

Opening thought

The good physician
treats the disease; the
great physician treats
the patient who has
the disease.

William Osler



Coalition for Collaborative Care



We want to see a better deal for people with long-term conditions through:

Better conversations between people and the professionals who support them - leading to action and support that increases self-management and results in better outcomes

Growing and nurturing strong communities and social support which are vital for wellbeing

Co-production being embedded at every level within the NHS and beyond – a truly people-powered system

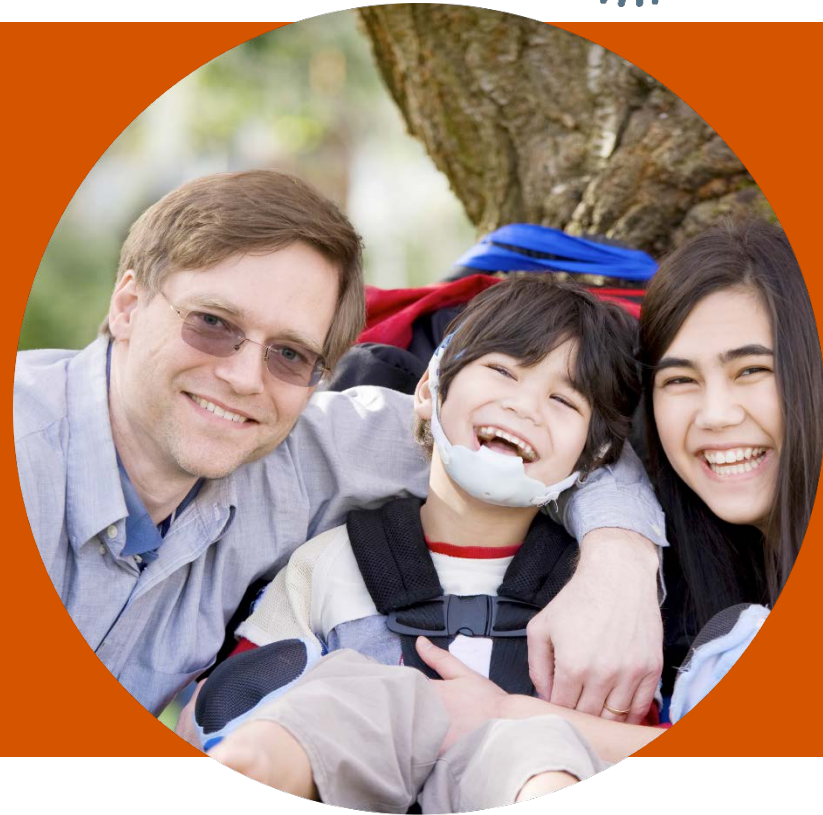
How do we plan to do this?



Creating the Conditions

- Workforce development
- Providing and using powerful evidence
- Identifying and pulling "system levers" to drive positive change in practice

For more information about our programme please see www.coalitionforcollaborativecare.org.uk/programme-of-work



Creating sustainable impact



There is an opportunity to make a real difference to the lives of people with long-term conditions – they are driving the work of C4CC through our co-production group

We have a strong group of national **partners** including system leading organisations, key professional bodies, charities, evidence and innovation experts, groups with expertise in person centred care and community development see www.coalitionforcollaborativecare.org.uk/about/our-partners

We also have hundreds of regional and local **members** - to find out how you can join us visit our website at:

www.coalitionforcollaborativecare.org.uk/get-involved/membership/

How do we plan to do this?




“Depth and Breadth”

Through the work of our partners we will help staff, people living with long-term conditions, their family carers and the wider community to make change

We will do this by helping this ‘movement’ to get the ideas, tools, connections and support it needs

We are working in depth in some places, including Five Year Forward View programmes to help embed person centred community focussed care and support in the system of the future



OUR DECLARATION

1

Our Declaration - Launched at Expo 2015

- The importance of person-centred care for people with long-term conditions, what needs to change and why we need to change
- Co-produced with NHS England and Coalition for Collaborative Care and developed with health and care professionals, policy makers and people with long-term conditions
- We need to motivate health and care professionals to help us make it a reality

#A4PCC – Action for Person-Centred Care

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What part will you play?

