



# Leeds Palliative Care Network

## Identification of Need and Planning Ahead

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# Summary

Background

Planning Ahead / ReSPECT update

ReSPECT Community Audit

Leeds Timely Recognition Tool

# Background

Personalisation of care agenda

What Matters To Me / Leeds tool

ReSPECT process / Resus Council

EPaCCS / EoLC Information Standard review

Impact of the pandemic

LPCN programme - Improving quality / experience

Population Health Management

Importance of data / Business Intelligence

# Planning Ahead / ReSPECT Update

To build on EPaCCS...

one place for advance care planning...

irrespective of diagnosis or prognosis

Available to all community health care professionals

April 2020 community ReSPECT implementation

## **Key developments**

**Project support** – LCH led / CCG funded

**Steering group** LPCN & Resus Council representation

**Template Development Group**

**Training programme** LPCN delivered / community

Building on Senior clinician DNaCPR Signatories

Flexible development approach during covid

10 sessions since Aug 21 / on going

## Where we are now

EoL Information Standard review - Planning Ahead

already reflects key recommendations

Sharing the learning

Local ICBs now implementing ReSPECT

ICS ACP Steering Group

Resus Council Sept conference

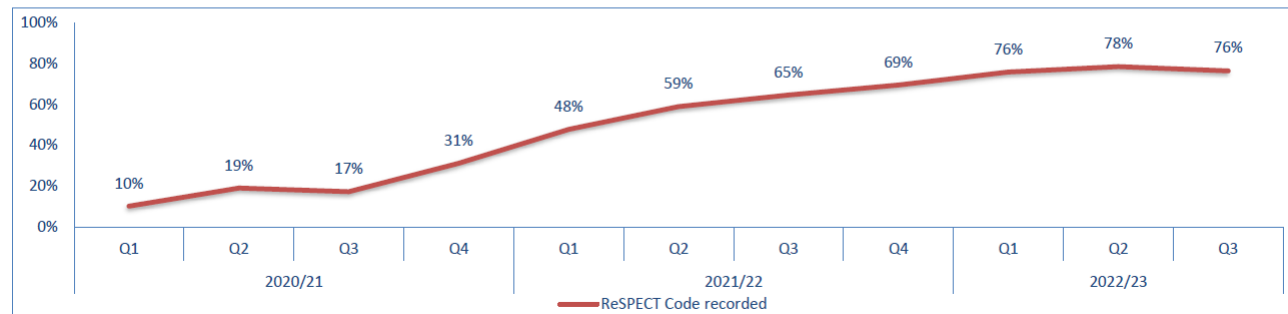
National ReSPECT Sub-committee rep

# ReSPECT community implementation

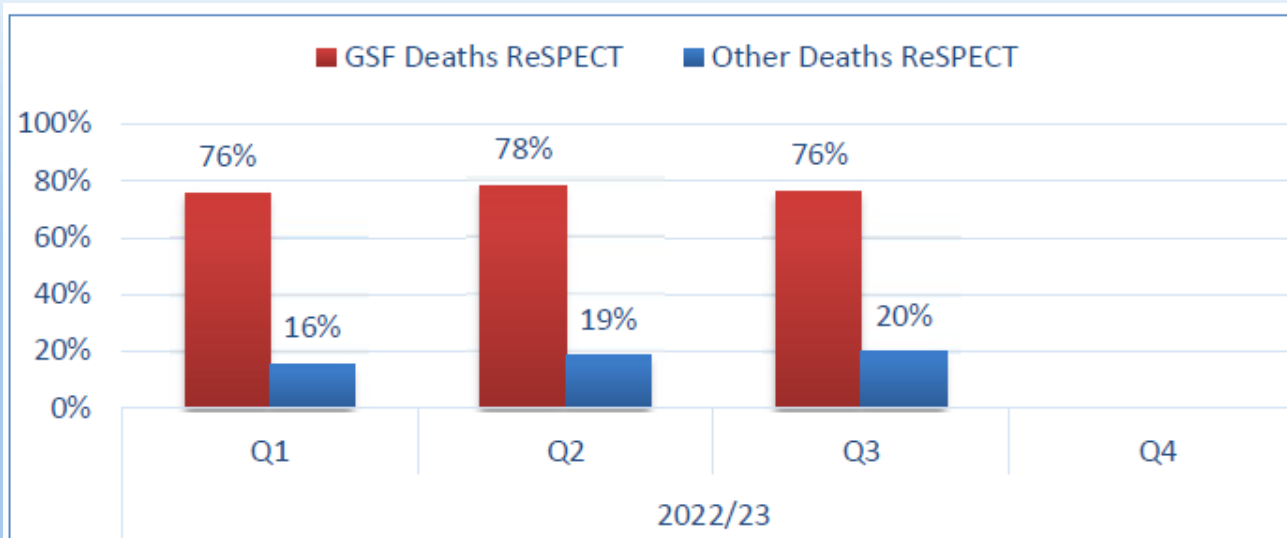


C2.7 Deceased EPaCCS patients who have ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) Code recorded on the system.

Patients with ReSPECT Code	Q1		Q2		Q3		Q4	
	ReSPECT Code recorded	533	76%	520	78%	611	76%	
ReSPECT Code not recorded	170	24%	143	22%	189	24%		
<b>Total</b>	<b>703</b>		<b>663</b>		<b>800</b>			



## Frailty scheme driver / Mortality Review



## Gaps

Quality and patient experience of ReSPECT process

Professional feedback (anecdotally positive)

