

LEEDS PALLIATIVE CARE NETWORK

PROGRAMME OVERVIEW 20 /21



Objective:	To capture progress of the LCPN projects during 20 -21 To enable monitoring of achievement and provide targeted support where required.	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">on track</div> <div style="border: 1px solid black; padding: 2px;">on hold</div> </div> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">delayed</div> <div style="border: 1px solid black; padding: 2px;">off track</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">complete</div>	Lead Name:	A Hurlow M Stockton
			Start Date:	April 2020
			End Date:	March 2021

April 2020 Update

Given the Covid -19 outbreak and impact on frontline capacity it is recognised that most projects will slip over the coming months.
The programme will be fully reviewed once we return to normal business.

Progress

Project title and Purpose	Key Milestones	Project Lead	Update	Start date	End date	Funding?	add from dropdown
Education and training							
1. Palliative and EoLC Learning Outcomes Ensure a consistent approach and standard is used for delivery of EOLC education that is evidence based.	-Map city wide education to the outcomes. -Support any planned new implementation; -Evaluate the impact of using the outcomes. - Leeds input to Regional work; benchmarking CNS roles to outcomes	Trish Stockton	Prof Taylor is undertaking an evaluation of how the outcomes are currently being used in Leeds and what challenges there are to implementation. Then we will review how we are going to use them citywide. The EOLC outcomes are now in the Professional section of the new LPCN website as a key place to access, they have been updated to include the Nurse associate role. CNS mapping completed and they are being used regionally through ECHO programme;	Jul-17	Ongoing	N	on track
2a Communication Skills Training To deliver consistent and high quality training in communication skills for EOLC across Leeds - Training Delivery	- Deliver Training -Support new facilitators to develop skills. -Update for existing facilitators.	Trish Stockton	1 new facilitator has been trained 2019. TS continues to support facilitators - new and existing training programme continues to be delivered regularly.	Jul-17	Mar-21	N	on track
2b Communication Skills Training To deliver consistent and high quality training in communication skills for EOLC across Leeds - Strategy and Programme Content	-Update current training material. -Refresh Communication Skills Strategy		LPCN agreed to use resources to support a post to deliver key strategic development. Draft role profile written and to be taken forward		Mar-21		off track
3. Website Education Content To ensure the education materials and information available on the LPC website is up to date, accurate and complete.	-Agree content list for education section. -Agree lead responsible people for each sub section -Agree materials to be uploaded - Provide content materials to LPCN office within agreed timescale -Review and update content on regular basis	Trish Stockton	Education content on the LPCN website Ongoing review of content by Education Group and areas updated or added to accordingly	Feb-19	01/03/2021	N	on track
4. Train the Trainers - Advance Care Planning for People with Dementia To deliver agreed Advance Care Plan training programme to professionals across the region as commissioned by West Yorkshire and Harrogate ICS	- Finalise the training programme content with ICS - Agree training dates and advertise - Select 10 facilitators for first cohort - Deliver training twice / year	Trish Stockton	Delivered 2 training sessions for facilitators and supporting in practice Delivered sessions to front line staff and there are more Advanced Care Planning training sessions taking place up to May. Programme will be evaluated March 2020 TS to hold a citywide meeting to scope current and future ACP training	Apr-19	Mar-21	NHSE	on track
5. EOLC / Symptom Management /Syringe Driver Use Training for LYPFT / The Mount To provide clinicians within The Mount the skills necessary to deliver EOLC, use and administer medications via a syringe driver	- Agree training needs and content - Develop a training plan / sessions - Deliver the training - Evaluate Training - Monitor clinician competence and confidence using the equipment and delivering care	Trish Stockton Alex Irvine	Training Team (includes St. Gemma's, Wheatfields and LCH) delivered 6 sessions which included prescribing and medication training from Moira Well evaluated and training group to meet LYPFT to discuss future training needs Syringe Driver Training on hold pending development of LYPFT guidelines	Apr-19	Mar-21	N	on track
6. Verification of Expected Adult Death To provide training to registered nurses in both LCH and Care Homes enabling them to carry out this procedure during the Covid-19 outbreak	- Develop new training plan and materials in line with national guidance. - Develop promotional materials and advertise sessions - Place education materials on the LPCN website - Deliver training as planned - Evaluate Training	Trish Stockton	Training plan and materials developed. Training Sessions advertised. Education Materials added to VoEAD on website. Training to commence 4th May 2020 via Zoom.	April 20	Sep-20		on track
7. ECHO System To develop, support and promote a tele-education system citywide. (incl GP's, Care homes, EOL Teams and NHS Trusts).	- Engage with national roll out for use of ECHO -Secure Funding for staff time to support project -Complete training for initial ECHO team -Citywide Engagement event -Agree next steps and roll out -Start first ECHO course -Evaluate ECHO use -Agree next stage roll out - Recruit Admin Support	Jane Chatterjee	1 GP programme completed. Commenced 2nd GP programme Feb 2020. ECHO Co-ordinator will increase to 2 days per week to meet demand. CNS regional ECHO programme in progress. Care homes programme - gone out for EOI in collaboration with EOLC facilitators. Discussions with key people about using the Hub for other areas of training e.g. Frailty and also working other regional hubs. To take forward connection with WYICS.	Sep-17	Mar-21	Funding made recurrent for ECHO Support Team	on track