Background

- 15 million people in England with long term conditions (50% of all GP appointments and 70% of all bed days)
- Their treatment and care absorbs 70% of NHS and social care budgets in England
- 30% have more than one LTC, which increases with age and deprivation
- People living longer but not always well

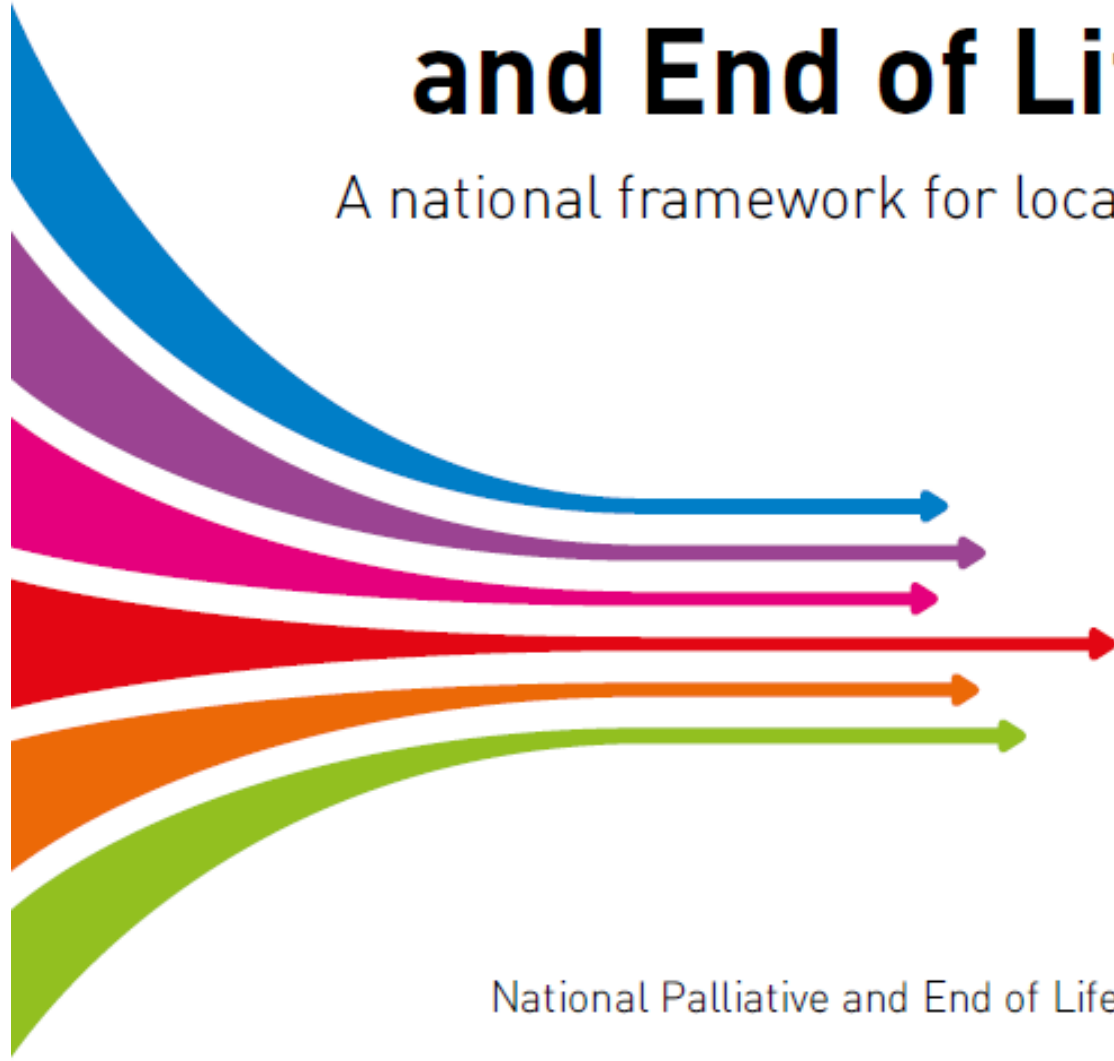
- Make a declaration at www.engage.england.nhs.uk/survey/ltc-declaration
- Tell your teams about our work
- Encourage them to make a declaration
- Ask them to feed back thoughts and ideas
- Use our hashtag – #A4PCC – when you see work that is relevant to person-centred care for people with LTCs
- Let us know of any events, activities or social media opportunities that we can join forces with you

Policy context

- DH EoLC Strategy – 2008
- NICE Quality Standard for EoLC - 2011
- Independent review of Liverpool Care Pathway - 2013
- One Chance to Get it Right – June 2014
- Actions for EoLC – Nov 2014
- Ambitions for Palliative and EoLC – Sept 2015

Ambitions for Palliative and End of Life Care:

A national framework for local action 2015-2020



National Palliative and End of Life Care Partnership

National Palliative and End of Life Care Partnership

Association for Palliative Medicine; Association of Ambulance Chief Executives;
Association of Directors of Adult Social Services;
Association of Palliative Care Social Workers; Care Quality Commission;
College of Health Care Chaplains; General Medical Council;
Health Education England; Hospice UK;
Macmillan Cancer Support; Marie Curie;
Motor Neurone Disease Association; National Bereavement Alliance;
National Care Forum; National Council for Palliative Care;
National Palliative Care Nurse Consultants Group; National Voices;
NHS England; NHS Improving Quality;
Patients Association; Public Health England;
Royal College of General Practitioners;
Royal College of Nursing; Royal College of Physicians;
Social Care Institute for Excellence;
Sue Ryder and
Together for Short Live

Our overarching vision

“I can make the last stage of my life as good as possible because everyone works together confidently, honestly and consistently to help me and the people who are important to me, including my carer(s).”