Sharing ReSPECT plans / digital challenge

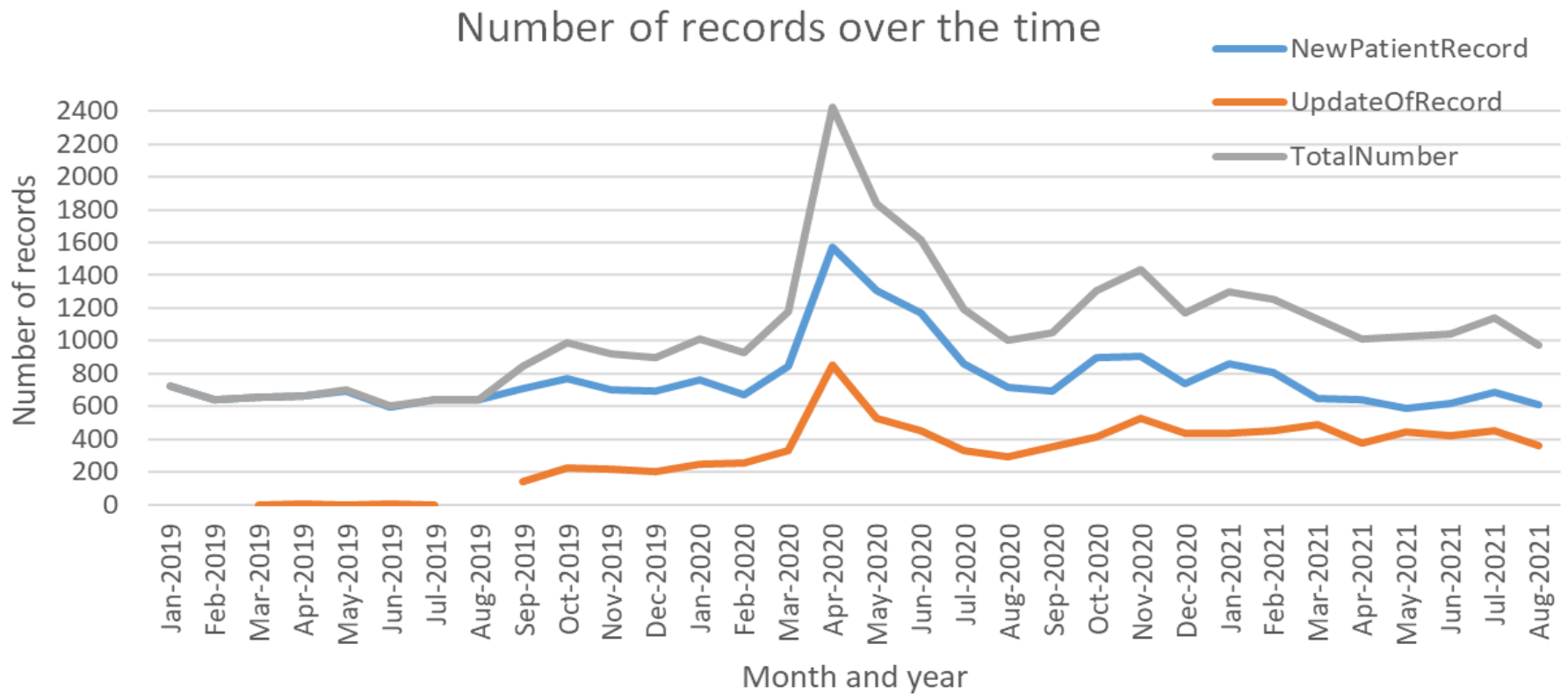
Community audit project in progress



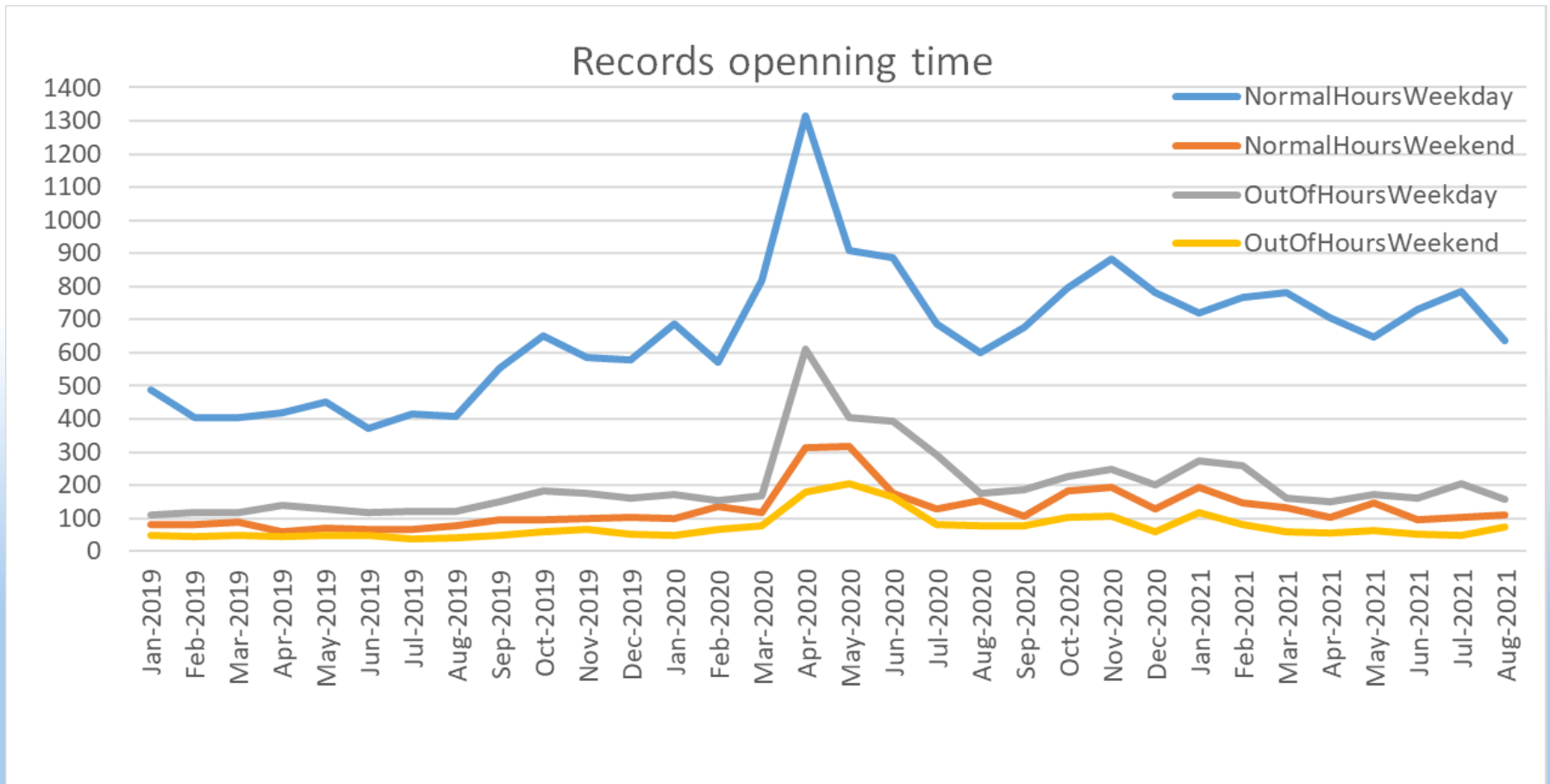
# LTHT ReSPECT Audit

- Data received from 33,896 ReSPECT plans, with 23,729 unique records
- Records from January 2019 – September 2021
- Analysis focused on:
  - Trends in the creation of ReSPECT plans
  - Timing of ReSPECT plan creation
  - Completeness of ReSPECT plans

