





Macmillan End of Life Care Programme Evaluation Summary

Background:

The London Ambulance Service NHS Trust (LAS) attends in excess of 16,000 identified palliative and end of life care (EoLC) patients per year. This figure is likely to be significantly higher than currently measured due to challenges with coding of this patient cohort. The term EoLC is defined as those who are likely to be within their final 12 months of life with a life limiting disease (e.g. cancer, end stage heart disease), including conditions such as frailty and advanced dementia. Traditionally ambulance service training has focused on critical care interventions, with EoLC being a relatively new addition to ambulance clinician education. The role of ambulance services in providing quality care for those towards the end of life is crucial, with upskilling of clinicians through education, creation of referral pathways, access to advance care planning and stakeholder engagement identified as key to achieving quality for patients.

From August 2018- March 2021 Macmillan Cancer Support© fully funded a Macmillan EoLC team for 2.5 years to improve the care provided to palliative and EoLC patients that utilise LAS services. The programme was designed to influence change on a system, staff and patient level.

Evaluation Methodology & Purpose:

The programme focussed on the achievement of four main outcome domains:

Staff knowledge, skills, confidence and the culture of care is demonstrably enhanced The experience of patients and carers is improved, with the user voice central to service improvements

A consistent whole system approach to end of life care pan London, working across organisational and professional boundaries

Consistent measures are used to monitor quality of care delivered in the prehospital care environment

The evaluation utilised monthly monitoring data (the programmes Key Performance Indicators) alongside original data collected from individual work streams to analyse the impact of the programme.

Key Activity:

- **Education strategy** including new clinical guidance, training & academy programmes and network of EoLC Coordinators for delivery of training at local ambulance station level
- **Incident oversight** to implement debriefing and learning from incidents at individual and system wide level internally and with external stakeholders
- **Patient and carer experience** explored through interviews, workshop and a patient representative at regular steering meetings
- Stakeholder Engagement with internal and external teams including engagement with the national ambulance EoLC forum, hospices and palliative care teams pan London for improved partnership working
- Consistent measures to monitor quality of care delivered: development of regular reports, clinical audit and development of EoLC fields on electronic patient care records to monitor the care LAS clinicians provide to patients towards the end of life.



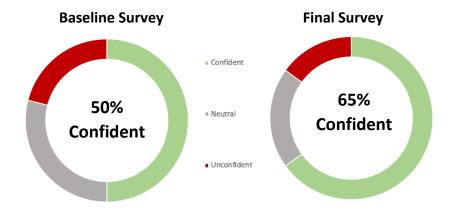


Evaluation Results:

EoLC in the out of hospital setting has demonstrable improvements in the following areas:

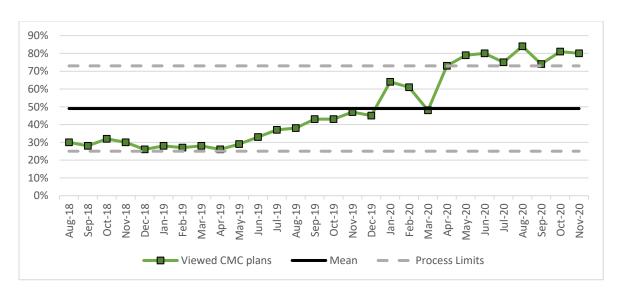
> Staff Confidence in Palliative and End of Life Care

At the beginning of the programme an LAS wide survey revealed only 50% of staff felt confident in their skills and knowledge in EoLC. Activity included 17 bespoke training programmes to key staff groups and development of a network of EoLC Coordinators for delivery of 39 Continuing Professional Development (CPD) sessions at local level. This has resulted in a 15% increase in overall confidence in this clinical area. Of those that received specialist education delivered by the Macmillan team 78% self-rated as confident.



Coordinate My Care (CMC) Viewing

CMC is an electronic urgent care system that holds personalised care plans communicating patient's preferences and wishes for their care across settings, as well as key clinical decisions that have been made. Ambulance clinicians have become more engaged in the use of CMC with 74% of care plans viewed by staff in 2020, which is a 39% increase compared to the previous year. The Macmillan team education, EoLC coordinator network promotion at a local level and core mandatory training (delivered to 93% of staff), has strongly contributed to the improvement in CMC viewing by ambulance clinicians.







