

<b>Meeting Title</b>	<b>Board of Directors</b>		
<b>Date</b>	<b>07.11.19</b>	<b>Agenda item</b>	<b>Bo.11.19.14</b>

## PALLIATIVE CARE ANNUAL REPORT (July 2018 – July 2019)

Presented by	Liz Price (Lead Nurse for Palliative Care) & Dr Becky Owen (Consultant, Palliative Medicine)	
Author	Liz Price (Lead Nurse for Palliative Care)	
Lead Director	Karen Dawber (Chief Nurse)	
Purpose of the paper	Updating the Committee on the National Audit for Care at the End of Life (NACEL) Report including recommendations and action plan. Summary of Palliative Care Annual Report (July 2018 – July 2019)	
Key control	Identify if the paper is a key control for the Board Assurance Framework	
Action required	For approval	
Previously discussed at/ informed by	Interim NACEL report presented to the Quality Committee on 27.02.19	
Previously approved at:	Committee/Group	Date
	End of Life Operational Group (EoLOG)	01.02.19
	Quality Committee	25.09.19
Key Options, Issues and Risks		
<p>NACEL undertaken in 2018, local data was made available to the Team in January 2019, this was analysed and discussed at the EoLOG. The national report was published in July 2019 and includes 13 recommendations. 9 are partially met,3 are fully met and 1 is not applicable to the acute setting. A local action plan to meet the national recommendations has been written (appendix 1).</p> <p>The Hospital Palliative Care Team have produced their annual report highlighting their achievements, service development projects, audit summaries, public and patient involvement and includes an action plan for 2019 / 2020 (appendix 2).</p> <p>Presentation to summarise the above (appendix 3).</p>		
Analysis		
<p>Review of NACEL audit data 2018 – 2019 and Hospital Palliative Care Team (PCT) achievements over past 12 months including:</p> <ul style="list-style-type: none"><li>Increased team establishment.</li><li>56% increase in education provision.</li><li>Interactive End of Life Communication Workshops for all staff.</li><li>Collaborative project with Marie Curie Hospice.</li><li>Bereaved Carer Survey feedback.</li><li>Audits; DNACPR; Hospital PCT Prescribing; Outcome Assessment and Complexity Collaborative measures; Monitoring of End of Life Complaints, Compliments and Issues.</li></ul> <p>Hospital PCT activity data reviewed (detailed in Annual Report – appendix 2).</p>		
Recommendation		
<p>The Committee should approve this report and note the Planned Projects for 2019/2020 include:</p> <ul style="list-style-type: none"><li>Bereavement ED project and Shared Memories event – Hospital PCT.</li><li>Marie Curie Placement Project (ongoing) – Hospital PCT and Marie Curie Hospice.</li><li>Team Development – Hospital PCT.</li></ul>		

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- Joint communication skills projects with paediatrics and neonatal teams – Hospital PCT and Paediatric Palliative Care services.
- Implementation of Recommended Summary Plan for Emergency Care and Treatment (ReSPECT).

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)	In agreement with all strategic objectives, however we would also suggest changing to ‘Seek’ to provide outstanding care for patients.					

<b>Risk Implications (see section 5 for details)</b>	<b>Yes</b>	<b>No</b>
Corporate Risk register and/or Board Assurance Framework Amendments	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Performance implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>

<b>Regulation, Legislation and Compliance relevance</b>	
<b>NHS Improvement: (please tick those that are relevant)</b>	
<input type="checkbox"/> Risk Assessment Framework	<input checked="" type="checkbox"/> Quality Governance Framework
<input type="checkbox"/> Code of Governance	<input checked="" type="checkbox"/> Annual Reporting Manual
<b>Care Quality Commission Domain: Responsive</b>	
<b>Care Quality Commission Fundamental Standard: Person Centred Care</b>	
<b>NHS Improvement Effective Use of Resources: Clinical Services</b>	
<b>Other (please state):</b>	

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Relevance to other Board of Director's Committee: (please select all that apply)					
Workforce	Quality	Finance & Performance	Partnerships	Major Projects	Other (please state)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>