# Trends in the creation of LTHT ReSPECT plans



# Timing of LTHT ReSPECT plan creation

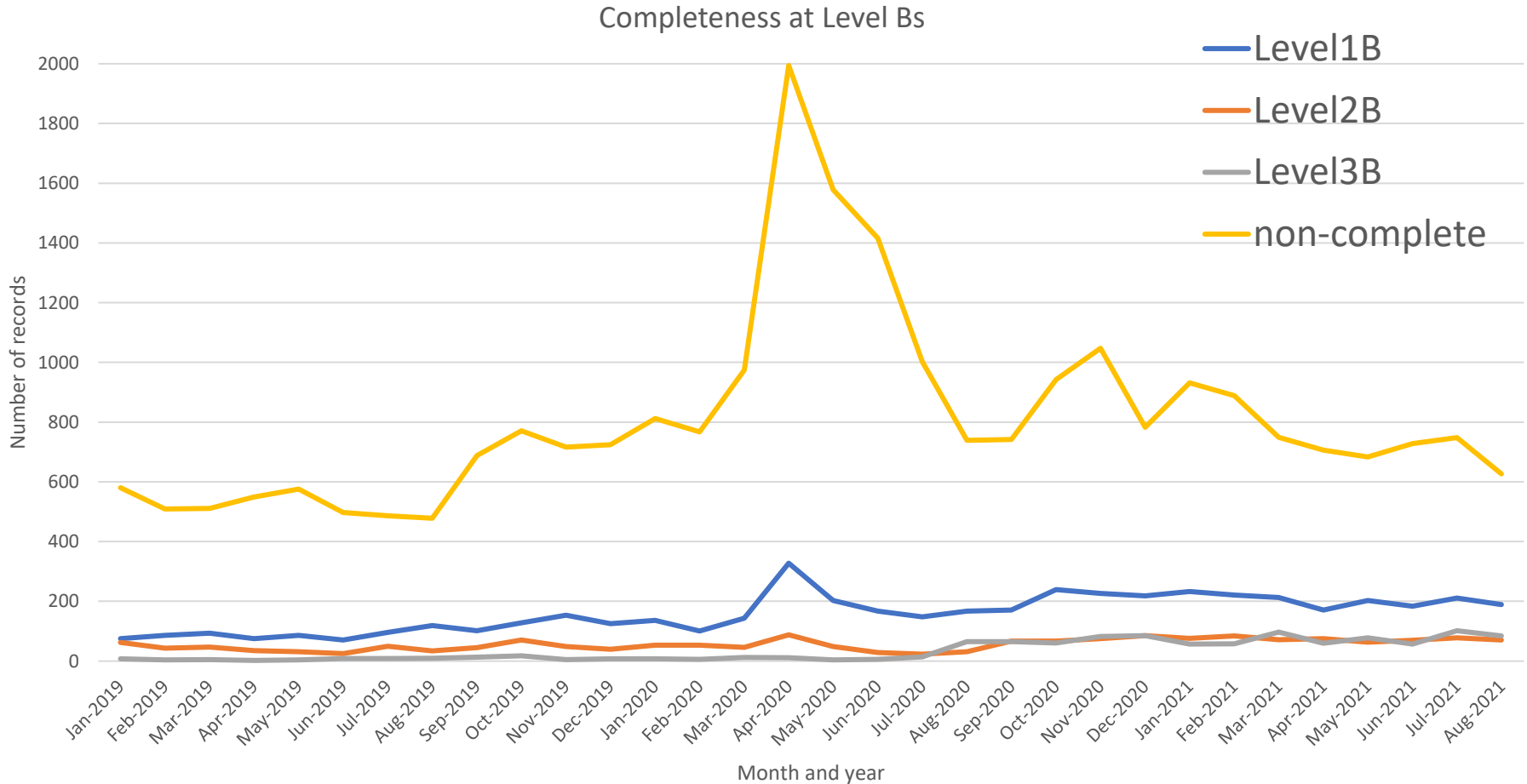


# Completeness of ReSPECT plans

Category of completeness	Content
<b>Level 1: Minimally useful content</b>	<ul style="list-style-type: none"><li>• Patient involvement (mandatory)</li><li>• CPR recommendation (mandatory)</li><li>• Treatment escalation - at least one of four free-text boxes has text in</li><li>• Preferred place of death</li></ul>
<b>Level 2: Intermediate Quality</b>	Level 1 items, alongside: <ul style="list-style-type: none"><li>• Diagnosis</li><li>• Prognosis</li><li>• Insight patient</li><li>• insight carer</li></ul>
<b>Level 3: Comprehensive</b>	Level 1 and 2 items, alongside: <ul style="list-style-type: none"><li>• Preferred place of care</li><li>• ADRT</li><li>• Advance Statement</li><li>• Lasting power of attorney for health and welfare</li></ul>
<b>Non-complete</b>	Not meeting Level 1

\*For all above any option could be selected including unknown/undecided etc

# Completeness of LTHT ReSPECT plans



# ReSPECT community audit

- LPCN-funded project
- Use of ReSPECT across settings has steadily increased during the pandemic
- Audits have been undertaken within LTHT and St Gemma's Hospice
- Academic Unit of Palliative Care undertaking audit of community ReSPECT

# ReSPECT community audit

Aim: Identify what is working well, recommend improvements to promote and inform future training and development requirements

