

Appendix 2 - Response to Health Scrutiny Panel Review on End of Life Care

Recommendation	Response/Comments	Responsibility	Date
<p>R1 That the Care-Plus project be commissioned by NHS Tower Hamlets and London Borough of Tower Hamlets for a minimum of a further two years. The scope for disseminating learning from the project locally should be explored within the commissioning of the project.</p>	<p>LBTH and NHS Tower Hamlets initially agreed interim funding for this project until March 2010 pending the completion of an evaluation of this project.</p> <p>The evaluation was completed (and identified by the Kings Fund as good practice) and based on this evaluation the service has been recommissioned by the partners, initially for 2010/2011 and using just clinical staff.</p> <p>The future of the Project will be included within the Integrated Commissioning Programme currently being developed by LBTH and NHS Tower Hamlets.</p>	<p>Health Lead – Alison Roberts (Head of Commissioning, NHS Tower Hamlets)</p> <p>Social Care Lead – Barbara Disney (Commissioning Manager for Older People)</p>	<p>Funding has been agreed until March 2011.</p>
<p>R2 That the needs and rights of carers, partners, single sex partners and friends be recognised within the context of end of life care. In particular the tools used to facilitate discussion with families at end of life be extended to cover these groups.</p>	<p>NHS Tower Hamlets already applies the principles and aspirations set out by the panel in this recommendation in relation to end of life care using the Gold Standard Framework and Liverpool Care Pathway process of identifying the main carer and have appropriate discussions with them. It will continue to use this process so that all groups are included.</p>	<p>Social care lead – Barbara Disney</p> <p>Health Lead – Alison Roberts</p>	<p>Completed</p>

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<p>R3 That the Council and NHS Trusts work in partnership with St Joseph's Hospice to extend palliative care in the community and train health and social care and care home staff on managing end of life care</p>	<p>One of the work streams for the Delivering Choice programme is looking at workforce development and training which includes both health and social care.</p> <p>Representatives from social care are already on other work streams which include elements of education and training need identification and care home work.</p>	<p>Health, social and voluntary sector Health lead – Alison Roberts Social Care lead – Barbara Disney</p>	<p>A variety of courses for health care assistant and non professional staff have been commissioned by NHS Tower Hamlets in 2010. Ongoing</p>
<p>R4 That the NHS Trusts in Tower Hamlets and London Borough of Tower Hamlets prioritise co-ordination across health and social care during discharge from hospital and as a part of this work that the major Hospitals in Tower Hamlets explore options to prioritise the transport needs of those at end of life.</p>	<p>As part of DCP¹ this is an area that is being currently investigated and scoped</p>	<p>Health lead – Alison Roberts Social Care lead – Barbara Disney</p>	<p>Executive Board agreed for a co-ordination centre to be set up in Tower Hamlets funded from health in Jan 2010. Negotiations have started with community health services to set up a pilot.</p>
<p>R5 That the Council provide signposting and advice services on how to make wills and put in place Advance Directives and that these should be linked to information provided by the</p>	<p>There is a booklet designed by NHS Tower Hamlets "What to do in event of a death in Tower Hamlets" which as details around signposting and putting in place advance directives.</p>	<p>Social Care – Andrew</p>	<p>April 2010</p>

¹ DCP is the NHS Tower Hamlets / Marie Curie Delivering Choice Programme which was launched in August 2008 and works with partners including LBTH.

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<p>Births, Deaths and Marriages Registry services in the Borough.</p>	<p>This recommendation will be incorporated into the Council's Channel Strategy. Immediate actions include:</p> <ul style="list-style-type: none"> • To make sure the current literature is disseminated widely but sensitively including placement in Idea Stores • Reviewing and updating information put out by the Council including the use of East End Life • Ensuring Call Centre Staff are able to signpost residents appropriately 	<p>Shirras (Strategic Services Manager, LBTH)</p>	
<p>R6 That health and social care services develop a common definition of end of life care to be understood by all staff working with older people in particular. The definition should agree the trigger for health and social care services to consider the end of life care needs of the individual.</p>	<p>The definition used is set out in the DCP and we are not able to use our own local definition. However the point is accepted in so far as this is about consistent training and common understanding of what end of life care is.</p> <p>Regarding the use of triggers, there is the Gold Standards Framework for Palliative Care in the Community and in Care Homes that partners are seeking to adopt.</p>	<p>Health lead – Alison Roberts</p> <p>Social Care lead - Barbara Disney</p>	<p>Completed</p>
<p>R7 That a joint health and social care post be created to lead on the integration of health and</p>	<p>Part of this function may be covered within the coordination centre</p>	<p>Health and social care (Delivering Choice Programme)</p>	<p>On-going</p>