*‘Every Moment Counts’ National Voices,
National Council for Palliative Care and NHS England.*



Six ambitions to bring that vision about

- 01 Each person is seen as an individual
- 02 Each person gets fair access to care
- 03 Maximising comfort and wellbeing
- 04 Care is coordinated
- 05 All staff are prepared to care
- 06 Each community is prepared to help

"I can make the last stage of my life as good as possible because everyone works together confidently, honestly and consistently to help me and the people who are important to me, including my carer(s)."

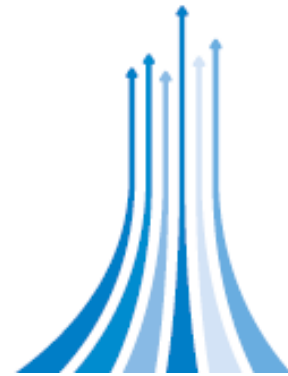


The foundations for the ambitions



Each person is seen as an individual

*I, and the people important to me,
have opportunities to have honest,
informed and timely conversations
and to know that I might die soon.
I am asked what matters most to me.
Those who care for me know that
and work with me to do
what's possible.*

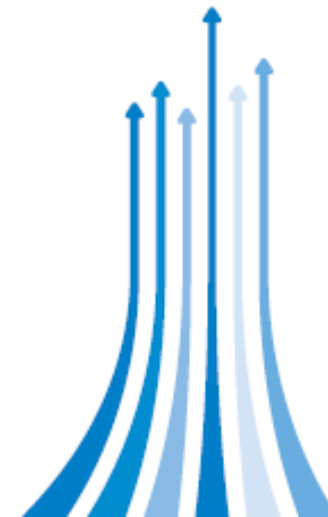


01

Each person is seen as an individual

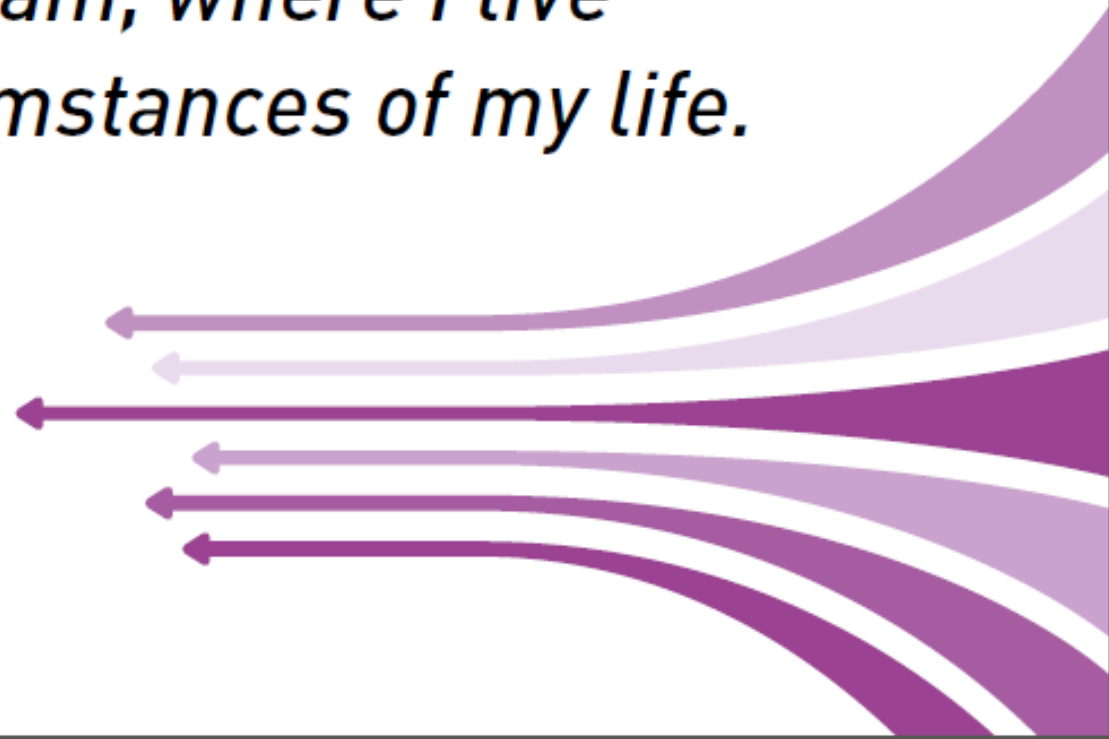
The building blocks for achieving our ambition

