

PAPER F
PROGRAMME PLAN 2016-17

Workstream 1: Enhancing physical and mental wellbeing

Version 05/12/2016

Aim: To optimise the person's mental and physical wellbeing so that they can 'live as well as they wish' until they die, and optimise support for their families, carers and those important to them to maximise their wellbeing before and after the person's death

Objectives:

To improve public awareness, information and action

To improve patient and carer support

To develop the workforce to be more confident and competent in supporting patients and carers

Deliverables	Ref	Milestones	Responsibility	RAG Rating as at 05/12/16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	
OBJECTIVE: To improve public awareness, information and action																
Support the Dying Matters coalition to change attitudes and behaviours in relation to dying, death and bereavement	1.1	Dying Matters coalition develop a long-term sustainability plan for Dying Matters	NCPC	A/G												
	1.2	Opportunity available for all those committed to raising public awareness in dying, death and bereavement to proactively engage in change		G												
	1.3	Partnerships developed to address inequalities in talking openly about dying, death and bereavement and making EoL wishes known		G												
	1.4	Initiatives to build community capacity and resilience in end of life care are championed		G												
	1.5	Dying Matters' website is updated and maintained		G												
	1.6	Large member event held to update members, showcase member activities and galvanise member engagement		G												
	1.7	Dying Matters week is led and held across the country		G												
	1.8	Lead a targeted campaign on Personalised Care & support Planning (ACP in end of life care)		A												
	1.9	Comprehensive communication strategy is maintained		G												
	1.10	Forums for the sharing of information and ideas via printed newsletters, online forums and social media are provided		G												
	1.11	Findings of the Dying Matters coalition activities are used to influence and feed into end of life care policy and practice development nationally, regionally and locally		G												
	1.12	Measurements of success in promoting public awareness and enabling people to talk more openly about dying, death and bereavement are provided		G												
	1.13	Expert Reference Group convened to inform various strands of work		G												
	1.14	High level leadership and support of cross sector experts in place to ensure outputs and outcomes are met on time and within budget		G												
	1.15	Comprehensive risk strategy in place and maintained		G												
Publish a video online to empower people to make informed choices and maximise the benefits of their consultations	2.1	Guidance material produced	NCPC	A												
	2.2	Patient empowered video and guidance material is published														
	2.3	New resources are promoted														
Launch & lead a social media campaign which i) speaks to patients, families, carers & health professionals to promote the EoLC commitment & ii) work with partners to catalyse & promote the commitment	3.1	Deliver a social media campaign, in conjunction with the 9 regional events planned for November 2016-March 2017, to raise awareness of the EoLC commitment, the action that needs to be taken by all partners to deliver improvements in EoLC, and show case, share and promote best practice.	NHSE Comm Strategy	A/G												
	3.2	Provide social media and other comms support before, during and after the regional events, to help build and maintain momentum in the campaign.														
To recognise and designate NHS England as a Compassionate Employer, supporting bereaved employees	4.1	Partial roll out of compassionate employer programme across all four regions	NHSE Nursing	G												
	4.2	Full roll out of compassionate employer programme across all four regions														
Work with NCPC to pilot community resilience approaches, including on bereavement, based on the Dying Well Community Charter in eight local pathfinder sites around the country	5.1	Report published	Public Health England	G												

PAPER F
PROGRAMME PLAN 2016-17

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Work with voluntary sector partners to develop the work of end of life care volunteer networks, including on bereavement care, and strengthen the bonds that support dying people in their own communities.	6.1	The evaluation of the End of Life Social Action project is published	DH	G												
	6.2	New National Volunteering programme to reduce pressure on public funded services launched.														
OBJECTIVE: To improve patient and carer support																
Understand the potential for a care navigator scheme to be promoted or implemented, with the aim of helping people make choices at the end of their life	7.1	Summary produced of existing care navigators schemes, including the different role descriptor and specification currently being used	NHSE Medical	G												
	7.2	The feasibility of potential EoLC care navigator models are tested with key stakeholders	NCPC													
	7.3	Care navigator options are published and communicated	NCPC													
Improve EoLC for people who are homeless	8.1	Initial scoping research complete	NHSE Medical	G												
	8.2	Joint action plan developed with partners following stakeholder workshop														
Increase identification and care planning for people at the end of life, potentially using the frailty index	9.1	[Placeholder]: Deliverables developed from the outputs of the planning round and contracts development	NHSE Medical	A												
Improve EoLC for people who have dementia by delivering the 'Dying Well' component of the Dementia pathway	10.1	Dementia care planning guidance published	NHSE Medical	A												
Work with a small number of interested CCGs to rapidly assess the potential for PHB's and integrated budgets in EoLC and ensure that more people across the country who receive fast track NHS continuing healthcare, have the option of a PHB	11.1	Each CCG project plan and MOU signed off	NHSE Comm Strategy	G												
	11.2	High level outcome metrics agreed		A												
	11.3	Stakeholder events held		G												
	11.4	Project leads meetings held		A												
	11.5	Final report published		A												April
Test and evaluate the 'Serious Illness Conversation' initiative through the Integrated Pioneers	12.1	Training of 18 clinicians across the three pilot sites	NHSE Comm Strategy	G												
	12.2	Program reflection and learning to date														
	12.3	Clinicians commence using the conversation														
	12.4	Conversation undertaken twice monthly by each clinician														
	12.5	Additional training days if required														
	12.6	Train-the-trainer														
	12.7	Evaluation														
Identify and raise awareness of the particular needs that certain groups of carers may have, during caregiving and in bereavement	13.1	A 'big conversation' approach is delivered, focussing on young carers	NHSE Nursing	G												
	13.2	National tour of 'homeward bound' play with performances throughout the country including capturing and promoting this on film														