Patient Experience & Quality Improvement							
<p>8. EOLC Metrics Agree and implement a suite of metrics across Leeds to measure the effectiveness and quality of palliative and EoLC</p>	<ul style="list-style-type: none"> - Full Metrics Report Produced - Understand links to other metrics / information systems (EG RAIDR) -EPaCCS report flowing routinely every quarter - Further Metrics agreed for next Leeds Strategy - Continue to pursue interoperability and influence LCR 	Adam Hurlow	<p>Q1 2019/20 citywide report completed 6th Feb 2020 Hospital attendance and admissions in last 90 days data now available. Draft Q2 2019/20 citywide report shared for review. Delay in recording APOD affecting reported information. To consider producing reports a month later or to refresh reports. To review and agree future potential Metrics for Leeds Strategy at next Informatics meeting. Gill P / CCG pursuing Q3 reports for GP's as some further delay against agreed report dates.</p>	ongoing	Mar-21	N	delayed
<p>9. Improving EPaCCs, its use and reporting Increase the use of EPaCCs across Leeds Providers to improve the coordination and management of Palliative & EOL Care. To improve the reporting of EPaCCs data to further improve use, monitor EOL outcomes and inform system planning. To include the use of and access to the ReSPECT document and process. (Recommended Summary Plan for Emergency Care and Treatment)</p>	<ul style="list-style-type: none"> -Develop PPM+ version of EPaCCs template and reports. -Pilot PPM+ version -LTHT launch -Explore options for shared palliative care view within Leeds Care Record -PC information leaflet updated and implemented -EPaCCs User Feedback -Patient consultation -Evaluate EPaCCs to inform further quality improvements required -Fully Review EPaCCs tool 	Sarah McDermott	<p>LTHT EPaCCs developed within ReSPECT. Reports development in progress. ReSPECT/ DNACPR link from PPM+ ReSPECT Form improvements planned following feedback. Community Planning Ahead Launch postponed due to Covid 19 outbreak. Many training sessions delivered in early March and launch date and supporting documents had been agreed. However Primary Care now added the ReSPECT form to current EPaCCs template in both System 1 and EMIS to support need for increased ACP and improve communication across system. LCH colleagues implemented same from end of April 2020. Audit of ReSPECT forms completed and fed back to LTHT - further audit to be planned in 6/12. AUPC Audit of EPaCCs data and EPaCCs user survey to inform future targeted Quality Improvement Work. Initial findings and slides shared with LPCN Exc on 11th March. Further analysis to finalise report required. Continuing to pursue opportunity to fund LCR required developments.</p>	Sep-17	Mar-21	N	on track
							on track
<p>10. Improving EOL care data within the Leeds data set To expand the EOL data available for future analysis and planning by adding hospice data.</p>	<ol style="list-style-type: none"> 1. Meet with the Leeds health and care informatics team 2. Agree what hospice data should be included within Leeds data set from both St. Gemma's and Wheatfields 3. Agree how data will be collected / flow 4. Check all IG requirements are covered including any additional data sharing agreements 5. Consider other useful data that might be included - e.g. CHC fast Track data. 	Mike Stockton	<p>Priorities will be: Hospital : Hospice - Optimise us of Hospice EOLC Beds - Monitoring implemented changes and TOC data. - Scoping Trusted Assessor Models - Silver Command responses - ED TOC project Group met 4th February</p>	Jul-19	Mar-21	N	on track
<p>11. Provision of 50 additional Syringe Drivers to core care providers To improve patient care and experience through increasing availability and access to equipment required for effective symptom management</p>	<ul style="list-style-type: none"> - Meet with LTHT medical Physics to explain bid and agree purchasing process - Order Syringe Drivers and lock boxes - Transfer fund to LTHT - Finalise numbers required with each provider - Medical Physic to check and label devices - Distribute to Providers 	Diane Boyne Liz Rees	<p>Syringe Drivers delivered to Leeds Medical Physics Medical Physics liaising with manufacturer regarding software so they can be programmed for local distribution and use. There has now been a medical alert and a Field Safety Notice issued regarding the software so equipment cannot be released for clinical use until issue resolved. Awaiting MHRA approval of updated software. New model may require additional training; the Directions for Use Manual has been updated by the manufacturer. Ongoing concerns across all providers about concerns with V3 of the T34 - e.g. life of battery. Discussions via email in light of Covid 19 outbreak. Agreed to use syringe drivers in Inpatient environments due to battery life risk in community. 35 = LTHT; 2=LYPFT; 7= St. Gemma's; 6= Wheatfields Equipment being delivered and put into use. Monitor impact. NB On system issues log- update and close once all delivered.</p>	Apr-19	May-20	Y CCG Pipeline Bid	delayed
<p>12. Bereaved Carer's Survey: To gain feedback on experience of EOLC delivered from carers of recently deceased patients.</p>	<ul style="list-style-type: none"> -Work with Healthwatch on design, promotion and analysis -Review and refine survey for scientific rigour -Finalise survey to be delivered annually with CCG funding -Agree distribution process and dates for survey -Analyse returned surveys -Produce annual report of findings 	Liz Rees Helen Syme	<p>Healthwatch will continue to support 19/20 survey. Agreed that next survey will run in Q4 Jan- March 2020. The SOP, surveys and posters have been agreed and finalised. Healthwatch will print and deliver the surveys and posters to the agreed location for each organisation. Healthwatch quote for the work received and approved 19/20 Survey commenced. The survey is continuing until the end of March and will close end of April. A good response so far. Healthwatch are sending surveys to the relevant organisations with positive feedback and any surveys with particularly negative feedback are being sent through as well. Survey finishes end of March. Returns until end of April 20. NB No face to face hand out of death certificates at end of March so number will be less for this month. Healthwatch still able to analyse returns and format report as planned.</p>		Mar-21	Y Recurrent funding Request annually	on track

