St Andrew's HEALTHCARE

Policy Group: Clinical
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Approved by: Charity Executive Committee, Mortality Surveillance Group

End of Life Policy

1. Policy Summary / Statement

What is Palliative Care?

"Palliative care is the active holistic care of patients with advanced progressive illness. Management of pain and other symptoms and provision of psychological, social and spiritual support is paramount. The goal of palliative care is achievement of the best quality of life for patients and their families" (NICE, 2004)

What is end of life care?
Patients are approaching the end of life when they appear likely to die within the next 12 months. This includes both patients whose death is imminent and those with:

- advanced stage, progressive, incurable conditions
- general frailty and co-existing multiple medical co-morbidities that mean that they appear likely to die within 12 months
- pre-existing conditions where the patient may be at increased risk of dying from a sudden acute crisis
- life-threatening acute conditions caused by sudden catastrophic events (GMC, 2010)

End of life needs can often be identified by the team considering whether or not they would be surprised if the patient died within the next 12 months. If they would not be surprised, then consideration of end of life needs should be given. It is difficult to predict prognosis, but the aim is to ensure the appropriate needs are met.

National Guidance

After the events of Mid Staffordshire the then Prime minister asked Professor Sir Bruce Keogh, NHS Medical Director for England, to review 14 hospital Trusts national mortality records. The investigation looked broadly at the quality of care and treatment provided within these organisations and noted that the focus on combined mortality rates was distracting Boards from the practical steps that could be taken to reduce avoidable deaths in NHS hospitals.

These findings were reinforced in the recent Care Quality Commission (CQC) report Learning, Candour and Accountability: A review of the way NHS Trusts review and investigate the deaths of patients in England 2016. It showed that in some organisations' learning from deaths was not being given sufficient priority and that valuable opportunities for improvements were being missed. Importantly the CQC also point out that there is much more we can do to engage families and carers, and to recognise their insights and experiences are vital to our learning.
The National Quality Board (NQB) guidance on Learning from Deaths (2017) is the starting point to initiate a standardised approach across healthcare providers to way

patient deaths are reported, investigation and learned from. The changes should lead to better quality investigations and more embedded learning. These reviews will generate valuable information in deciding how avoidable the death may have been and how Executive Teams and Boards can use these findings.

Palliative and end of life care at St Andrews will follow the latest national guidance, including that produced by the National Institute for Clinical Excellence, the National Council for Palliative Care, the Care Quality Commission, and the Ambitions partnership.

The Five Year Forward View for Mental Health identified that people with severe and prolonged mental illness are at risk of dying on average 15 to 20 years earlier than other people therefore it is important that organisations widen the scope of deaths which are reviewed in order to maximize learning.

This Policy has been written in line with the current NHS England Serious Incident Framework (March, 2015) and National Guidance on Learning from Deaths (A framework for NHS Trusts and NHS Foundation Trusts on Identifying Reporting, Investigating and Learning from Deaths in Care) March 2017.

Purpose

End of life care is an integral part of the care provision at St Andrew's Healthcare, and is intended to ensure that patients receive world class care throughout their life, including support after their death, and that staff to feel confident in providing that care. The policy applies across all pathways.

Working with families/carers of patients who have died offers an invaluable source of insight to improve services. Therefore there is a need to ensure appropriate support is provided at all stages of the review process and an undemanding that treating bereaved families/carers as equal partners in this proves is vital. This policy sets out how staff can support the involvement of families and carers when a death has occurred and how to engage with them to ensure there are easy opportunities to discuss or ask questions about the care received by their loved one to their preferred timescale.

In line with the NQB guidance on Learning from Deaths, every Trust must have a policy in place that sets out how it identifies, reports, investigates and learns from a patient's death. This should include the care leading up to the patient's death and considering if this could have been improved.

2. **Links to Procedures**
   End of Life Procedure
   For procedures at the point of patient's death please refer to Responding to Death Policy.

   Policies and procedures available via the Policy A-Z:
   Policies - Policies - A-Z (sharepoint.com)

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3. Monitoring and Oversight

There are audit standards on end of life care from the Royal College of Physicians, and there are NICE quality standards that can be used to audit the care plans and care given to the patients. In addition, there will be ongoing monitoring of the patient deaths and end of life care received through the mortality surveillance group

4. Diversity and Inclusion

St Andrew's Healthcare is committed to *Inclusive Healthcare*. This means providing patient outcomes and employment opportunities that embrace diversity and promote equality of opportunity, and not tolerating discrimination for any reason

Our goal is to ensure that *Inclusive Healthcare* is reinforced by our values, and is embedded in our day-to-day working practices. All of our policies and procedures are analysed in line with these principles to ensure fairness and consistency for all those who use them. If you have any questions on inclusion and diversity please email the inclusion team at DiversityAndInclusion@standrew.co.uk.