PAPER F
PROGRAMME PLAN 2016-17

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Support self management including care and support planning	14.1	Raise awareness among health care economies and the public and reinforce a common and consistent understanding of supported self-care and its benefits	NHS Nursing	A												
	14.2	Identify what care and support planning is being delivered as part of the UEC programme, as well as the analysis behind the cost savings		AR												
	14.3	Develop initial support offer for care and support planning, working collaboratively with key partners including the Coalition for Collaborative Care and the IPC Collaborative Development Group		A												
	14.4	Development of Health Literacy Strategy and Shared Decision Making Strategy		G												
	14.5	Published 'Good Practice' for local sites on how to use PAM to tailor care and support		G												Oct
	14.6	Publication and dissemination of the final report from the University of Leicester's qualitative evaluation into the use of PAM in the context of the NHS in England		G												
Address inequalities in EoLC in respect of Learning Disabilities	15.1	Scoping workshops held	NHSE Medical/Nursing	G												
	15.2	Quick guide to be developed outlining common issues and links to tools and best practice for people with LD at the end of life														
Address particular concerns around multimorbidity and EoLC considering renal, respiratory and heart disease.	16.1	Scoping workshop held	NHSE Medical	G												
	16.2	[Placeholder]: Deliverables developed from the outputs of the scoping workshop														
EoLC forms a core part of national staff experience work	17.1	Scoping meeting held to define piece of work	NHSE Medical/Comm Strategy	A/G												
	17.2	[Placeholder]: Deliverables developed from the outputs of the scoping workshop														
Work with NHS England and system and voluntary sector partners to identify bereavement care pathway exemplar models to be shared widely across the NHS	18.1	Engagement with bereavement charities to support work at NHS England and in voluntary sector.	DH	G												
	18.2	Commission for a consortium of baby loss charities on the definition of a standard bereavement pathway for families who have experienced baby loss (subject to funding)														
Work with system partners to explore the idea of identifying a maternity bereavement champion for each regional network	19.1	Department to promote idea at the launch of a maternity loss toolkit	DH	G												
Consider also the implications of bereavement care when a child or young person dies, and how national leadership can be provided for different forms of bereavement support.	20.1	Engagement with the Paediatric Bereavement Network as they develop standards for bereavement services in paediatric tertiary centres	DH	G												
	20.2	Development of a maternity loss toolkit														
OBJECTIVE: To develop the workforce to be more confident and competent in supporting patients and carers																
HEE will work with its key partners to ensure that all staff delivering end of life care are appropriately trained, particularly in the five priorities for care. HEE will work with its Medical and Nursing Advisory Groups to review progress in strengthening the undergraduate and postgraduate curricula to support patient choice and improving quality in end of life care. HEE will also ensure workforce planning delivers the right people with the right skills to support improved quality and greater choice in end of life care, in both hospital and out-of-hospital settings	21.1	Work with Skills for Care and Skills for Health to develop a refreshed core competency framework to standardise end of life care training and education	HEE	G											April	
	21.2	Deliver (through a lead local area) a national action plan to promote best practice in workforce education and training in end of life care.		G												April
	21.3	Work with NHS Employers to promote best practice on employer-led training, demonstrating the benefits to employers to incentivise further investment in end of life care training		G												
	21.4	Work with both the Medical and Nursing HEE Advisory Groups, which comprise over 20 partners from the respective professions, to review progress in strengthening undergraduate and postgraduate curricula to support patient choice and improving quality in end of life care and how these developments can be embedded in HEE's national delivery plan		G												April
	21.5	Work closely with the Nursing and Midwifery Council in its fundamental review of the skills and competencies that future nurses will be expected to meet to ensure these respond to the needs of patients at the end of life		G												April
	21.6	Work with NHS England and the wider system through its Workforce Advisory Board to better understand the wider health and social care workforce needs in the context of the NHS Five Year Forward View, to ensure that we are growing the wider workforce, including community and district based nursing, to keep pace with the growth of GP numbers and to deliver the new models of care, including those relating to end of life care		A/G												

