Dorset Health Scrutiny Committee

Dorset County Council



Date of Meeting	13 November 2017	
Officer	Helen Coombes, Transformation Programme Lead for the Adult and Community Services Forward Together Programme	
Subject of Report	End of Life and Palliative Care in Dorset	
Executive Summary	This report and presentation look at the provision of End of Life and Palliative Care in Dorset: how services are currently provided, what the key challenges are and how agencies are working together.	
	Within the last year the Dorset Palliative and End of Life Care Partnership Group has been established, which now meets bimonthly. It includes 24 organisations and/or stakeholder groups and is chaired by a Consultant from Poole Hospital (Dr Saskie Dorman). The Partnership Group feeds into the Integrated Community Services Portfolio Board.	
	The purpose of the Partnership Group is to bring together all organisations involved in End of Life / palliative care to network, to share best practice and to work collectively to achieve the six Ambitions for Palliative and End of Life Care:	
	 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 Terms of Reference of the Partnership Group can be found at Appendix 1.	
	Key achievements so far include:	

	 Mapping, which has been undertaken against six national ambitions published in 2015 (Ambitions for Palliative and End of Life Care: A national framework for local action 2015-2020 – see Background Papers). Those ambitions are built on eight foundations described as the "pre-conditions" for delivering rapid and focused improvement; On-going delivery of the Gold Standards Framework (GSF) which now includes a Platinum level for sustained achievement. This is being actively promoted across Dorset and the Framework links to the eight foundations. 		
	 The GSF is aimed at front-line care providers such as hospitals, care homes, primary care, domiciliary care etc. Joint working is key to achieving the highest GSF levels; The Partnership has developed an Action Plan, with subgroups to deliver against priorities (see Appendix 2); An End of Life Care Charter has been developed and agreed by the Partnership, with patient contribution (See Appendix 3). In addition, every partner agency has their own Strategy for End of Life / palliative care. 		
Impact Assessment:	Equalities Impact Assessment: Not applicable for this report.		
	Use of Evidence: Information provided by: Dorset County Council Adult and Community Services, Dorset HealthCare NHS University Foundation Trust, Dorset County Hospital NHS Foundation Trust, Healthwatch Dorset, NHS Dorset Clinical Commissioning Group, Weldmar Hospicecare Trust.		
	Budget: Not applicable.		
	Risk Assessment: Current Risk: LOW Residual Risk LOW		
	Other Implications: None.		
Recommendation	That members review the evidence presented and consider whether any recommendations should be made to providers or commissioners to improve the provision of palliative and end of life care in Dorset.		
Reason for Recommendation	The Committee supports the County Council's aim to help Dorset's citizens to remain safe, healthy and independent.		

Appendices	1	Draft Terms of Reference: Dorset End of Life Care Partnership
	2	Improving Palliative and End of Life Care in Dorset: Dorset End of Life Care Partnership Action Plan, October 2017
	3	Improving Palliative and End of Life Care in Dorset: Dorset End of Life Care Partnership Programme Charter, June 2017
	4	Presentation slides – Palliative and End of Life Care in Dorset
Background Papers	Ambit	ions for Palliative and End of Life Care: A national
	framev https:// eolc/a Weldn https://	work for local action 2015-2020 /www.england.nhs.uk/ourwork/ltc-op-eolc/improving-mbitions-for-palliative-and-end-of-life-care-framework/ nar Hospicecare Trust Quality Account 2016-17: www.weld-hospice.org.uk/what-we-do/latest-publications/quality-it-2016-2017/

Helen Coombes

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