- Part 1: Completion of ReSPECT Forms by community clinicians within LCH, hospices and primary care
- Part 2: Patient experience of the ReSPECT process irrespective of who completed the form and in what care setting in Leeds
- Part 3: Professional confidence and competence in the ReSPECT process across care settings

# Analysis of Planning Ahead data

- All deaths (n=7,363) in Leeds from September 2021 to September 2022
- Determine who had EPaCCS inclusion, ReSPECT plan, both or neither at death
- Influence of sociodemographic and clinical characteristics on receiving either EPaCCS or ReSPECT



# Leeds Timely Recognition Tool

The Early Tool was initially devised by NW and promoted by the National P&EOL Team

Received funding from NE & Yorkshire SCN & Leeds CCG Frailty Scheme.

Our initial aim was to validate this search tool for primary care systems, to support our EOL outcome to recognise people approaching EOL & to allow timely advance care planning conversations.

Project Team: LPCN, ICB Leeds, Primary Care clinicians & Leeds University.

IG sign off.

Identified a PCN with low recognition of pts approaching EOL

Validation tool formed and used by clinicians.

EMIS searches run and patients validated

S1 – new tool needed as EARLY

## Next Steps

1. Completion of System 1 searches
2. Transfer of data to Matthew Allsop to assess.
3. Follow up with practices on outcome of searches and feasibility of having the conversations.
4. 12m after initial search to compare list generated with the patients who have died in that time period.

# Questions