The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE TRUST BOARD

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Libby McManus	Decision		High	Med	Low
	Discussion	X			X
	Information	X			
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Julie Meddings	Strategic	X			
	Operational				
	Governance		**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
			CQC inspection 03/19 NACEL audit 04/19		
CQC Domain: (safe, caring, effective, responsive, well-led)	Safe, caring, effective, responsive and well-led				

Meeting Date: **26th November 2019**
Report Title: **End of life quality improvement plan based on the draft Strategy for End of Life Care at the Queen Elizabeth Hospital NHS Foundation Trust**

PURPOSE:

In October 2019, the Quality and Performance Committee received the National Audit of Care at the End of Life (NACEL). Given the poor outcomes and high risk associated with the findings it was agreed that a comprehensive plan of improvement with responsible owners and timeframes would follow.

The purpose of this report is:

- To provide the Trust Board with the End of Life Care Strategy (draft) and Quality Improvement Plan for improving End of Life Care at the Queen Elizabeth Hospital based on the 6 ambitions for providing good end of life care.
- To provide an update on the quality improvement plan and map progress against the CQC must and should do's following the report from September 2019.

SUMMARY:

The Trust Board will be aware that agreement was reached at the August Board meeting that End of Life Care was one of two elements which make up the strategic priority "Safe and compassionate care".

In response to the CQC findings, NACEL audit results and a recent diagnostic exercise by the National Clinical Leads for End of Life Care from NHSI, a Trust wide End of Life Care Strategy has been developed which is reflected in the Quality Improvement plan. This is currently in draft form and it is envisaged that this will be ratified by the End of Life Steering Group on 22nd November 2019, copy attached.

The vision for patients is;
" 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).
The National End of Life Partnership published 6 ambitions in order to achieve this vision;

- Each person is seen as an individual
- Each person gets fair access to care

- Maximising comfort and wellbeing
- Care is coordinated
- All staff are prepared to care
- Each community is prepared to help

The Quality Improvement Plan incorporates these ambitions and illustrates the actions to be taken within the QEH and wider community to improve the care we provide to our patients and their families in the last stages of life.

The Quality Improvement Plan will be monitored through IQuip into HMB and QPC in addition to monthly reports to the End of Life Steering Group.

FINANCIAL IMPLICATIONS / EFFICIENCY SAVINGS / QUALITY IMPROVEMENT:

Quality improvement

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
					BAF 2 There is a risk that patients may receive sub-optimal care / treatment, with failures in: Outcomes, safety and experience

RECOMMENDATIONS:

The Trust Board is requested to: Agree the action plan & comment on the draft End of Life Care Strategy.