



End of Life Care Strategy

2017 - 2019

**PROUD TO MAKE
A DIFFERENCE**



Background

Sheffield Teaching Hospitals NHS Trust is committed to delivering high quality care to patients and those identified as important to them, across all our settings. End of life care is a key priority for Sheffield Teaching Hospitals NHS Foundation Trust. When our patients are reaching the end of their life we aim to ensure this period is as comfortable, dignified and individualised an experience as possible.

End of life care is distinct from palliative care and at Sheffield Teaching Hospitals NHS Foundation Trust we align with the Leadership Alliance in defining end of life care as 'Care given in the last 12 months of life'. This includes patients whose death is imminent (expected within a few hours or days) and those with:

- Advanced, progressive, incurable conditions.
- General frailty and co-existing conditions that mean they are expected to die within 12 months.
- Existing conditions if they are at risk of dying from a sudden acute crisis in their condition.
- Life-threatening acute conditions caused by sudden catastrophic events.
- A diagnosis of persistent vegetative state (PVS) for whom a decision to withdraw treatment may lead to their death.

Sheffield Teaching Hospitals NHS Foundation Trust places great emphasis upon preventing avoidable deaths, and has robust mechanisms in place to ensure this. However, when preventing death is no longer an appropriate option we will continue to treat and support our patients throughout their last months of life.

We work collaboratively with our community partners and with other care providers to deliver individualised care, especially with regards to preferred place of death. We aim to ensure that patient wishes are met wherever possible.

In recent years, national guidance has been published to ensure consistency of care during the last months of life. The Ambitions for Palliative and End of Life Care - A National Framework for local action 2015 – 2020¹, proposes six ambitions. The Trust is committed to ensuring that as an organisation we make these ambitions a reality, through strong leadership, commitment and empowerment. These six ambitions are:

- Each person is seen as an individual.
- Each person gets fair access to care.
- Maximising comfort and wellbeing.
- Care is co-ordinated.
- All staff members are prepared to care.
- Each community is prepared to help.



In addition, the 'One Chance to get it Right'² document (2014) describes five priorities of care for those patients in the last days of their life.

1. **RECOGNISE** – this possibility [that a person may die within the next few days or hours] is recognised and communicated clearly, decisions made and actions taken in accordance with the person's needs and wishes, and these are regularly reviewed and decisions revised accordingly.
2. **COMMUNICATE** – sensitive communication takes place between staff and the dying person and those identified as important to them.
3. **INVOLVE** – the dying person and those important to them are involved in decisions about their care to the extent that the dying person wants.
4. **SUPPORT** – the needs of families and others identified as important to the dying person are actively explored, respected and met as far as possible.
5. **DO** – an individual plan of care, which includes food and drink, symptom control and psychological, social and spiritual support, is agreed, co-ordinated and delivered with compassion.

Our Vision

At Sheffield Teaching Hospitals we believe that when someone is dying, caring for them and those important to them is everyone's responsibility. Every member of staff at Sheffield Teaching Hospitals has a key part to play to ensure that these ambitions become reality. We have recently demonstrated our commitment to patient care, 'There was evidence of compassionate and understanding care on all the wards at the hospital' Care Quality Commission 2015³. This will be embedded further by utilising the core principles of Sheffield Teaching Hospitals NHS Foundation Trust's PROUD Values.

Patient-first	Ensure that the people we serve are at the heart of all we do
Respectful	Be kind, respectful to everyone and value diversity
Ownership	Celebrate our successes, learn continuously and ensure we improve
Unity	Work in partnership and value the roles of others
Deliver	Be efficient, effective and accountable for our actions

Sheffield Teaching Hospitals NHS Foundation Trust aims, with its partners, to ensure that patients are able to say:

“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 England⁴

By embedding these values throughout our approach to the care of dying patients, we will ensure that we will continually evaluate and improve upon the quality of the care that we provide.

This vision will be realised by focusing on the following areas:

- Supporting our staff
- Personalised end of life care
- Environment
- Communication and Information

We have areas of exemplary practice within our organisation. In order to emulate this across the whole organisation during our patients last months of life, focus on the following key areas is required.

Supporting our staff

- Promote the culture that care of the dying is everyone’s responsibility.
- Ensure that effective specialist leadership is in place, led by the Medical Director and Chief Nurse, to instil the Trust vision and ambitions for end of life care at all levels across the organisation.
- Collect and provide quantitative and qualitative data to support the on-going resource requirements and evaluate the quality of end of life care at Sheffield Teaching Hospitals using evidence based practice. Care is currently being provided within the acute hospital setting, the patient’s home through community provision, the Palliative Care Unit, and a local hospice.
- Review the provision of end of life care at Sheffield Teaching Hospitals, involving stakeholders and those who deliver provision, to assess effectiveness.
- Undertake detailed consultation across the Trust to better understand the current provision of end of life care to ensure that the workforce has the skills required to care for those approaching the end of their lives.
- Having identified the requirements of individual areas, ensure that all staff dealing with patients and those identified as important to them have the skills, knowledge and tools to address their individual needs, and involve key partners such as specialist palliative care, chaplaincy and bereavement support.
- Ensure that staff at every level are trained, supported and valued for their contribution to end of life care.
- Ensure that medical and nursing staff at all levels where appropriate feel confident to discuss advance care planning and treatment options with patients and those identified as important to them, through specific communication skills training.
- Use reflective practice routinely to support staff in caring for dying patients and those identified as important to them, taking into account patient feedback.