PAPER F
PROGRAMME PLAN 2016-17

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	21.7	Remain focussed on requirements for staff groups required to deliver high quality end of life care: Under the overall plans for the NHS workforce, proposed training levels will provide for over 70,000 growth in nurses, midwives, allied health professionals, and scientists over the next five years, as well as over 10,000 consultants and GPs		G											
	21.8	Develop Community Education Provider Networks (CEPNs) to provide the infrastructure necessary for multi-professional training and education in primary care. End of life care education and training will be an integral part of this approach.		G											April
	21.9	Develop the GP and community nursing workforces. The Transforming Nursing for Community and Primary Care project is working in partnership with the Royal College of Nursing, RCGP and NHS England to develop a comprehensive and realistic plan for the future of primary care nursing services. The programme aims to ensure the supply of highly skilled, competent nursing staff to improve individual outcomes and support the move to care closer or in the patients' home, including those in the last stages of their life		G											
Ensure how the healthcare workforce can be supported through excellent education and training to deliver the very best care to patients is reflected in the HEE Mandate for 2016/17. Include requirements to deliver the right education, training and workforce planning to support improved quality and choice in end of life care and we expect these to be reflected in the HEE Mandate for 2016/17.	22.1	Quality end of life care deliverables included in the NHS England Mandate	DH	G											
To empower and enable older people and families to hold conversations about end of life	23.1	A final social research report and an insight driven leaflet (families), a film and guidance toolkit (HCPs).	Age UK (Strategic Partners Programme)	A/G											
To empower and enable healthcare professionals to communicate with patients and families about end of life, particularly around nutrition and hydration needs and how these relate to the physiological changes															
Consider also the implications of bereavement care when a child or young person dies, and how national leadership can be provided for different forms of bereavement support	24.1	Engagement with the Paediatric Bereavement Network as they develop standards for bereavement services in paediatric tertiary centres	DH	G											
	24.2	Development of a maternity loss toolkit													

Key	
	Slippage
	Deadline
	Activity
	No activity

PAPER F
PROGRAMME PLAN 2016-17

Workstream 2: Transforming experience of end of life care in the community and hospitals

Version 05/12/2016

Aim: To significantly improve the experience of end of life care at home, in hospitals, care homes, hospices and other institutions

Objectives:

To improve the use of digital solutions in care delivery

To develop new models of end of life care

To provide effective improvement support

Deliverables	Ref	Milestones	Responsibility	RAG Rating as at 05/12/16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17		
OBJECTIVE: To improve the use of digital solutions in care delivery																	
Produce digital guidance for EoLC aimed at local health economies that sets out our ambition for the work and describes how to implement the digital aspects of an EoLC journey	1.1	Skeleton structure of the guidance developed and content commissioned	NHSE Medical	A													
	1.2	Guidance published															
	1.3	National work packages commissioned as a result of gaps identified in development of the guidance															
Information Standard SCCI 1580 and associated technical guidance maintained	2.1	All existing issues raised on the existing change, risk & issues and CPAG logs are reviewed as part of handover from PHE with new CPAG established	NHSE Medical	G													
	2.2	Information standard and technical guidance are maintained within Digital Steering Group governance structure and updated as appropriate															
OBJECTIVE: To develop new models of end of life care																	
Support development and delivery of social finance project to test new community based models of EoLC	3.1	Investment is secured in a number of CCGs for community nursing models at the end of life; learning is captured and shared with NHS England as the projects progress	NHSE Medical	A													
EoLC forms a core component of UEC programme deliverables including clinical hubs	4.1	Guidance for clinical hubs includes recommendation for access to specialist palliative care advice	NHSE Operations and Information	A													
	4.2	EoLC content enhanced within refreshed UEC commissioning standards guidance; further opportunities for engaging in UEC programme identified															
Rehabilitation is embedded within the EoLC programme	5.1	Links and case studies relevant to rehabilitation are established on the knowledge hub	NHSE Medical	A													
The outcomes of the ICS workstream are to support the health and care sectors to work together effectively in order to reduce delayed transfers of care from hospitals and reduce avoidable admissions. All activities have the aim of improving outcomes for people receiving care in their home and in care homes.	6.1	Review of reviews: enhanced care in care homes	NHSE Operations and Information	G													
	6.2	Quick Guide: Managing care home closures															
	6.3	Quick Guide: Discharge to assess															
	6.4	Quick Guide: Secure email															
	6.5	Quick Guide: Out of hours services in care homes															
	6.6	Quick Guide: Upskilling care home staff															
	6.7	Care home data project															
	6.8	Commissioning guide for care homes															
	6.9	Care home record sharing project															
	6.10	Quick guide: rolling out technology in care homes															
	6.11	Quick guide: care passports															
	6.12	Quick Guide: Summary Care Record															
	6.13	Communications Plan: Summary Care Record															
	6.14	Simple Early Detection of Deterioration Cards															
	6.15	Follow up after discharge - best guidance															