Stakeholder Engagement

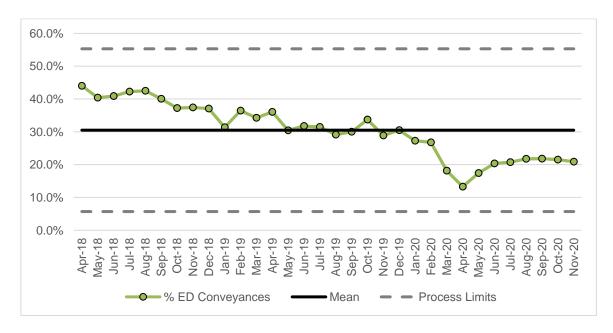
The programme had external representation on a large range of meetings, at Clinical Commissioning group level (14), Pan-London (5) and nationally (3). This engagement, combined with strong links with hospice teams, has enabled the creation of 18 new Appropriate Care Pathways (ACPs) for ambulance clinicians to seek advice or referral for patients as an alternative to transporting the patient to the ED. Engagement has created stronger inter-professional relationships with hospice/palliative care teams, resulting in improved incident reporting to guide service developments.

"The work of the team has enabled us to improve patient pathways, following feedback and investigation of specific cases. I worked in my role without a dedicated team for EOLC - issues were never fully dealt with and it was not easy to understand who to pick issues up with. I have seen LAS crews develop skills and confidence as a result of the team's work and have also heard from LAS crews how they have improved the outcomes for EOLC patients...it is essential that LAS hear about the amazing game changing work of the EOLC team from other health care workers. Historically, working with LAS was full of obstacles. The team have enabled barriers to be broken down, and seen a huge improvement in patient care."

Nurse Consultant, Hospice Sector

Emergency Department (ED) Conveyance

A progressive decrease in the number of EoLC patients taken to the ED by ambulance clinicians has been demonstrated, with a median reduction of 18% since the start of the programme. This has been influenced through improved access to telephone support and referral pathways across London, increased access to patients care plans through CMC viewing and the programme's education strategy.









Understanding the Needs of Patients and Carers

Findings from patient involvement work highlighted areas of care which were important for the service user:

- Keeping patients informed of the assessments/management plans undertaken by LAS staff
- Effective communication and offering comfort and reassurance
- Call handling experience
- Validating the role of carers

These themes have been incorporated into internal education materials for staff training and collated to present as 'quality of care' standards to be considered for inclusion in a new continuous audit of LAS patient care records.

> Improving the Culture of Care

An overarching aim of the programme has been to contribute to an improved culture of care, at an individual and system level focussed on patient centred care through education, shared learning across professional boundaries and learning from incidents.

Key Learning:

- The value of stakeholder engagement in achieving the system wide changes including, development of new pathways and case feedback regarding incidents or best practice
- Crossover occurred between activities, creating links and interdependencies between work streams that contributed to multiple domain outcomes
- Multi-method approach to dissemination of key information and development of education resources led to a tangible change in culture to make EoLC an integral part of LAS
- The education, promotion of CMC, ACPs and clinical guidance delivered pre-COVID-19 is likely to have contributed to staff being better prepared to deliver EoLC during the pandemic, when nationally there was increased emphasis on advance care planning and avoidance of unnecessary ED conveyance
- The Macmillan partnership delivered value beyond the initial investment, with credibility provided by the Macmillan name and enhanced governance and support throughout the programme

Sustainability and Future:

Throughout planning and delivery of the Macmillan Programme sustainability was considered for all activity. After completion of the programme in March 2021 sustainability will be ensured through:

- ✓ Inclusion of EoLC development in the organisation strategy and clinical strategy
- ✓ Continuation of the EoLC Coordinator network delivering support and education locally
- ✓ Sustainable educational materials
- ✓ Appropriate Care Pathways which ensure continuing referral/advice support for LAS clinicians
- ✓ Improved data quality with monthly reports and coding tools to monitor EoLC across the Trust

A business case for continuation of EoLC leadership in the organisation has been successful and a permanent team will remain in the Trust. Thank you to Macmillan Cancer Support© for funding this initiative, the legacy of which will enable future development to build upon the programme's success.

A copy of the full evaluation report is available upon request: Londamb.eolc@nhs.net