“Staff were qualified and had the skills they needed to carry out their roles effectively and in line with best practice. They were supported to maintain and further develop their professional skills and experience”

Care Quality Commission 2015

Personalised End of Life Care

- Commit to working in partnership with our Clinical Commissioning Group, local hospice and general practitioners in developing advance care planning and delivering individualised, seamless care to those approaching the end of their lives.
- Identify patients approaching the last days of life, ensuring that they and those identified as important to them have the opportunity to discuss and create a personalised care plan which takes into consideration the five priorities outlined in the 'One Chance to get it Right' document.
- Through collaborative working with partners, embed processes to enable the rapid discharge of patients whose wishes are to return home to die.
- Allow expression of spiritual needs by patients and those identified as important to them in ways which are appropriate to them without them feeling awkward, ashamed or different to others.
- Develop and embed advance care planning tools to help staff identify a patient's priorities.
- Provide individualised end of life care in a culturally sensitive way, ensuring comfort and dignity wherever the setting.
- Continue to offer seven day, 24 hour access to specialist palliative care when needed including face to face assessment.
- Ensure that patients' wishes are fulfilled to the best of our ability.



Environment

- Identify ways of offering patients and those identified as important to them as much privacy as possible during their last days of life.
- Aim to support the needs of bereaved relatives and those identified as important to the patient.
- Ensure those identified as important to the patient have information regarding meals, parking and open visiting access when patients are in the last days or hours of life.
- Utilise staff education and repeated clinical audit measures to embed the use of an individualised care plan throughout the Trust.
- Work with partners to adapt the most appropriate electronic communication system for those within our patient population who are facing their last year of life.
- Provide written information for patients and those identified as important to them regarding end of life care, advance care planning and rapid discharge.
- Review the VOICES survey of bereaved relatives on an annual basis to ensure families feel supported and satisfied with care, and act on any issues identified.
- Ensure clear channels of communication between inpatient and community settings to ensure a seamless transition of care.
- Support staff and patients to identify and record the decision that cardiopulmonary resuscitation would not be appropriate for particular patients and ensure that this decision is communicated.
- To those identified as important to the patient, aim to provide as much information and support as possible.

Communication and Information

Indicators of Success

In order for Sheffield Teaching Hospitals NHS Foundation Trust to demonstrate the delivery of high quality end of life care, indicators of success have been identified. These will be used to monitor and evaluate the impact of end of life care delivery.

- Positive feedback from bereaved relatives and those identified as important to the patient, which informs areas for future improvement.
- Reduction in end of life care related complaints.
- Improvement in the identification of a patient's preferred place of care when dying.
- Increase in the percentage of patients dying in their preferred setting.
- Increase in engagement with advance and individualised care planning.
- Increase in numbers of patients having an individualised care plan in the last days of life.
- Successful and constructive participation in local and national audit and research.
- Confirmation that all relevant healthcare professionals have undertaken training in end of life care where it is role specific.

Next Steps

Sheffield Teaching Hospitals is committed to delivering high quality care to patients and those identified as important to them, across all our settings, in the last months of life.

We aim to ensure this period is as comfortable, dignified and individualised an experience as possible and are committed to continually monitor and further improve the care we deliver.

We will promote the culture that care of the dying is everyone's responsibility, and provide the skills and tools to enable our staff to consistently and compassionately undertake this.

Outcome measures will be used to monitor and evaluate the impact of end of life care delivery against the strategic objectives identified in the strategy. The Trust will work collaboratively to ensure the implementation of this strategy and

measure the impact. The timescales for this work will be clarified through the development of a strategic implementation plan which will outline the key actions for the application of this strategy.

This implementation plan will be developed through consultation across Sheffield Teaching Hospitals NHS Foundation Trust and with partners to ensure it meets the needs of patients, those identified as important to patients, and staff. The implementation plan will include specific actions for areas such as education and training, leadership, workforce and communication.

“Excellence is not a skill,
it's an attitude”

Ralph Marston



Glossary

Advance care planning - A voluntary process of discussion about future care between an individual and their care providers. If the individual wishes, those identified as important to them may be included. It is recommended that with the individual's agreement this discussion is documented, regularly reviewed, and communicated to key persons involved in their care.

DNACPR – Do Not Attempt Cardiopulmonary Resuscitation

References

1. National Palliative and End of Life Care Partnership (2015). The Ambitions for Palliative and End of Life Care - A National Framework for local action 2015 – 2020.
2. The Leadership Alliance for the Care of Dying People (2014). One Chance to Get it Right: Improving people's experience of care in the last few days and hours of life.
3. Care Quality Commission (2015). Sheffield Teaching Hospitals NHS Foundation Trust End of Life Care Quality Report.
4. National Voices and The National Council for Palliative Care (NCPC) and NHS England (2015). Every Moment Counts: A narrative for person centred coordinated care for people near the end of life.

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