PAPER F
PROGRAMME PLAN 2016-17

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	6.16	Quick Guide: Integrated Discharge Teams		Green												
	6.17	Quick Guide: CCG Engagement Programme: Health and Housing														
	6.18	Launch of Quick Guide: CCG Engagement Programme: Health and Housing														
	6.19	Series of webinars for CCG Engagement Programme: Health and Housing														
As part of the New Care Models programme, MCP sites focussing on EoLC receive national support and learning is shared more widely	7.1	New Care Model sites focussing on improvements in EoLC share learning for national dissemination and receive support from wider EoLC programme where specific needs are identified	NHSE Comm Strategy	TBC												
Specific issues faced in community settings relating to EoLC are identified and addressed	8.1	Scoping meeting held to define piece of work	NHSE Medical	A/G												
	8.2	[Placeholder]: Deliverables developed from the outputs of the scoping workshop														
A NEOCIN focus on end of life care in the care home setting to support service delivery	9.1	Achieve a NEOCIN focus on end of life care in the care home setting to support service delivery	Public Health England	G												
EoLC is part of the Ambulance service consensus statement	10.1	Consensus statement is published and includes references to EoLC	NHSE Medical	G												
Improve EoLC for people in secure and detained settings	11.1	Community of practice for secure and detained settings is established through two launch events	NHSE Medical	G												
	11.2	Community charter developed for people who receive EoLC in prisons														
OBJECTIVE: To provide effective improvement support																
The TRANSFORM enablers and other hospital improvement programmes are promoted for local adoption	12.1	Soft relaunch and promotion of the Transform enablers	NHSE Medical	G												
	12.2	All hospital improvement programme data collated and used to inform work of the oversight group														
Develop and maintain knowledge hub for guidance, best practice and case studies	13.1	Phase 1 of the knowledge hub development is complete	NCPC	G												
	13.2	Phase 2 of the knowledge hub development is complete														
To support Trusts to improve End of Life Care delivery	14.1	Support four trusts to move from Inadequate CQC rating for EOLC to a 'Requires Improvement' rating	NHS Improvement	G												
	14.2	To support six trusts to move from a 'Requires Improvement' CQC rating for EOLC to a 'Good' rating														
To have a NHSI EoLC improvement programme	15.1	To agree NHSI's Oct 2016 - Oct 2017 EoLC improvement programme	NHS Improvement	A												
	15.2	Launch of formal improvement collaborative														
	15.3	Monitoring of improvements re trusts improving CQC ratings														

Key	
	Slippage
	Deadline/Complete
	Activity
	No activity

PAPER F
PROGRAMME PLAN 2016-17

Workstream 3: Commissioning quality services that are accessible to all when needed

Version 05/12/2016

Aim: To support commissioners and service providers to design and implement models of care which promote integration and care that feels coordinated to those using, and delivering, end of life care

Objectives:

