

Health Scrutiny Committee Review of End of Life/ Palliative Care Services

Recommendation Response Tracking

	Recommendation	Who sent to/ leading on response	Response
1	It is recommended that Nottingham City Clinical Commissioning Group ensures that all GP practices are aware of the need for and importance of their involvement in palliative/ end of life care and the importance of using EpaCCs to ensure that all relevant details are recorded in relation to each individual patient.	Nottingham City Clinical Commissioning Group	<p>Accepted</p> <p>End of Life Care nurses already attend GP practice Gold Standard Framework meetings to help identify patients with End of Life care needs and to encourage and support practices in the recording of these patients on EPaCCS. They also explain the patient benefits of using the system.</p> <p>The CCG receives monthly reporting on EPaCCS usage at practice level. The reports show that the number of EPaCCS records is continually increasing and that there are 624 active referrals, or 21% of people who die in Nottingham City annually. They also show a wide variation in system usage across practices.</p> <p>The CCG will use one of its Macmillan funded GPs to support practices who are identified as low users of EPaCCS. It will monitor improvements in system uptake through the existing monthly reports.</p>
2	It is recommended that Nottingham University Hospitals NHS Trust review the level of need, including on acute wards, for the services of the Hospital Palliative Care Team at weekends and ensure services are in place to meet that need.	Nottingham University Hospitals Trust	The report and recommendations were discussed at NUH's Quality Assurance Committee (sub-committee of Trust Board attended by Chair, Chief Executive, Chief Nurse and Medical Director) in April 2016. The action following this meeting was for a Consultant in Palliative Medicine to work with the Better for You Team (team that supports change and transformation) to model the effect of providing a seven day service within the current establishment. This will be reported back to the Quality Assurance Committee.
3	It is recommended that Nottingham CityCare Partnership <ul style="list-style-type: none"> a) consult with service users and carers to assess whether the Community End of Life service is delivered in a way that means patients and carers feel supported and cared for at weekends 	Nottingham CityCare Partnership	<ul style="list-style-type: none"> a) Patient satisfaction survey to be devised and completed re end of life care received from CityCare Services including community nursing to determine satisfaction of weekend service provision.

	<p>and bank holidays in a way that is equivalent to that experienced Monday to Friday; and</p> <p>b) respond to any issues raised in the consultation to ensure that patients and carers feel supported and cared for at weekends and bank holidays in a way that is equivalent to that experienced Monday to Friday.</p>		<p>To be completed and recommendation available by end June 2016</p> <p>b) Feedback received from satisfaction surveys to be reviewed and an action plan developed. Any actions identified out of the scope of the current provider contract to be feedback with City CCG.</p> <p>To be completed by end July 2016.</p>
4	<p>It is recommended that Nottingham City Clinical Commissioning Group and Nottingham City Council ensure that the new Carer's Strategy addresses the potential for social isolation of carers and how providers can support carers either at risk of social isolation or experiencing social isolation.</p>	<p>Nottingham City Clinical Commissioning Group</p> <p>Nottingham City Council</p>	<p><u>CCG response</u></p> <p>Accepted</p> <p>Nottingham City CCG and Nottingham City Council are working together on a Strategic Review of support for carers. This means we are looking at all the ways in which we support carers, including wider situations which may affect how carers feel, and their ability to continue to care. The purpose of this review is to look at how we can improve carers' quality of life through improving early identification and support for carers, in line with the Care Act.</p> <p>By identifying carers earlier and ensuring our statutory health and social care services are also able to identify carers we will be able to support carers before they reach crisis point which is normally when a carer starts to feel most isolated.</p> <p>The Strategic Review also aims to promote the inclusion of carers as expert partners when developing the package of care for the cared for person.</p>
5	<p>It is recommended that Nottingham City Clinical Commissioning Group and Nottingham City Council ensure that the new Carer's Strategy identifies mechanisms for ensuring carers are aware of the support available to them and how to access it.</p>	<p>Nottingham City Clinical Commissioning Group</p> <p>Nottingham City Council</p>	<p><u>CCG response</u></p> <p>Accepted</p> <p>Consultation with carers so far has suggested that easy access to information and support is key in maintaining and improving their health and wellbeing. There are a wealth of</p>

			<p>services which provide support and advice available, however they are currently fragmented.</p> <p>Following feedback from stakeholders we are aiming to develop a new model for carer support which mirrors the approach Nottinghamshire County Council have taken by providing carers and healthcare professionals with a 'golden number' that they can phone for any carer related needs.</p> <p>The single point of access - 'golden number' - will effectively act as a triage hub to ascertain what support the carer needs, provide telephone support and make the necessary onward referrals. We currently have two services in the city that are delivering this method of support and we are aiming to align these services to reduce duplication and improve ease of access.</p>
6	<p>It is recommended that Nottingham City Clinical Commissioning Group as the commissioner and all providers that they commission produce robust Equality Impact Assessments, which include explicit reference to access to services for people from BME groups and how the range of needs of individuals from BME groups will be considered when receiving palliative/ end of life care.</p>	<p>Nottingham City Clinical Commissioning Group</p>	<p>Accepted</p> <p>The CCG will request that all providers of commissioned End of Life and palliative care services complete new Equality Impact Assessments with explicit reference to access for BME groups and how their needs will be met, considering all aspects of race, religion and belief.</p> <p>This will be completed by October 2016.</p>
7	<p>It is recommended that Nottingham City Clinical Commissioning Group sets relevant targets/ standards for services to BME groups in the service specification when agreeing Service Level Agreements with providers of palliative/ end of life care, so that these can be monitored and sanctions applied if the provider fails to implement them.</p>	<p>Nottingham City Clinical Commissioning Group</p>	<p>Partially accepted</p> <p>The CCG feels that it is not appropriate to include specific targets for BME groups in palliative/end of life care service specifications. The CCG is required to commission services that are equally accessible to all. Whilst this would reasonably be expected to result in service usage by people from protected characteristic groups in line with their representation in the local community, there may be factors outside the control of the provider that prevent this.</p> <p>However, monitoring of access by all protected characteristics will be included in service review meetings,</p>

			with providers required to produce remedial action plans if protected groups are under-represented. Implementation of action plans will be monitored through contract meetings, and ultimately sanctions can be applied if action plans aren't implemented.
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