

Leeds Palliative Care Network Group Meeting

Actions of the meeting held on Wed 29th March 2023 via Zoom

Attendees	Init	Role	Org.		
Adam Hurlow	АН	Consultant in Palliative Medicine and Chair	LTHT		
Diane Boyne	DianeB	Leeds Palliative Care Network Manager	LPCN		
Heather McClelland	НМс	LPCN Clinical Executive Team Member	SGH		
Emily Curran	EC	LPCN Clinical Executive Team Member	SRWFH		
Jenny Baines	JB	Senior Pathway Integration Manager (End of Life and Frailty)	Leeds Health and Care Partnership		
Jane Robinson	JR	Manager	Leeds Bereavement Forum		
Leigh Taylor	LT	LPCN Clinical Practice Educator	LPCN		
Laura Speight	LS	Head of IPU	SGH		
Natalie Sanderson	NS	Head of Clinical Services	SRWFH		
Jo Joy-Jones	JJJ	Planning Ahead Co-ordinator	LS25/LS26 PCN		
Sarah McDermott	SMc	Clinical Service Manager (Palliative Care and Community Cancer Support Services)	LCH		
Mike Stockton	MS	Chief Medical Officer and Consultant in Palliative Medicine	SGH		
Lesley Charman	LC	LPCN Clinical Executive Team Member	LTHT		
Chris Bonsell	СВ	LPCN Lead for Medicines Management	LPCN		
Amanda Storer	AS	Leeds Palliative Care Network Administrator (Notes)	LPCN		
Apologies					
Trish Stockton	TS	LPCN Education Lead	SGH		
Jo Neiland	JN	Head of Community Services	SGH		
Sian Cartwright	SC	Head of Health and Development	Carers Leeds		
Elizabeth Rees	ER	Lead Nurse End of Life Care	LTHT		
Gill Pottinger	GP	LPCN EoLC Lead for Primary Care	Primary Care /CCG		
David Whitley - McDermott	DWM	Staff Wellbeing Project	LTHT		
Michelle Atkinson	MA	Chief Officer	Leeds Care Association		
Clare Russell		Director of Information & Culture	SGH		
Mandy Gash		Palliative Care Clinical Quality Lead	LCH		
Joan Nelson		Palliative Care Clinical Quality Lead	LCH		
Andrea Dobson		Head of Continuing Care	LCC		

No.	Action	Lead(s) for action
1 Walc	ome and Anglogies	

Adam welcomed everyone to the meeting. Apologies were given as shown above.

2. Approval of Previous Action Log and Matters arising

The Action Log of the Meeting held 18th January was agreed as a correct record.

Matters Arising – see below

The Summary Report from the SPOC Scoping Project will be circulated with the notes of the meeting This was completed. The project is on the Agenda of the EOL Population Board Meeting to be held 30th March.

3. Chair's Update

Presentation to the EOL Population Board. Adam is presenting the first of a series of 'deep dives' which have been requested by the board which gives a more in depth look at what the service is doing. This gives a richer overview than the usual reporting.

Timely Recognition Tool pilot – the pilot has been implemented and run in Emis practices and is almost completed. How the searches function on SystmOne needs further refining which is underway. Once the pilot has been evaluated there may be a citywide roll out of the tool.

Bereaved Carers' Survey – The survey is currently live.

LPCN Evidence into Practice Group – This group is up and running and has just reviewed the citywide bleeding and seizure guidelines.

4. Network Manager's Update

There were no updates not covered by the meeting Agenda

5. Planning ahead Data update

Adam shared with the Group the data section of the Presentation for the End of Life Population Board (slides attached) this was drawn from the Planning Ahead Report and some national data for comparison. It was noted that this was useful whilst recognising it could never capture the whole picture as there are discrepancies across the region in the processes and data captured. Some national data is only drawn from GP systems, not the hospital or hospices.

The Planning Ahead Report data will now be available for everyone who dies in Leeds, not just those on EPaCCs. This can be produced by PCN area which may help to target interventions for a particular community. The Group acknowledged the close links between the EoL and Frailty populations. Recent analysis by the ICB showed that 40% of people who died in Leeds in the timeframe studied were in the Frailty population cohort.

6. Celebration event

Diane updated the group that the event had been planned for the afternoon of 15th June.

The event is a face to face meeting at the Mercure Parkway Hotel from 2:00-4:30pm

This will be the first time that the wider system has met since the pandemic and is an opportunity for the EoL Population Board to meet some of the front line clinicians as the Board meeting has been arranged to run directly before the event in the same venue.

Everyone in the group should have received an invitation.

We are currently putting together a programme of speakers to reflect the work of the LPCN and are looking to colleagues to present on their project work.

