

Are we living and dying well in Scotland?



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Primary Care in Scotland

- People at home
- In-patient complex care hospitals
- Care homes (with and without nurses)
- People in custody
- *Families and friends*
- Care at home and care home staff
- Nurses & GPs; in and out of hours services
- Allied Health Professionals
- Pharmacists: Community & Specialist
- Specialist Palliative Care Services
- Prison Healthcare Teams

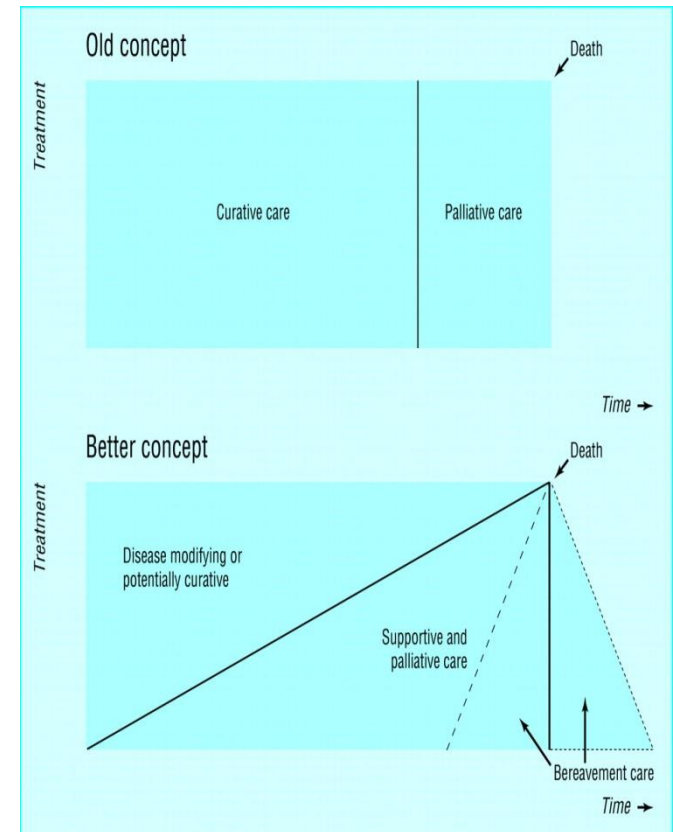
What do we know?

- Health and social care systems are geared towards supporting people to live long, healthy lives, cure illnesses and prevent people from dying prematurely.
- We will never be able to eradicate the experiences of living with advanced disease and death.
- 54,000 people die in Scotland each year and around 224,000 people are bereaved each year.

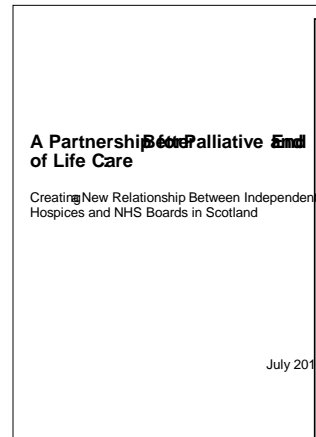
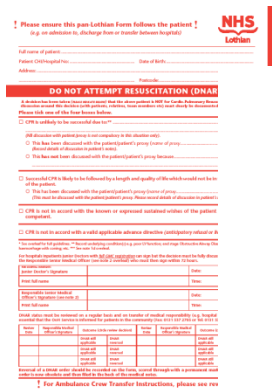
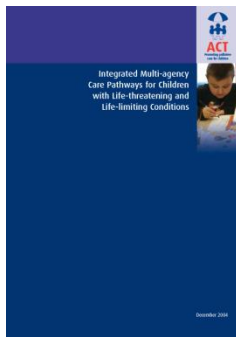
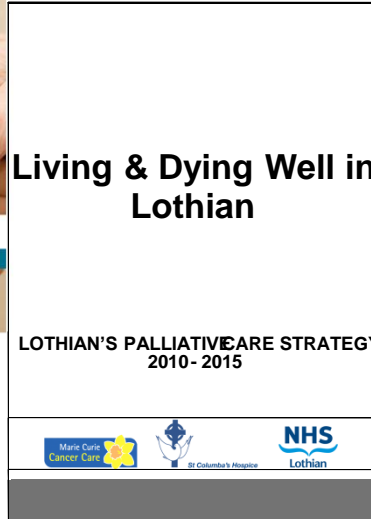
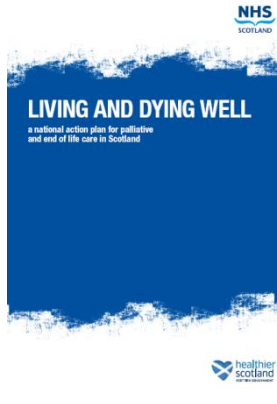
Decline, death, dying and bereavement are not minority issues: they are experiences which will affect us all personally, profoundly and intimately, at some point.

What do we know?

- Over 50% of people die in hospitals.
- 29% of all acute bed days are used by patients in their last year of life.
- Nearly 1 in 10 patients in hospital will die during their current admission.



