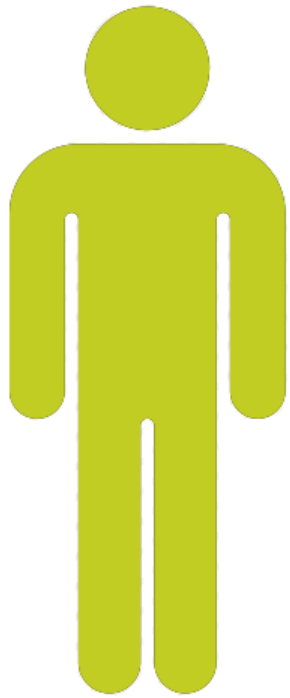




Widening access to palliative care for homeless in Leeds

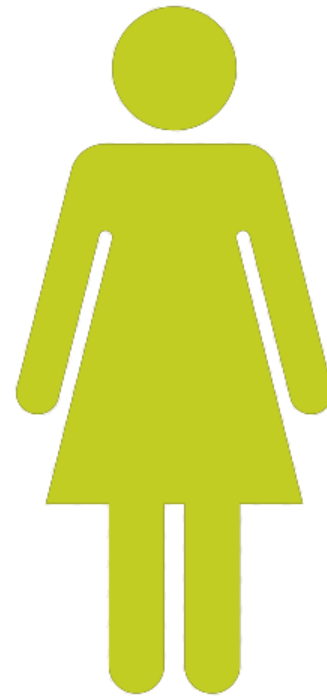
Homeless people die young.

Average age of death in the UK for homeless people:



47

years old



43

years old

Background to the project

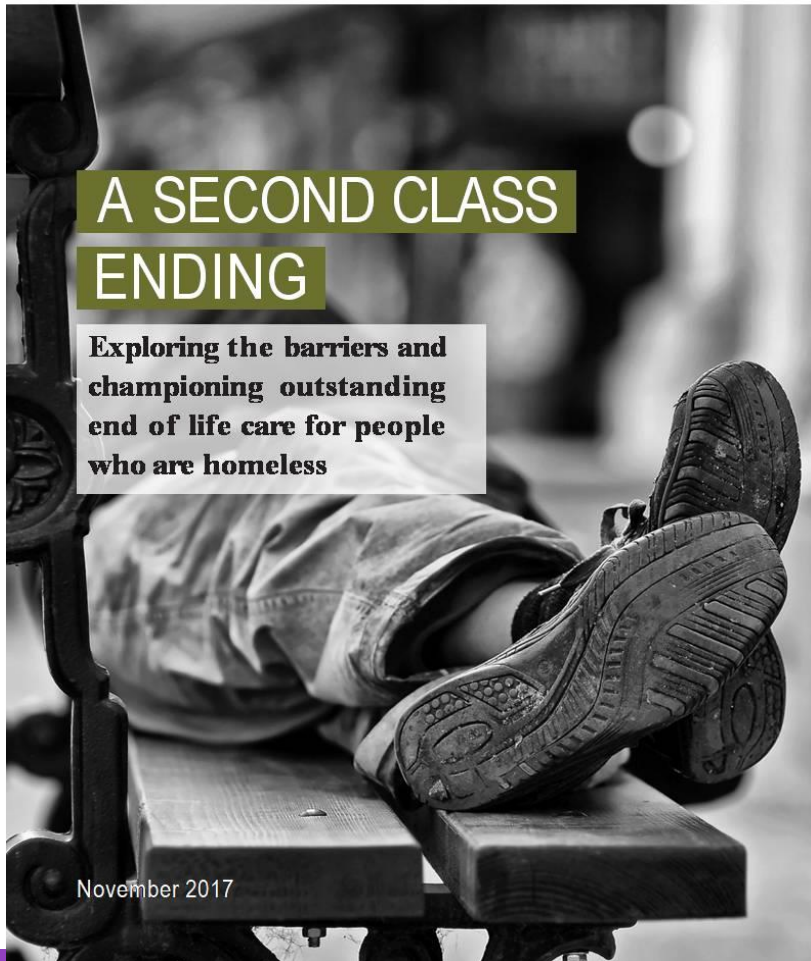


Our experiences of trying to meet the needs of some local homeless people with advanced disease.

Drivers

- CQC Report 2017
- Hospice strategic objective
- 2019, Leeds published its first Homeless Charter
- 2018, Leeds City Council Homeless and Rough Sleeping Recognise the need for improving joint working and referral protocols between partners to bring better outcomes for clients.
- Request that the Leeds Health and Wellbeing Board makes the health of the homeless a strategic priority.

National guidance



A Second Class Ending –
Exploring the barriers and
championing outstanding
end of life care for people
who are homeless.

(CQC, 2017)



Original Article

End-of-life care for homeless people: A qualitative analysis exploring the challenges to access and provision of palliative care

Palliative Medicine
2018, Vol. 32(1) 36–45
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Research undertaken by collaboration of Marie Curie, Pathway, St Mungo's and Co-ordinate My Care (2017)

Main findings from the research.

**Complexities
in planning**

**Difficulty discussing
preferences**

**Challenges for hostels
as a place of care**

**Lack of
options**

**Difficulty identifying
end
of life care needs**

**What helps/
what works well**

Local progress

2018/19

2 small stakeholder events identifying local situation and exploring areas of need

- SGH, Wheatfields, York Street GP Practice, St George's Crypt, LCH Inclusion Team, AUPC
- Contact with Leeds City Council, Simon on the Streets
- Recognised similar challenges to those identified in literature

We have

- Undertaken a systematic review
- Recognised that there is a lack of accurate local data
- Identified local agencies involved in supporting homeless
- Developed and piloted teaching materials that could be rolled out further
- Trialled a GSM at York Street
- Committed to continue to work together collaboratively to improve EOLC outcomes for homeless in city

Systematic review recommendations

- Need for a pragmatic, flexible approach
- Need for staff training
- Importance of relationships and continuity of care.
- Need for improved communication between teams
- Need for designated HCP link worker to liaise btwn health and social care
- Lack of specific palliative care services for homeless/challenges delivering care in non-medical locations
- Need for multi professional working btwn agencies incl hostels and harm reduction agencies.

20/21 Next steps

- Form formal project group with measurable aims and objectives
- Bid to Masonic Charitable Foundation via Hospice UK
 - Part time co-ordinator post(s)
 - 15 month project

Project aims

- Continue to build links/grow relationships
- Collate accurate data re number of homeless people with palliative care needs in Leeds
- Embed regular GSF meeting within York Street Clinic
- Engage with street outreach teams
- Facilitate reciprocal education and training btwn health/hospice/homeless agencies

- Build on existing links with liver team identifying pts with ALD who may benefit from ACP
- Develop easy read patient held record
- Explore potential for use of Regents Terrace as option for EOLC
- Explore means of flagging homeless patients within System One/EPaCCS

LPCN

- Support for the bid
- Offer expertise where necessary
- Project progress reports at regular intervals