Workforce & Service Development							
<p>13. Transfer of Care - Hospital to Hospice To improve the transfer of patients between hospital and hospices to improve continuity of care and patient experience.</p>	<ul style="list-style-type: none"> - Monitor impact of daily patient transfer meeting process. - Agree new areas for improvement and prioritise - Refresh Terms of Reference - Monitor ED transfer pathway impact 	Clare Russell	<p>Meeting Dates Set for 2019-20. Priorities will be: Hospital : Hospice</p> <ul style="list-style-type: none"> - Optimise use of Hospice EOLC Beds - Monitoring implemented changes and TOC data. - Scoping Trusted Assessor Models - Silver Command responses - ED TOC project <p>Group met 4th February 2020. To review and update the TOC process guidance following. Catherine Malia to meet with ED consultants regarding ED TOC process. Hannah leading the Trusted assessor pilot.</p>	Oct-19	Mar-21	N	on track
<p>14. TOC - Community Flows Improvement To improve the transfer of patients between all providers to improve continuity of care and patient experience</p>	<ul style="list-style-type: none"> - Establish new working group - Agree Scope for the project - Agree TOR including membership - Understand current service provision / models of care - Agree best way to improve model of care - Agree actions required and way forward - Implement changes agreed. 	Diane Boyne Ruth Gordon	<p>The Community Flow Improvement Group reviewed and agreed TOR and project lead has started.</p> <p>The Community Flow Improvement Group is being held virtually at present with much of its work on hold in light of the COVID-19 work. This has affected the launch date for the WSA work (originally set as 29th April). It is postponed, with a launch likely to take place in the Autumn at the earliest. Work in preparing for the launch continues with the development of a stakeholder map. This will be shared with the executive group of the network and then with the CFGI group. The draft PID has been shared for comment. Phase 2 will be to consider a longer piece of work which will review, then identify opportunities for improvement.</p>	Oct-19	Mar-21		on track
<p>15. Improving EOLC for people with Heart Failure To improve the quality of care for patients with advanced heart failure in Leeds</p>	<ul style="list-style-type: none"> - Re-establish project group links with LHTT Cardiology and Community Heart Failure Nurses - Agree priorities for 19/20 workplan - Map Leeds against Hospice UK recommendations and identify gaps - Put in place activity monitoring process - Check staff confidence via self efficacy scale - Deliver update / refresh training as required 	Jason Ward	<p>Report with recommendations written and circulated. Funding to support MDT and further Quality Improvement work agreed by CCG for 2019-20. Meeting to agree high level plan for 19/20 complete. Review against Hospice UK standards ongoing. Guidance on S/C diuretics in community implemented.</p>	Apr-19	Mar-21	Y Recurrent funding	on track
<p>16. Leeds Palliative Care Ambulance To provide support to the operational Group and deliver service improvements identified</p>	<ul style="list-style-type: none"> - Agree the new Terms of Reference - Establish formal reporting into LPCN - Develop Quarterly Activity Report for LPCN - Develop a Stand Operating procedure for the service - Ensure SOP is adopted by YAS formally - Agree service improvement plan for 19/20 (Contracting and Commissioning with CCG) 	Dave Green	<p>Draft TOR for group completed including reporting into LPCN. New Chair agreed for the group - Dave Green, Head of PTS, YAS. LPCN office will administrate meetings. Final SOP approved by YAS Governance and LPCN Executive. SOP added to LHP - staff view only Training to crew delivered. Action Plan updated Mar 20. Quarterly Summary Activity Report to be developed. Still pursuing procurement of replacement ambulance. CCG Funding will be secure until new ambulance in place but may be hire agreement not purchase. YAS and CCG contracts to resolve. Service promotional Poster and information leaflet produced. To support YAS with distribution.</p>	Apr-19	Mar-21	Y CCG funded service	on track
<p>17. Improving EOLC for people living with Dementia Through a collaborative and whole system approach implement evidenced based practice and influence system wide workforce, training and development.</p>	<ul style="list-style-type: none"> -Secure funding for project lead -Establish a citywide project group -Develop project plan for priorities agreed. -Establish links with regional/ national groups -Identify gaps in workforce and propose solutions -Share Evidenced Base Practice 	Jane Chatterjee	<p>Priorities :</p> <ul style="list-style-type: none"> - Securing End of Life Admiral Nurse post(s) for Leeds Bid not funded. Resubmitted via P&EOLC commissioner - To develop a cohesive approach to the assessment of pain and distress Pain Subgroup established- work ongoing. - To develop a cohesive approach to Advanced Care Planning. ACP Subgroup established - System wide workshop to feed into regional work on 22nd July - well attended. Workshop report completed and published. Links made with LCP Clinical Leads. Member of WY&H ICS Working group Jane presented EOLC work at Dementia Strategy Group Event. Meeting 16th January - Updates on workstreams received. Overarching dementia Governance clarified. Jane to leave project lead in March. To identify replacement. ACP guidance added to website. 	Jan-18	Mar-21	Pipeline bid	on track