7. EOL Population Board

Jenny updated the group that the ICB have been informed that they are required to make 30% in cuts to their running programme. 20% by 24/25 an 10% the year after. This will represent £12 million over 2 years. This does not affect clinical services as it is not providers.

The process has been very transparent and a new operating model for ICB will be published in June. Discussions are happening at West Yorkshire and Leeds level and there are fortnightly briefings. 68% of costs in West Yorkshire are staffing. Estates is also being looked at with Leeds considering a 3 hub model, Merrion House, WIRA and then potentially the White Rose Centre. Jenny will keep the group updated

The next EOL Board is tomorrow (30th March). Adam will present the LPCN deep dive and a request for comments on the SPOC has also been circulated and will also be on the agenda. It was noted that the changes in LCH with regards to the community urgent response and move to a hub model, as well as challenging financial situation happened towards the end of the time the SPOC scoping was happening; hence an additional option was then added to the paper.

8. West Yorkshire PEOLC Group

There is a celebration event planned for this afternoon (29th) which Adam is attending.

The patient engagement commissioned through Healthwatch for WY is still continuing. This should give a local and ICS level picture of what people feel is working well and what is not working.

There is still an aspiration to undertake a HNA at ICS level.

The WY Urgent Care Group have circulated a spreadsheet to collect information about problems in accessing drugs in the community out of hours.

The WY ACP group have commissioned some of the hospices to produce an acp toolkit which will be launched soon at an event in Wakefield. Leeds Public Health have also produced some resources. The LPCN Exec Team will be discussing how best to share the resources with wider partners.

9. Programme Update

All but 2 of the project are 'on track'

Respiratory/Breathlessness Pathway – The Group are planning to hold a workshop to map the pathway to capture changes post pandemic etc. on 27th April.

Transfer of Care – both hospices continue to hold a joint waiting list for EoL patients as a system pressure response, this has been extended to the end of May. The group are hoping to collect some data to assess the impact of the process.

Dying Well in the Community in Leeds – James Woodhead has been appointed as a Project Lead. There is a robust plan for Seacroft and he is working with Morley to do the same.

Communication skills training This remains on hold.

Echo –The GP and PCN programme is starting in June and has good uptake. The AHP programme is planned for September and work is underway with the Stakeholders to agree the programme content.

Patient Information Leaflet - Diane is meeting with Emma Marshall to begin to look at updating the Patient Information Leaflet.

Dying Matters – Adam and Diane have met with the new team. Dying Matters have met in March and are planning events for Dying Matters week.

EOLC Metrics – we are closer to getting a whole city picture of deaths.

10. Finance Report

The Q3 Report was shared.

The LPCN has approved a bid from LTHT to support addressing the backlog of end of life care training for HCA's. This contains an aim to have some citywide learning and collaboration.

A bid from the Homeless Team to support training third sector staff in End of Life Care was returned for some further information but is expected to be approved when updated.

Diane noted that there is less slippage and less underspend than in previous years. There may also be an impact if salaries increase significantly following current pay negotiations.

11. Risk Register/Systems Issue Log

Risk 1 Capacity – The score for this risk has recently been raised as we are aware of capacity issues with our EDI work and in the Data Quality Team at the ICB which restrict their ability to support the LPCN in some projects.

Systems Issue 2 Interoperability – A possible initiative called PEGA has been explored in Leeds. Discussions are underway on cost effectiveness.

11. Updates from the Members

SRWFH – Natalie updated the Group Julie Marshall Pallister has retired from her current role and is returning as a CNS – her post has been recruited into.

LTHT – LTHT has a new Chief Executive Professor Phil Wood. April/May are likely to be challenging due to numerous bank holidays and the junior doctor's strike.

Leeds Bereavement Forum – Grants have been awarded to 11 projects to hold events during Dying Matters Week.

Jane reported that several bereavement charities are now really struggling with capacity and have very large waiting lists. Carers' Leeds have paused their referrals until the summer. CRUSE have reported a six month waiting list. If partners contact Jane she may be able to offer advice as to which services may have shorter waiting lists.

Jenny will speak with Jane and Gill Pottinger outside the meeting to discuss a message about bereavement services capacity going out in the Primary Care bulletin. – **Action 222**

12. AC	OB CONTRACTOR OF THE CONTRACTO			
It was agreed that it would be useful to look at reinstating the part of the LPCN Group meeting where partners gave presentations on their services. This reflect the many changes that have happened over the pandemic and following service redesign. – Action 223				
13. Actions Agreed				
222	Jenny will speak with Jane and Gill Pottinger outside the meeting to discuss a message	JB/JR		
	about bereavement services capacity going out in the Primary Care bulletin			
223	Diane and Adam will consider reinstating Partner presentations as part of the LPCN Group	DB/AH		
	Agenda			

14. Next Meeting

The next meeting is planned for Wednesday 17th May 10:00-11:30 via Zoom