To improve data and information

To improve the evidence base for commissioning decisions

To develop improved contracting and funding mechanisms

Deliverables	Ref	Milestones	Responsibility	RAG Rating as at 05/12/16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
OBJECTIVE: To improve data and information															
Commissioners and providers use the SPC dataset to understand casemix & outcomes	1.1	Specialist palliative care dataset and associated evaluation from the pilot sites feasibility study are published	NHSE Medical/PHE	A/G											
Develop metrics for EoLC for national and local adoption, with a particular focus on metrics for inclusion in the CCG IAF	2.1	Scoping and research project complete that shortlists recommended metrics to take forward	NHSE Medical	A											
	2.2	EoLC metrics are considered for inclusion within national data collections													
Through Healthcare Quality Improvement Partnership (HQIP), commission care of dying national audit	3.1	Scoping meeting held to inform content of the future audit	NHSE Medical	G											
	3.2	NHS England agree content of tender for audit													
	3.3	OJEU tenders process initiated													
Support development of proposals to capture patient and carer experience	4.1	1st stage interim report received setting out potential metric options identified through stakeholder engagement by Ipsos MORI	NHSE Nursing	G											
	4.2	2nd stage research undertaken to explore potential metric options with stakeholders													
	4.3	2nd stage interim findings presented by Ipsos MORI at cross-system meeting, including reps from NHS England, CQC and DH													
	4.4	Patient and carers interviews to be undertaken by Ipsos MORI regarding the potential metric options													
	4.5	Final findings and recommendations to be delivered by Ipsos MORI to NHS England													
	4.6	Decision as to which metric will be pursued to be made by core health system stakeholders													
	4.7	Budget to discussed by stakeholders and requested as part of 2017/18 business planning													
Develop and publish an End of Life Care Atlas of Variation on End of Life Care	5.1	Atlas of variation is published	Public Health England	G											
OBJECTIVE: To improve the evidence base for commissioning decisions															
Contribute to development of NICE guidance and Quality Standards	6.1	Contributions submitted to the development of Clinical Guidelines for End of life care for adults in the last year of life	NHSE Medical	G											
	6.2	End of Life Quality Standards Update - Published													
	6.3	End of Life Care in Children, Clinical Guideline published													
	6.4	Contribute to the NICE service guidelines													
Spread innovation and best practice across the country	7.1	[PLACEHOLDER] Call to action for EoLC innovation to be launched through the innovation portal - detail tbc	NHSE Medical/Comm Strategy	A											
	7.2	Series of roadshows are held across the country to spread best practice, innovation and promote the government's EoLC commitment	NHSE Medical	G											
EoLC is embedded as part of the Rightcare programme	8.1	Casebooks illustrating the optimal pathway for EoLC published	NHSE Finance	G											
	8.2	Commissioning for Value packs are expanded to include EoLC as part of the pathway, with associated guidance included in the packs	NHSE Finance												

PAPER F
PROGRAMME PLAN 2016-17

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Support commissioners with 24/7 access to palliative care	9.1	Evaluation of models of 24/7 SPC models is complete	NCPC	A											
	9.2	Publication and communication of evaluation	NCPC & NHSE Medical												
Review the health economics evidence base on end of life care and the development of a tool to support local commissioning networks	10.1	Review complete and tool developed	Public Health England	G											
Support the adoption of the End of Life Care commitment through ensuring that health care professionals have access to the right materials and resources to support them with commissioning.	11.1	Undertake a landscape review of available commissioning guidance for end of life care, to identify where there are gaps or the opportunity to share best practice.	NHSE Comm Strategy	A											
OBJECTIVE: To develop improved contracting and funding mechanisms															
Use contracting levers to increase identification and care planning for people at the end of life	12.1	Identification and care planning for people at the end of life are put forward for inclusion in the planning round - specifically within the GP contract, MCP contract, NHS contract and planning guidance	NHSE Medical	A											
Administer the children's hospice grant funding, improving the allocation formula to become more equitable	13.1	Consultation on grant allocation formula complete	NHSE Finance	A											
	13.2	Proposal for 17/18 grant allocation agreed	NHSE Finance												
Emphasise the importance DH place at a national level on improving end of life care	14.1	Quality end of life care deliverables included in the NHS England Mandate	DH	G											
Engage with Chairs of Health and Wellbeing Boards to ensure end of life at the forefront of their thinking as they work on local strategies	15.1	Letters to local health economies from Minister about the EOLC Commitment and STPs	DH	G											
Publish progress report on choice review response implementation one year after publication	16.1	DH complete interim stocktake, 6 months on in December & one year on progress report in July	DH	G											
Consider also the implications of bereavement care when a child or young person dies, and how national leadership can be provided for different forms of bereavement support.	17.1	Engagement with the Paediatric Bereavement Network as they develop standards for bereavement services in paediatric tertiary centres	DH	G											
	17.2	Development of a maternity loss toolkit													
Develop and publish currencies for specialist palliative care and associated commissioning guidance	18.1	Draft guidance on how to use the specialist palliative care currencies is to be published alongside the Section 118 consultation document	NHSE Finance	G											
	18.2	Final version of the guidance to Commissioners and Providers is published, reflecting feedback received during the consultation period	NHSE Finance												

Key	
	Slippage
	Deadline/Complete
	Activity
	No activity