Medicines Management							
<p>18. Anticipatory Medications To provide consistent advice and access to Network member organisations on the prescribing and use of anticipatory medicines</p>	<ul style="list-style-type: none"> - Audit of S/C medication administered in last days of life - Present Results to Anticipatory Meds Group - Discuss issues identified at National Anticipatory Study Days - Review Anticipatory Syringe Driver Guidance - Identify next Steps 	Moira Cookson	<p>To undertake a further 3 month audit within LCH: Audit form redesigned and approved by PCL's at LCH Karen Neoh briefed PCL's about form completion. Audit to commence Jan 2020 for 3 months to include pre and post death medication quantities Anticipatory Syringe Driver Guidance redrafted as appendix to LCH last days of life guidance. To circulate to LPCN Group once comments received from working group. First Audit work being presented as Poster to Palliative Care Congress - March 2020; was cancelled. Develop link with Ben Bowers (Cambridge) to share learning through audit work and influence national agenda.</p>	Sep-17	Mar-21	N	on track
<p>19. Review and Refresh Existing Guidance Ensure all existing and approved guidance is updated within agreed timescales and redistributed across the system</p>	<ul style="list-style-type: none"> - Ensure all approved guidance have review dates agreed - Establish review groups for guidelines as required <p>Review and update Liver and Renal Guidance</p>	<p>Moira Cookson</p> <p>Rachel Sorley</p>	<p>Ongoing</p> <p>Previous author group met to update documents. Minor amends required. Moira to update community renal guidance in line with above document. Circulated to LPCN group for comments; documents amended in light of comments received. Rachel to agree amends with Liver and Renal teams and share final document.</p>	<p>April 19</p>	<p>Mar-21</p> <p>May -20</p>	N	on track
<p>20 Electronic Prescribing in the Out Patient / Community setting Improve prescribing and recording of medicines prescribed so reducing risk of medication errors</p>	<ul style="list-style-type: none"> - Produce internal LPCN bid for funds to support pharmacist time - Link with TPP to identify if Systm One developments required in order to plan timescale of project -Produce Leeds Hospices Community Formulary - Implement EPS to allow paper less prescribing in community by specialist Palliative Care Teams - Support LCH in developing a formulary for use by their prescribers as they too implement EPS 	Moira Cookson		Mar-20	Mar-21		on track
Corporate							
<p>21 Palliative Care Website: To maintain LPCN website for public and professionals to provide advice and support regarding EOLC.</p>	<ul style="list-style-type: none"> -Oversee input and website content - Quarterly oversight and review group meetings - Manage associated promotional materials - Maintain links with BML who support management and development of website. 	Diane Boyne	<p>Website Group to oversee further developments established. Activity on website significantly increased Added banner to front page to direct to key content Developed Covid-19 pages and guidance for public and professionals. Added VoEAD training section.</p>	Jun-19	Mar-21	Pipeline bid Recurrent Funding to maintain from 20-21	on track
<p>22 Strategy Development To inform and develop the next Strategy for Palliative and EOLC for Leeds</p>	<p>Gather all available intelligence and feedback: Strategy Event Report, Refreshed HNA, Optum Information, Bereaved Carers Survey Report, EPaCCS / Metrics Report AUPC - EPaCCs analysis / survey PHM - Frailty Outcomes etc. Scope Out and agree Key Priority Areas / Themes. Secure Support for Strategy Production Establish Strategy Advisory Group High level Plan Agreed SAG to agree dates</p>	Mike Stockton	<p>Strategy Advisory Group TOR agreed. Draft Strategy Framework Developed and supported Draft Population Outcomes Document amended and supported. Final HNA produced and circulated following SAG feedback. LPCN Celebration and Planning Event 27 Nov Report finalised and published. Peoples Voices consulted on Outcomes. Outcomes amended and finalised. Proposed Strategy Document Format provided by Penny Allison , CCG. Strategy Group 12th February - Lucy J discussed personalisation links. Group approved final Outcome statements with minor amends. Approved Strategy doc format. LPCN Executives agreed to help with writing of sections of strategy. Impact of Covid-19 will extend timescales.Document part drafted. SAG to meet on 13th May virtually.</p>	Feb-19	Mar-21	Core LPCN	on track

