Innovation ECHO Network

Session 1: Supporting the Wider Health System

26th January 2022
Network Recording Declaration

During this ECHO session discussions will be recorded so that people who cannot attend will be able to benefit at another time. Filming is regarded as ‘personal data’ under the Data Protection Act 2018 General Data Protection Regulations (GDPR), under that law we need you to be aware that:

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If you are NOT willing for your data to be used in this way, please LEAVE the session at this point.
# Agenda

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<td>14:00</td>
<td>Introduction</td>
<td>Craig Duncan, Interim CEO, Hospice UK</td>
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<td>14:05</td>
<td>Innovation Hub and User Testing Group</td>
<td>Rowena Lovell, Director of Strategy and Governance, Hospice UK</td>
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<td>14:10</td>
<td>Supporting the Wider Health and Care System</td>
<td>Heather Richardson, Joint CEO, St Christopher’s Hospice</td>
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<td>14:25</td>
<td>Questions, answers &amp; discussion</td>
<td>All</td>
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<td>14:40</td>
<td>Government Funding Update</td>
<td>Craig Duncan, Interim CEO, Hospice UK</td>
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<td>15:00</td>
<td>Close</td>
<td>Craig Duncan, Interim CEO, Hospice UK</td>
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Future Vision - Principles of Sustainability

We have set out nine principles of sustainability together with two cross-cutting enablers (Data and Relationships). Each principle is strategic in nature and further detail is set out in the following pages. We have called particular attention to the opportunity to negotiate a new deal with Commissioners as stakeholders told us this was the key means to ‘move the dial’ and drive long term sustainability within the sector.
Contact us:

innovationhub@hospiceuk.org
Supporting the Wider Health and Care System

Heather Richardson,
Joint CEO,
St Christopher’s Hospice
Supporting the wider health and social care system

Short and longer term opportunities
An all important conversation

New context of dying and loss

• Overstretched core NHS services
• Lack of social care
• Lack of care home beds
• New needs in people approaching end of life
• Significantly increased and different bereavement needs
• Changed practices on the part of SPC practitioners in response to COVID

Staying creative and forward thinking in the eye of the storm

• Finding new opportunities to achieve vision and purpose
• Remaining vital to the wider response
• Supporting long awaited change
• Anticipating and avoiding long term risks that begin taking root now
Some immediate and longer-term opportunities

**Short term**

1. Increased access to discrete services
2. New forms of support that respond to COVID related grief
3. Facilitating rapid transfer from hospital/acute settings
4. Extending training, support, new thinking

**Longer term**

1. New forms of support that respond to COVID related grief
2. Sustaining the workforce
Increased/amended access to hospice services

Where additional burden is likely to be insignificant, but impact could be great

• Access to 24/7 advice and signposting for patients and families beyond those accepted for care by the hospice
• Bereavement services for families/significant others whose relative/friend died outside hospice care
• Access to specialist advice 24/7 for new groups of professionals, or those challenged by current presentation of EOL needs – ambulance crews, OOH doctors,
Particularly those that use a workforce beyond scarce clinicians

- Community aid – drawing on the time of local people to connect with individuals who would otherwise be very isolated
- Rehabilitation - (using AHPs and volunteers) to engage with individuals at risk of accelerated deconditioning as they approach the end of life as a result of the pandemic eg in care homes
- Home-based hands-on care using unregistered carers or staff from other teams
Establishing new roles/ pathways that support people in transition from hospital to home/care home

Focusing on rapid detection of those who don’t need to be in hospital and timely engagement of community services

• Clear pathways and advice for hospital discharge teams
• in reach to hospital to assess – particularly where suitability is unclear
• New pathways directly from ED to hospice or care home with enhanced support
• Support for virtual community wards, integrated care systems focused on frailty and similar

NB similar opportunities to avoid admission in the first place also
Supporting capability and confidence beyond the hospice workforce

With attention to new needs related to EOL as well as those more traditional in nature

- Recognising dying
- Sensitive conversations
- Basic symptom management, including non-oral
- Verifying death
- A revised approach to advance care planning
Thinking about sustaining the EOL workforce

- How we retain current staff
- Increase their sense of wellbeing
- Encourage their engagement with peers – within and beyond their organisations/context of care to share learning and expertise
- Start to generate capacity within – to reduce risks related to poor external recruitment

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**Multi-professional framework for advanced clinical practice in England**

In 2017, Health Education England and NHS England and NHS Improvement worked in partnership to develop a national framework for advanced clinical practice, which ensures that there is national consistency and understanding about advanced level practice.

[Download the Multi-professional framework for advanced clinical practice in England](#)
Final thoughts

Opportunities for hospices now extend beyond additional funding

We have a history of being person centred, fleet of foot and going the extra mile

It is about our long term role in the wider health and social care systems and the assets we bring that are unique

We are relatively small and well joined up. Providing a response to longer term needs that draws on internal and sector wide resources could be powerful
H.Richardson@stchristophers.org.uk

www.stchristophers.org.uk/CARE
Questions and Discussion
Government Funding Update

Craig Duncan, Interim CEO, Hospice UK

www.hospiceuk.org
Next Session:

Date: Wednesday 23 February 2022

Time: 10:30 – 11:30
Before you go…

Let us know your feedback via this survey:

https://www.surveymonkey.co.uk/r/InnovECHOSurvey

www.hospiceuk.org