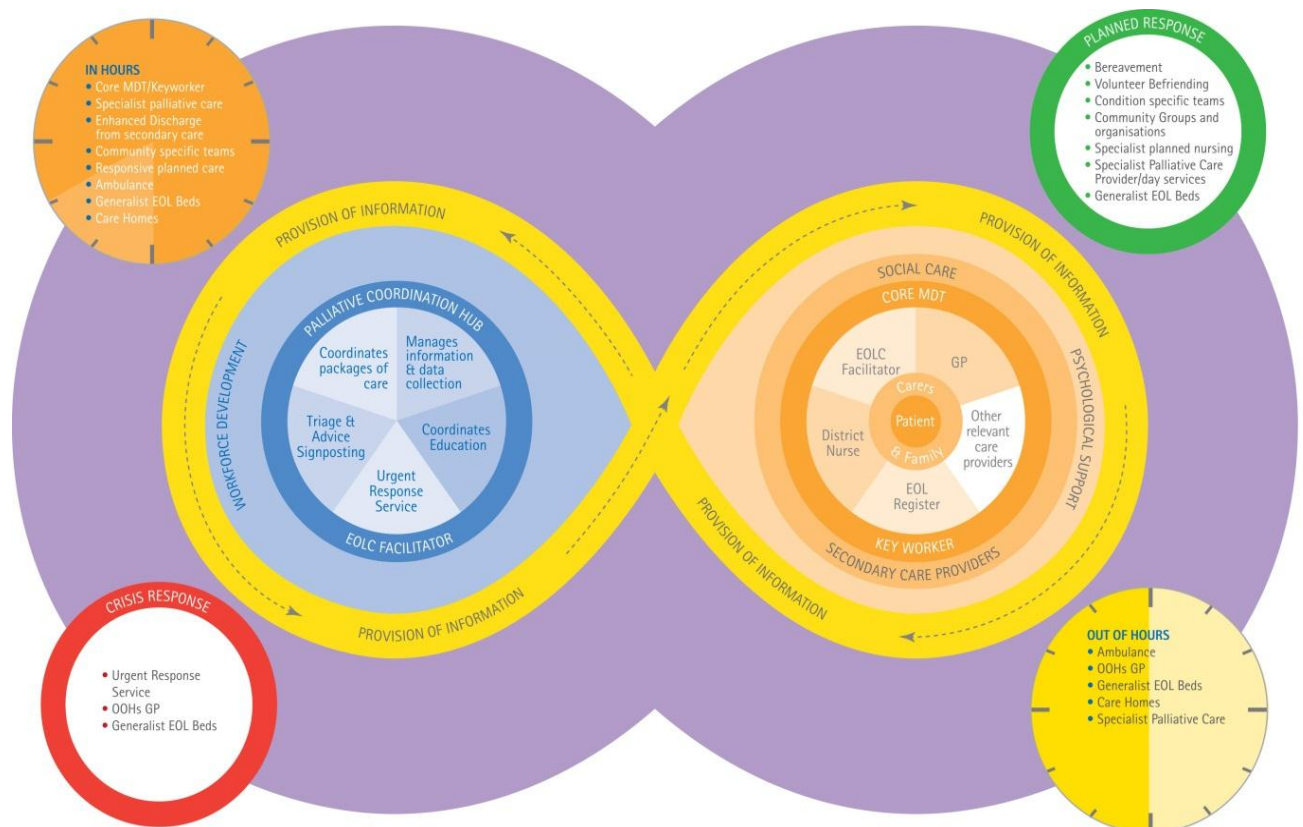
workshops led by Marie Curie were held in 2013 across both Sandwell and West Birmingham.

2.2 A number of areas for development were identified, but the key areas focused around:

- Co-ordination
- Identification / Diagnosis
- Crisis
- Preferred Place of Death

2.3 Following the co-design workshops, a new Model for End of Life Care was developed (see Fig. 1.) and this was supported by the new Service Specification for End of Life Care in Sandwell and West Birmingham. This resulted in the procurement as discussed previously.

Fig. 1. The End of Life Care Service Model



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2.4 The new service meets two key needs - firstly for the effective identification of patients, design of packages and co-ordination of services provided locally through a Coordination Hub; and secondly, an 'Urgent

Response' specialised nursing service to provide expert care and support at points of crisis preventing avoidable emergency hospital admissions.

- 2.5 The overall aim of the new service model is to improve patient experience and quality of care for local people at the End of Life. Central to this process is ensuring patients are accessing the right services at the right time and the potential to avoid preventable emergency admissions is maximised. There is also evidence that patients have strong preferences in relation to their place of death, which are not being met in many cases.
- 2.6 The key redesign elements are set out in **Appendix 1**.

3. Next Steps

- 3.1 SWBHT have appointed a 'Project Implementation Team' to oversee the implementation of the new service. The CCG will meet with the Team on a regular basis to ensure the service is set up, mobilised and delivered as set out in the service specification.
- 3.2 In addition, a Project Implementation Group has been established at the CCG. Again, this group will ensure the service is set up, mobilised and delivered as set out in the service specification. The group is Chaired by the Clinical Lead for Cancers and End of Life Care; Dr Ayaz Ahmed and also has representatives from:
- Commissioning
 - Contracting
 - Finance
 - Quality and Safety
 - Patient and Public Involvement
 - Local Authority
 - SWBHT (Dr Diana Webb) as an expert advisor
- 3.3 The mobilisation plan is currently being finalised and will need to be agreed through the appropriate Governance processes at the CCG. As such, no decision has yet been made around how elements of the service will be delivered.

3.4 The CCG will be in a position to update further ahead of the new service commencing.

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Source Documents

End of Life Care Update – July and September 2015 HOSC

Appendix 1

Identification and Management of Palliative Patients

- An End of Life Care Facilitator will support GP practices to develop their GSF register and facilitate training across the workforce
- Named key-worker
- Utilisation of the supportive care pathway as a framework for care
- Shift in focus from reactive to pro-active care

Responsive and Crisis Management

- An urgent response crisis team with the skills and resources to manage crisis and keep patients at home (if that is their wish). This service is directly accessible via one number

Admissions and Discharge from Hospital

- Proactive planning and good community services with responsive care provision both day and night, to support a rapid discharge pathway.

Supporting Carers and their Families

- Supporting carers and their families through the use of voluntary, befriending and psychological services

The Integrated Model Delivers;

- A single point of contact to help navigate a complex healthcare system
- A central coordination point for the End of Life Care system across Sandwell and West Birmingham
- Improved communication between service providers, delivering patient choice and meeting patient needs
- Improved services with clear and robust performance metrics so that high quality services can be achieved