External / Wider network							
<p>22 Frailty PHM Ensure palliative & EoLC is represented in plans for development of Population Management Approach to Frailty and EOL</p>	Maintain LPCN links to working groups and ensure mechanism for feeding back	Adam Hurlow Sarah McDermott Gill P	<p>LPCN maintaining involvement. Working groups formed: Training & Culture; Proactive Care; Virtual Ward; Rapid Response; Discharge.</p> <p>Links with 2 LCP's made regarding Advance Care Planning. Virtual Ward due to go live 4.11.19 for Beeston and Middleton NTs. Initial focus will be on hospital avoidance. Frailty agenda remains complex and variable so Adam H will continue to liaise via Frailty Strategy Group. Contact made with Emma Fraser - CCG project lead. New Frailty Service to commence in response to Covid-19 demands.</p>	n/a	ongoing	CCG PHM £6k	on track
<p>24 Single Point of Access (SPA) Ensure Palliative & EoLC is represented in plans for Citywide SPA.</p>	Better understand the citywide work.	Sarah McDermott Diane Boyne	<p>EOLC colleagues to met with LCD separately on Oct 9th 2019 and agreed if SPA remains a priority LPCN will need to plan for this and approach CCG for support as citywide project will not deliver EOL SPA for some time.</p> <p>Effective patient communication, support and care coordination a priority but to consider if SAG best way of delivering.</p> <p>Extended SPC CNS service will provide some insight imnto demand.</p>	n/a	n/a		on track
<p>25. Respiratory /Breathlessness Pathway Ensure Palliative & EoLC is represented in plans for COPD pathway(s).</p>	LPCN contribute to citywide agenda and service redesign.	Sarah McDermott	<p>The group is currently focussing on the following:</p> <ul style="list-style-type: none"> • Advance care planning in relation to pulmonary rehab • Perceived delays in care packages at the point of discharge and for people already at home • Non-pharmacological approaches to care/breathlessness • Wider sharing of LTHT medicines management guidance around de-prescribing • Wider sharing of LTHT training podcasts • Further citywide study day <p>Links with the Community Geriatricians have been made Presentation of audit to LPCN group on 10th July.</p> <p>26th Feb - Discussion about potential future service redesign with Hospices, LTHT, LCH and CCG colleagues. Agreement there should be full service redesign for all breathless people from diagnosis to death. In meantime EOLC group to focus on redesign of an integrated service for people with advanced breathlessness in Leeds. Chris Kane to be Clinical Lead.</p>	n/a	n/a	Y WF Recurrent Therapy Post	on track
<p>26 Specialist Palliative Care Advice to YAS To provide single contact number for Leeds to enable access to SPC advice and support to YAS Ambulance Crews who are called out to people diagnosed as at End of Life. This is a Regional Wide Project</p>	<ul style="list-style-type: none"> -Identify all key people for this project in Leeds -Propose a simple solution(s) to enable a single contact point to be provided for SPC; in hours and out of hours -System choose and agree preferred option -Regional Lead notified of Leeds numbers -Partners agree and adopt the recording process for administering calls - Continued liaison and feed back to Regional Lead and YAS 	Helen Livingston (Regional