5. Training

Appropriate levels of training will be given to staff who are required to provide an understanding and ability to implement effective end of life care. E-learning modules are available through SAP for all staff and Cynthia Spencer offer training to St Andrew's Healthcare staff.

6. References to Legislation and Best Practice -. Further resources can be found on the end of life intranet site Physical Healthcare - End of Life

1. Age UK (2014) When someone dies. A step by step guide to what to do https://www.ageuk.org.uk/brandpartnerglobal/suffolkvpp/documents/ageukig03_when_so meone_dies.inf.pdf
2. Baroness Julia Neuberger et al, (2013) More Care, Less Pathway. A review of the Liverpool care Pathway https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/212450/Li verpool_Care_Pathway.pdf
3. Care Quality Commission (2010) Essential Standards for Quality and Safety https://services.cqc.org.uk/sites/default/files/gac_-_dec_2011_update.pdf
4. Care Quality Commission (2016) The state of health care and adult social care in England 2015/2016 http://www.cqc.org.uk/sites/default/files/20161019_stateofcare1516_web.pdf
5. Care Quality Commission report (2016) A different ending. Addressing inequalities in end of life care overview report https://www.cqc.org.uk/sites/default/files/20160505%20CQC_EOLC_OVERVIEW_FINAL_3.pdf

6. Department of Health (2008) End of Life Care Strategy. Promoting high quality care for all adults at the end of life https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/136431/E nd_of_life_strategy.pdf
7. Department of Health (2015) One Chance to Get it Right: One Year On Report: An overview of progress on commitments made in Once Chance to Get it Right: the system- wide response to the Independent Review of the Liverpool Care Pathway. London: Department of Health 2015. Available at: www.gov.uk/government/uploads/system/uploads/attachment_data/file/450391/One_cha nce_-_one_year_on_acc.pdf
8. General Medical Council (GMC) (2010) Treatment and care towards the end of life: good practice in decision making. London: GMC. www.gmc-uk.org/static/documents/content/Treatment_and_care_towards_the_end_of _life_-
9. _English_0914.pdfMental Capacity Act 2005
10. Hospice UK (2015) Care after death: Guidance for staff responsible for care after death 2nd edition https://www.hospiceuk.org/what-we-offer/publications?cat=72e54312-4ccd- 608d-ad24-ff0000fd3330
11. Matthew R, Davies N, Manthorpe J, Iliffe S (2016) Making decisions at the end of life when caring for a person with dementia: a literature review to explore the potential use of heuristics in difficult decision-making BMJOpen 2016;6:e010416 http://dx.doi.org/10.1136/bmjopen-2015-010416
12. Mazas (2015) Independent review of deaths of people with learning disability or mental health problems in contact with Southern Health NHS Foundation Trust April 2011 – March 2015 https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2015/12/mazars-rep.pdf
13. Mental Capacity Act 2005
14. Mental Capacity Act 2005 Code of Practice
15. Mental Health Act 1983
16. Mental Health Act 1983 Code of Practice
17. National Palliative and End of Life Partnership, Ambitions for palliative and end of life care: A national framework for local action 2015-2020 http://endoflifecareambitions.org.uk/wp-content/uploads/2015/09/Ambitions-for-Palliative- and-End-of-Life-Care.pdf
18. NICE (2004) Improving Supportive and Palliative Care for Adults with Cancer https://www.nice.org.uk/guidance/csg4
19. NICE Guideline NG31 (2015) Care of dying adults in the last days of life https://www.nice.org.uk/guidance/NG31
20. *R (Tracey) v Cambridge University Hospitals NHS Foundation Trust & Ors* [2014] EWCA Civ 822
21. RCN Foundation (2013). The Triangle of Care. Carers Included: A Guide to Best Practice for Dementia Care
22. https://www2.rcn.org.uk/ data/assets/pdf_file/0009/549063/Triangle_of_Care_-
23. _Carers_Included_Sept_2013.pdf

7. **How to request a Change or exception to this policy**

Please refer to either the Policy and Procedure Update Application Link
Or the exception process Policy and Procedure Exception Application Link

8. **Key changes** - please state key changes from the previous version of the policy

Version Number	Date	Revisions from previous issue
1.0	May 2021	Moved onto new template