| | | |
|--|--|---|
| Honest conversations Everybody should have the opportunity for honest and well-informed conversations about dying, death and bereavement. | Systems for person centred care Effective systems need to reach people who are approaching the end of life, and ensure effective assessment, care coordination, care planning and care delivery. | Helping people take control Personal budgets and integrated personalised commissioning are some of the potentially powerful tools for delivering tailored and personal care for many more people. |
| Clear expectations People should know what they are entitled to expect as they reach the end of their lives. | Access to social care People must be supported with rapid access to needs-based social care. | Integrated care End of life care is part of new models of integrated health and social care being promoted across the health and social care system. |
| Good end of life care includes bereavement Caring for the individual includes understanding the need to support their unique set of relationships with family, friends, carers, other loved ones and their community, including preparing for loss, grief and bereavement. | | |



Each person gets fair access to care

*I live in a society where I get good
end of life care regardless
of who I am, where I live
or the circumstances of my life.*



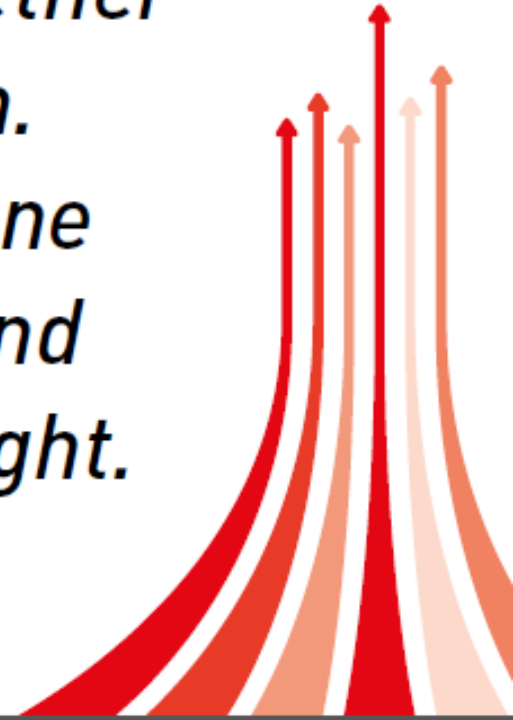
Maximising comfort and wellbeing

*My care is regularly reviewed
and every effort is made for me
to have the support, care and treatment
that might be needed to help me
to be as comfortable
and as free from distress
as possible.*



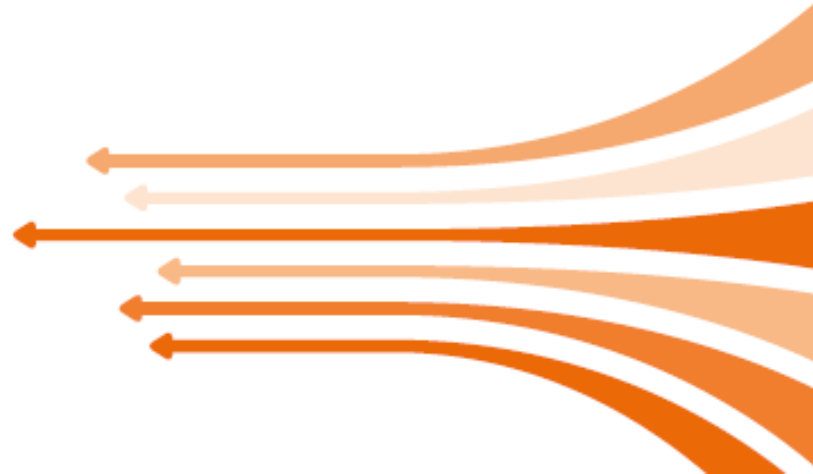
Care is coordinated

*I get the right help at the right time
from the right people. I have a team
around me who know my needs
and my plans and work together
to help me achieve them.
I can always reach someone
who will listen and respond
at any time of the day or night.*



All staff are prepared to care

*Wherever I am, health and care staff
bring empathy, skills and expertise
and give me competent,
confident and compassionate care.*



Each community is prepared to help

I live in a community where everybody recognises that we all have a role to play in supporting each other in times of crisis and loss. People are ready, willing and confident to have conversations about living and dying well and to support each other in emotional and practical ways.



“We are sharing this framework for action with local leaders in every community whether they work in the statutory, private or voluntary sectors. We expect them to plan and act, using this framework, so that these ambitions can be brought into reality.”

Introduction: Ambitions for Palliative and End of Life Care