Lead) Hannah Zacharias Leeds	<p>Continued use of process reported by YAS. Hannah will share back with Helen Livingston - Regional Lead. There has been an increase in requests for advice by ambulance crews to the hospice community team during in-hours about patients already known to them. Numbers of new cases remains low. Telephone numbers recirculated to paramedics via YAS prior to Christmas. Hannah to review, refresh and circulate guidance. Proposal for St. Gemmas to remain central in-hours contact point.</p>	Oct-18	Jan-18 Go live Mar-21 Monitor and report ongoing impact and use		on track
<p>27. Care Homes To provide Palliative and EOLC support to the citywide Care Homes agenda</p>	<ul style="list-style-type: none"> - Contribute to the citywide Care Homes Groups - Ensure Care homes are represented within the LPCN 	Helen Smith Diane Boyne	<p>NHS Leeds CCG Lead is Helen Smith. DB member of citywide Care Homes Oversight Group. LPCN website to be linked from LCC Quality Team Care Homes website. ECHO trining plans shared with the March Oversight Group LPCN are linked to the Leeds COVID-19 Care Home Advisory Group so we can share useful information. Mike S on Bronze Command group also.</p>	01/08/19	01/03/21		on track
<p>28 Dying Matters A citywide programme of initiatives and activities to enable people in Leeds to:</p> <ul style="list-style-type: none"> • Feel more comfortable about death and dying • Discuss their end of life wishes with family members and/or health and social care professionals • Plan for their death including writing their will, registering as an organ donor and communicating their funeral wishes. 	<p>This programme will be delivered through 3 workstreams:</p> <ul style="list-style-type: none"> - Stakeholder and community Engagement - Building Capacity - Communications and Marketing <p>The work is coordinated by the Leeds Dying Matters Partnership</p>	Carol Clarke Liz Messenger	<p>Events for Dying Matters week postponed. Running an online Twitter Campaign (Tweets by LCC Better Lives and Leeds Bereavement Forum) focusing on the daily theme for the national dying matters campaign. Also running Facebook advertising to raise awareness of key Dying Matters messages. A poster based on the LTHT poster 'If you were taken seriously ill who would know...') is being finalised and then it can be shared electronically with partners and stakeholders. Concerns have been expressed by Dying Matters partners about the on the impact of Covid-19 related deaths on family and friends and the city is responding to support people. There will be a discussion about this at the next Dying Matters Partnership meeting.</p>	01/10/19	01/03/21		on track
<p>29 Shared Decisoin Making Pilot</p>	This is an NHSE supported pilot within Supporting People Living with Cancer in Leeds.	Gill Pottinger	<p>Gill P is the LPCN and primary care represntative within this pilot. The main focus of the trial is within oncology in LTHT engaging with patients that are living with cancer. Karen Henry is main lead for the Project. 2nd workshop focused on patient engagement. Next steps are looking at specific training available for clinicians on SDM. Also looking at patient groups to get involved. Also consultant letters - now informing GPs it is a palliative approach.</p>	01/08/19	Mar-21		on track

