NIHR CLAHRC Greater Manchester:

Scoping the Available Services Involved in the Provision of End of Life Care in Greater Manchester

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Interviews with HCPs

22 Interviews with EOL Healthcare Professionals across Manchester and Pennine.

Acute trusts and community teams from 8 GM CCGs

South Manchester	Central Manchester	Bury	Oldham
North Manchester	Trafford	HMR	Tameside & Glossop

2 Questions:
1. *What do you think is good practice in EOL care?*
2. *Do you think there are any areas for improvement?*

Interview Analysis: Theme 1

An Integrated, holistic approach to community care including cross-team communication and access to an integrated, up-to-date care plan

"Communication between nursing homes and hospitals needs to improve"- ANP

"The most important aspect of EOL is communication between services, GPs and patients"- OOH Lead

"The integration of health and social teams is beneficial to cross-team communication"- FCT Lead

"An integrated team approach may be the best way to ensure clear and effective communication across teams"- DN Lead

"An integrated care plan created using Graphnet software … can be accessed by all services"- Neighbourhood Team Lead

"A care pathway could prove useful for improving in-home care"- FCT Lead

Interview Analysis: Theme 2

Relationships should be built in the pre-EOL phase to ensure support and reassurance for patients in latter EOL and for carers/ family into bereavement

"Building a pre-EOL relationship with patients and carers"- Head of Nursing

"Befriending, home visits….and transport services lessen the burden on HCPs and carers"- Community Nurse Lead

"Other aspects of good EOL care include providing support for carers…" Community Macmillan Team

"Bereavement services are very limited…not enough to cover the area" Macmillan GP

"Carers would like reassurances they are doing the right thing" Macmillan Nurse

Interview Analysis: Theme 3

Efficient and appropriate discharge with care in place for post-discharge. Facilitated by 24 hour service availability to ensure patient and family wishes are known and adhered to

"Issues with [ordering] equipment sometimes delay discharge"- FCT Lead

"The main complaint [from patients] is inappropriate hospital admissions"- ANP

"…Target KPIs such as reducing inappropriate hospital admissions"- Service Director

"Discharge done efficiently and correctly is crucial"- Macmillan Nurse

"Preferred place of death and avoiding unnecessary hospital admissions are crucial "- Lead ACM

Interview Analysis: Theme 4

Consistency across services/ trusts/ CCGs and continuity of care with a single point of contact

"...this causes problems as each CCG commissions different services"- Rapid Discharge Coordinator

"A named contact for each patient to ensure continuity, communication and trust"- FCT Lead

"Lack of coordination between teams can lead to a lack of continuity of care for patients"- Macmillan GP

"A key worker for each patient would be useful"- Macmillan Nurse

"Bury and Oldham CCG are not using the same processes as HMR where they could benefit from doing so"- Director of Clinical Services

Interview Analysis: Theme 5

Utilising the available services to their full capacity including DNs and volunteers as well as planned and emergency callout services

"Good practice is knowing the area and DNs well and liaising with them successfully"- FCT Lead

"The Marie Curie night service is particularly useful but needs to be planned and are not possible to arrange within 24 hours"- Community Nursing Lead

"An increase in volunteers would benefit everyone involved in EOL care"- Community Nursing Lead

"DNs are key for EOL care"-FCT Lead

"Discharging patients without involving the DNs can cause issues"- Community Nursing Manager

Interview Analysis: Minor Themes

Early identification and referral

Access to MDT meetings

Training and education

Symptom recognition and management

Absence/ lack of EOL leadership

A general lack of understanding of EOL

A lack of understanding of the skills and knowledge available in secondary care

Stakeholder Mapping

Interview Questions:

1. *What other services do you work with?*
2. *Who are your six main contacts?*
3. *Is there anyone else you can recommend I speak to?*

Identification of services within each CCG/ trust	Making contact and building relationships with staff	Discovering how each service links and relates to one another	Visualisation of services into a simple map/ network