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<p>social care services for end of life. The remit of the role would include creating a joint protocol for information share across health and social care including for the Older People's Panel and for co-ordinating care at the key points where health and social care interact.</p>	<p>The End of Life Board is overseeing a programme of work to promote a more integrated delivery of care building on the more general integration of provider services that is currently in progress.</p> <p>The Commissioning aspect of this work will be taken forward in context of the Integrated Commissioning Executive which oversees the integration arrangements in place between NHS Tower Hamlets and the Council.</p>	<p>Integrated Commissioning Executive</p>	
<p>R8 That the NHS Trusts and the Council review their provision of rapid death certification services to take account of local community needs including that of faith and explore the options for an inter-borough service to ensure 24 hour coverage. The service that is developed as a result of this will need to include a community engagement plan to publicise and improve access to the service.</p>	<p>NHS Tower Hamlets has already begun work on this issue and is in the process of setting up a working group to look at death certification and related issues for the community and hospital.</p> <p>The Council also already operates a joint bereavement office service with Newham Council, ensuring that burial forms are issued during public holidays. When delays to burial do occur it is because a doctor has not signed a death certificate.</p> <p>There are some legal constraints which make this recommendation difficult to achieve. A death can only be certified by the doctor who has seen the patient in the last 14 days. Out</p>	<p>Health lead Alison Roberts</p>	<p>A date has not been set.</p>

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	<p>of hours/weekend death are covered by the Out of Hours GP service who will not have seen the patients before and therefore cannot certify the death and this causes a delay, especially at weekends and over bank holidays when the normal GP is not available. It may cause distress for Muslim patients who need a quick burial.</p>		
<p>R9 That the Council consider piloting a programme of community based discussions on end of life care.</p>	<p>NHS Tower Hamlets welcomes the potential to enhance community dialogue and understanding through this approach. We believe it should be done with sensitivity and must include follow up and provision of training for staff involved and responding to requests that might come from the discussions.</p> <p>Social Care and NHS Tower Hamlets have previously participated in jointly hosted public discussions and welcomed this approach. A recent public engagement around acute hospital care for people with Learning Disabilities – “Six Lives” – has shown how successful this type of approach can be.</p>	<p>Barbara Disney and Alison Roberts</p> <p>Integrated Commissioning Executive</p>	<p>On-going</p>

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	<p>We are working under the DCF programme on how we can adapt such an approach to End of Life Care. This will build on the relationships between equalities in the Council and local faith groups.</p> <p>An update will be provided to Members as part of the six-monthly monitoring of this Action Plan.</p>		
<p>R10 That on the basis of a common definition of end of life care being agreed by the Council and NHS Trusts, individuals should be assigned a single point of contact for co-ordinating all subsequent care.</p>	<p>Please see response to Recommendation 4.</p>	<p>Health and social care</p>	<p>Delivering Choice Programme - Work stream group to be developed and proposal for service improvement by January 2010.</p>
<p>R11 That a strategic approach to commissioning care homes be developed taking into account the need to deliver high quality and efficient services but also in a way that ensures there are sufficient resources and flexibility for care home staff to take up training to meet the end of life care needs of residents.</p>	<p>A service specification for end of life care in residential care homes to be developed and incorporated into the Commissioning work programme for the review of care home contracts - across both Council and NHS contracts.</p>	<p>Social Care – Barbara Disney</p> <p>Overseen by Integrated Commissioning Executive</p>	<p>Ongoing</p>