30 Rotational Nursing Posts To pilot recruiting newly qualified nurses to an 18 month rotational post opportunity between the hospices and LTHT (Respiratory Unit)	Project between both Hopsices and LTHT led by SR Wheatfields LTHT will be the lead recruitment and employing body	Sue Waddington	Initial meetings held. Next Meeting to discuss and plan further the project further in March 2020.	0/12/19	TBA		on track
31 Leeds Mortality Reviews To contribute to the citywide Mortality Review work led by Ian Cameron, Director of Public Health, LCC.	LPCN contribute to citywide agenda and service redesign.	Lynne Russon	Lynne liaising with Ian Cameron about attending meetings and ongoing citywide work.	Apr-19	01/03/21		
32 Learning Disability EOLC Service Improve EOLC, including support at home, for people living with a Learning Disability	Not a formal Project. Group are building links and engaging with LD patients about their needs and choices.	Margaret Deardon Chris Stothard Michelle Evans	Presented at Celebration event- slides on website Easy Read documents produced and shared.			N	
33 Gypsies and Travellers Supporting individuals at EOL to access care and remain in their own home.	Not a formal project. Hannah Wilson CNS at Wheatfields has developed links with the Liaison Officer for the Cottingley Springs Gypsy and Travelers Site: https://www.leeds.gov.uk/residents/housing/housing-options/gypsy-and-travellers	Hannah Wilson	Highlighting issues with fair access to care and GP registration. Presented at celebration event - slides on website.				
34 Prison EOLC MDT Providing Specialist Palliative Care advice and support to the Armley Prison Health Care Team. Improve EOLC within Prison and reduce need for hospitalisation.	Consultant and therapist attend 1/12 MDT to discuss advanced illness and complex cases.	Chris Kane	8 Cases to date where hospital admission avoided. Inmates would like to be able to die in cells not on healthcare unit - Challenges. Developing Education Programme for Prison Health and Care Staff. Monthly MDT's continue	Apr-18		Yes CCG R	
35 Homelessness Improve the care and support provide to people who are homeless at the end of their life	Semi formal project. One of St. Gemma's Quality Account Commitments. St. Gemma's have developed links with other Homeless Specialist Services in Leeds - York Street Practice, St. Georges Crypt, Held an initial introductory workshop. Agreed to extend partners involved and Identified who else to involve across the city Supporting GSF meetings with York Street Developed training for Primary Care Staff at York Street	Catherine Malia	Workshops involving wider partners met throughout 2019 and they are considering next steps. Bid to Hospice UK for funding for additional resource submitted and successful in gaining £25,800. A further bid of £10K has also been agreed by Gwyneth Forrester Trust . This will support an 18 month collaborative project to improve EOLC for the Homeless		01/09/21	N	on track