Palliative & End of Life Care Publications



Other Policy & National Initiatives

- Healthcare Quality Strategy (2010).
- Shaping Bereavement Care (2011).
- A Framework for the Delivery of Palliative Care for Children and Young People in Scotland (2012).
- Scottish Patient Safety Programme:
www.scottishpatientsafetyprogramme.scot.nhs.uk
- Person Centred and Care Collaborative:
www.healthcareimprovementscotland.org/our_work/person-centred_care/person-centred_collaborative.aspx
- Health and Social Care Integration (2014)
- Wider Public Service Reform Agenda (ongoing).

New national clinical lead for palliative and end of life care

Achievements

- National Integrated Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) policy.
- Most Health Boards in Scotland implemented the LCP.
- Electronic Palliative Care Summary (ePCS).
- Key Information Summary (KIS):
www.nisg.scot.nhs.uk/why-nisg/our-services/project-management/key-information-summary-kis
- Development of national palliative care clinical guidelines.



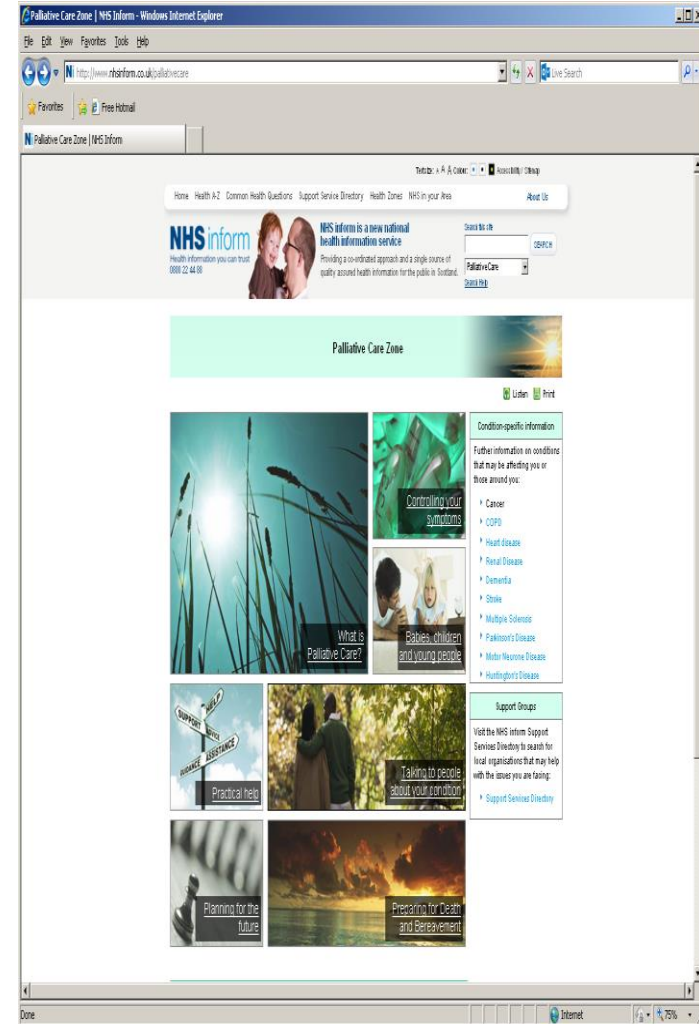
- The establishment of an alliance to promote more openness in Scottish society about death, dying and bereavement

www.goodlifedeathgrief.org.uk

- Creation of Palliative Care Zone for patients and families on the NHS Inform portal:

www.nhsinform.co.uk/palliativecare

- Cross party MSP group: palliative care.



Challenges

- Earlier Identification

'introducing palliative care was fairly straightforward for those with cancer, who typically have a clear terminal decline, but much more difficult for patients with other life-threatening illnesses' Zheng et al (2013).

- Anticipatory Care Planning
- End of Life Care
- Capturing 'Voices'
- Approach & Ownership

Opportunities

IDENTIFICATION & ANTICIPATORY CARE PLANNING

Supportive and Palliative Care Indicator Tool (SPICT™): www.spict.org.uk

Palliative Performance Score (PPS).

Integrate core elements of care planning for people with advanced illnesses within clinical processes & resources.

GP Contract: Scotland.

Health Promoting Palliative Care.

Opportunities

END of LIFE CARE

To develop a new person centred approach to end of life care.

IHI Conversation Ready Programme.

CAPTURING 'VOICES'

To give people a voice and to show how we have acted upon what they have told us.

Work together to build public confidence


Opportunities

APPROACH & OWNERSHIP


Whole system v primary care.
Palliative care v everybody business.

DEVELOPING MORE NEW & INTERESTING FRIENDS

Public & Communities.
Scottish Ambulance Service.
ICU to home.
Recovery cafe for those with addiction.
Prison.
Volunteers.

A large teal thought bubble with a black outline, containing white text. Three smaller teal circles of increasing size are positioned to the left and bottom-left of the main bubble, suggesting a thought process or a sequence of ideas.

A clear vision for change
needs to be developed and
articulated which engages
and inspires stakeholders
(both public and professionals)



Grasp the opportunity to
make new and interesting
friends