



The Coalition of Frontline Care for People Nearing the End of Life

Coalition One Year Summary Overview Keri Thomas Sept 24

Summary of Progress

- **Coalition of Frontline Care** formed Sept 2023
 - Agreement to form Coalition of Frontline Care.
 - Founder members GSF, CE, BGS- wider Coalition formed Sept 23 to include NCF, CHA, Homecare Assn, ARCO - Coalition regular calls 6 weekly discussing progress and activities.
 - New Coalition logo agreed.
- **Political**
 - Open Letter to Ministers from Coalition Sept 27th 2023-plus media coverage and articles published.
 - Government response from Helen Whately and follow up email to Sec State.
 - Shadow H&C- met Wes Streeting (Oct), follow up discussions from Labour Shadow Health and Shadow Minister for Care (Andrew Gwynne).
 - Follow up exemplars and suggested manifesto statements sent to Labour.
 - **Post-election- Aug 24** - Letters resent to current Ministers Stephen Kinnock, Andrew Gwynne plus Daisy Cooper and Lord Darzi plus Letter to Wes Streeting, Layla Moran (Chair HSC Cttee).
- **Parliamentary - House of Lords**
 - Coalition cited by Baroness Browning after King's Speech- constructive discussion, future follow up.
 - Additional discussion House of Lords - Baroness Ilora Finlay (KT), Robert Courts MP (KT).
 - Dying Well APPG meeting proposed to focus on Coalition suggested by Ilora Finlay.
- **Discussions with key national groups and stakeholders**
 - Prof Chris Whitty CMO's Nov Report- Coalition letter sent, positive meeting (KT MG, PF).
 - NHSE NCD for Pall EOLC Sarah Mitchell- (KT IB BGS), strong alignment and ongoing discussion.
 - CQC (LJ, KT), meeting seeking Coalition contribution to consultation and training assessors etc.
 - Palliative Care Manifesto group - Sue Ryder lead (KT).
 - Skills for Care (IB KT).
- **Others**
 - New Palliative and End of life Care Awards - Coalition to co-badged new suggested Awards in Integrated care Systems (9 nominations) and Partnership working across Health and Social Care (5 nominations) with the Coalition as sponsor and presenter of these awards.
- **Coalition Internal Progress Review and Practicalities** -
 - Feedback and 1:1 discussion with leads for all Coalition members.
 - Sarah Mistry of BGS agreed to take on Co-Chairmanship from Jan 2025.
- **Outputs planned/ in progress (from July 24)**
 - Plan to develop a Coalition **Communication group** to unite voice and comms activities by members.
 - Agreement to develop **Guidance** on practical means to implement the three aims.
 - Key areas of definitions, scope, and audience for Guide to discuss + call for Exemplars.
 - Discussion about widening membership to include other organisations representing providers and sectors who agree with this focus of better care for people in last years of life.
 - Discussion about need to seek funding as part of possible new Government Reforms.

Summary of Coalition

1. What is the Coalition of Frontline Care?

The **Coalition of Frontline Care** represents the leading organisations across health and social care, united in speaking with one voice to ensure high quality care for all people nearing the end of life. For many years, these organisations have worked with and co-badged the GSF training and accreditation for generalist teams across health and social care to enable 'gold standard' care for all in their last years of life, with any condition, in any setting, given by any frontline generalist care provider.

The Coalition brings together seven member organisations currently:-

Founder Coalition Member Organisations	Other health and care organisations
<ul style="list-style-type: none">• GSF-The Gold Standards Framework Centre in End-of-life Care (Keri Thomas- Chair)• CE-Care England (Martin Green)• BGS-British Geriatric Society (Sarah Mistry, Chair Elect)	<ul style="list-style-type: none">• NCF-National Care Forum (Vic Rayner)• HCA-Homecare Association (Jane Townson)• CHA-Community Hospitals association (Sue Greenwood)• ARCO-Association of Retirement Community Operators (Michael Vogues)

Aim of The Coalition:

"We believe everyone deserves top quality care as they near the end of life.. It makes sense, therefore, to ensure that those giving most care to most people in their final years, in any setting, are well trained in proactive, personalised end of life care (EOLC). We call on the Government to make a radical transformational shift in the care for older people nearing the end of their lives, through support and investment at service, system and national levels. (Coalition Letter to Ministers Sept 2023)

Our 3 goals and focussed 'asks' at the Coalition are: -

1. **Service Level**-generalist quality/service improvement training i.e. upskilling, enabling, supporting and empowering all in the health and social care workforce involved in the care for people in last years of life– (including those in 1% in their last year of life), to help them live well and die well, and to ensure the frontline workforce is at capacity and fit for purpose.
2. **System**-- For Integrated Care Boards and Systems (ICB/ICSs) to focus on people in last years of life and develop real tangible whole-system population-based integration across health and social care.
3. **National**- included in national policy, 10-year reforms and regulation e.g. CQC integration of recognition of EOLC in all areas, and new ICS assessment and inspections and for all care providers.

What is unique about the Coalition?

- a) **We start with people most in need in our ageing population, those in their last years of life.** We focus on older people in their last years of life (approx. 1% of the population), those with greatest needs, who mainly live and die with age-related conditions (dementia, frailty and multi-morbidity), and who use a large proportion of our NHS and social care resources (estimated at 30% NHS and 80% social care budget).
- b) **This Coalition is unique in representing both health and social care in making the case for change.** With the well-recognised interdependence of health and social care, prevention of over-hospitalisation and over-medicalisation, reducing of crises and hospital admissions and enhancing of peoples' preferences in their last years of life to remain at home is important at both humanitarian and economic levels.
- c) **The Coalition represents the 3 million generalist frontline workforce as the mainstay of care.** Importantly, in reality, care for MOST people in the last years of life is given by generalist frontline teams across health and social care. Improvements in frontline care are possible and are happening in pockets, leading to improved measures of benefit. There is no other organisation that represents this frontline workforce. If we are to improve care THIS is the group of people we need to empower, upskill and enable to give preventative care aligned to the wishes of people.