Specialist Palliative Care Supported MDT's

Heart Failure
Parkinson's
MND
Movement Disorders
Renal
Respiratory

Closed /Completed Projects

Project Title and Purpose	Key Milestones	Project Lead	Update	Start date	End date	Funding?	Add from dropdown
1. Palliative Care Education Overview Collate current EOLC education delivered and identify gaps for each staff group.	-Gather information from education providers and employers of health and care staff in Leeds -Formulate a useful report -Identify Gaps -Agree next steps	Trish Stockton	Training provided and future training planned collated to devise annual report for CCG. Analysis of data progressing. Report completed and circulated Feb. Lessons learnt for future data collection and gaps in education agreed. To agree future data collection format and gap analysis as workforce data not easily found. Suggest close project - Agreed by LPCN Executive	Jul-17	Oct - 18 Nov - 18 Feb - 19 Jun- 19	N	complete
2. Guideline for Self / Informal carer administration of S/C medication New Guidance for Leeds to enable improved self care out of hospital	-Develop a guideline - Ratify guideline through appropriate governance - Implement guideline into practice - Review impact	Sarah McDermott Chris Toothill	Guideline & patient/carer documents completed, ratified and incorporated into LCH CD policy Guideline cascaded within LCH Quality Meeting 6.12.18 Article to promote use within LCH Newsletter Uploaded to Leeds Health Pathways and website. Briefing circulated to LPCN members. Project closed	Jun-17	Jun-19	N	complete
3. Palliative Care Ambulance Crew Training To ensure Leeds Palliative Care Ambulance Crew gain and maintain the skills required to provide a high quality service	- Agree content of Training with YAS - Deliver training annually as agreed - Review Training needs annually	Trish Stockton	Citywide training team established. Meeting planned to discuss training needs 20th June Training delivered on 17th July. Training may need to be adjusted in future to reflect the changing role of crew as per new SOP.	Ap-19	01/03/20	N	complete
Review and Refresh Existing Guidance Ensure all existing and approved guidance is updated within agreed timescales and redistributed across the system	-Partnership Branding of Guidelines	Moira Cookson Diane Boyne	Branding of future partner documents agreed with LTHT medical illustrations and SOP produced. LTHT Medical Illustrations will format documents listed above.		01/08/19		complete
	- To review Opioid Wheel by April 19	Moira Cookson	Updated document complete and on LHP. Also on LPCN website.		Jul-19		complete
	- review and update the Patient Opioid Leaflet.	Lisa Nicholson	Final version agreed and published on LHP. On LPCN website. Complete.		Oct-19		complete
	- To review seizure and bleeding guidance	Lisa Nicholson Suzie Gillon	Executive are happy for documents to be owned by LPCN Lisa will work with Suzie Gillon to review guidance. Final comments made for both guidance docs. LPCN approved. Completed. Now available on LHP. Final copy on LPCN website and in files.		01/03/20		complete

<p>4. Process for identification and production of LPCN Medicines Related Guidance Develop a robust system to cover the whole process of guideline production from identification of need to ongoing review that links to Citywide processes already in place</p>	<p>- Map current Leeds process - Write SOP for LPCN (links to LPCN website as LHP is not accessible to all)</p>	<p>Moira Cookson</p>	<p>Citywide mapping of ratification process complete. Draft SOP completed, summary of citywide process to be an appendix to this. Draft SOP circulated to Exec with minutes for comment SOP approved at Exec meeting on 17th July to circulate to members and monitor use / impact. Circulated and on website</p>	<p>May-17</p>	<p>Sep-19</p>	<p>N</p>	<p>complete</p>
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