

Grwp Trawsbleidiol ar Hosbisau a Gofal Lliniarol Cross Party Group on Hospices and Palliative Care

23 Tachwedd 2018, Hosbis Ty'r Eos, Wrecsam

23 November 2018, Nightingale House Hospice, Wrexham Cofnodion | Minutes

Yn bresennol | In attendance

	Mark Isherwood (Chair) AM	
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Liz Andrews, City Hospice	Paul Harding, Marie Curie
Maria Bell, Denbighshire Council, representing North Wales Regional Partnership Board	Iain Mitchell, St Kentigern Hospice
Dawn Cooper, Macmillan	Steve Parry, Nightingale House Hospice
Catrin Edwards, Hospice UK (Secretariat)	Mary Wimbury, Care Forum Wales
Eluned Griffiths, Nightingale House Hospice	Kevin Thomas, MNDA
Elin Gwyn, RPS	

Ymddiheuriadau | Apologies

Rhun ap Iorwerth AM	Lesley Griffiths AM
Helen Mary Jones AM	Llyr Gruffydd AM
Mandy Jones AM	Cllr Gareth Roberts, North Wale RPB
Cllr Rob Jones, Western Bay RPB	Kelly Gillings, Western Bay RPB
Wyn Parry, Powys RPB	Grant Usmar, Hospice of the Valleys
Helen Davies, Bracken Trust	Andy Goldsmith, Ty Gobaith/Hope House
Trystan Pritchard, St David's Hospice	Jon Antoniazzi, Macmillan
Greg Pycroft, Macmillan	

Croeso | Welcome

Thanks to Nightingale House Hospice for hosting the CPG and for providing lunch and refreshments.

Cofnodion y cyfarfod diwethaf | Minutes from the last meeting

Minutes confirmed.

Matters arising:

Hospice UK, Hospice House, 34 – 44 Britannia Street, London WC1X 9JG

 Letter from the CPG to the Cabinet Secretary following previous meeting noted.

Gofal lliniarol mewn cartrefi gofal: heriau a chyfleoedd I Fyrddau Partneriaeth Rhanbarthol |

Palliative care in care homes: challenges and opportunities for Regional Partnership Boards

Catrin Edwards introduced the subject in the context of Recommendation 5 from the CPG Inquiry: Regional Partnership Boards should make use of pooled budgets to support the delivery of palliative care in care homes.

Mary Wimbury presented on behalf of Care Forum Wales (MW represents CFW on the North Wales Regional Partnership Board and CFW has representation on all other RPBs).

- 23,000 care home beds across Wales
- Regulation and Inspection of Social Care (Wales) Act ends the
 distinction between nursing and residential homes. Each 'care
 home' registers with a statement of purpose (which could include
 the delivery of palliative care), to which it would be inspected
 against.
- Some people live for a long time in a care home it becomes their home. Others enter for the last months of life.
- There is no clear picture of performance regarding care home delivery of palliative care across Wales – it appears patchy. We need to map what schemes are ongoing and their funding.
- Care homes need greater support and back up from the wider health and care network, including training from hospitals and hospices, GPs and District Nurses, access to pharmacy.
- The implementation of pooled funds for care homes is in its infancy. It would be useful to look at how funding is allocated.

The Group noted the written responses from North Wales Regional Partnership Board and Western Bay Regional Partnership Board.

Maria Bell provided insight on developments from the North Wales Regional Partnership as part of her role with Denbighshire Council.

- Looking at a pilot to support Community Resource Team wraparound service for care homes and what an effective CRT would look like for care homes.
- Working group on unscheduled care.
- 1000 Lives is considering care homes. There may be scope to consider palliative care as part of this.
- Pooled budgets may not be the only avenue for exploring better access to palliative care in care homes. Commissioning requirements would be another route. Palliative care should also be

considered in budgets for equipment and learning and development.

Action: CPG to monitor the inclusion and reference to palliative care in RPB plans and reports, including in relation to care homes, commissioning, and pooled budgets, and revisit the issue in the forthcoming year.

lain Mitchell raised the issue of people in care homes having the same right to access community teams and hospice at home services as people living in their own homes.

- Hospices in North Wales have offered, to the health board, to support care homes who struggle to keep residents out of hospital, by promoting the specialist 24/7 advice line.
- Few stakeholders were aware of the 24/7 advice line offered by hospices. This could be better utilised by care homes and other professionals to support people, especially in the Out of hours periods.

Action: CPG meeting on 19 February 2019 on OOH care to consider the role of 24/7 specialist palliative care advice line.

Action: CPG to survey hospices with regards the use of their 24/7 advice line, including by care homes.

Mark Isherwood considered the relationship between pooled budgets and personal budgets.

- The Social Services and Wellbeing (Wales) Act does not allow for the pooling of budgets at a personal level.
- In North Wales, all domiciliary care providers must demonstrate how they ensure their services are person-centred.
- A model similar to Direct Payments in care homes could support organisations to work jointly for the benefit for the person.

Mary Wimbury noted that a culture change towards coproduction between agencies – statutory, independent and third sector – and people, should also involve families and carers.

- This may involve education for carers on caring roles and support available in the wider community.
- MDTs should encompass everyone involved in the person's care, including care homes and carers.

Steve Parry noted the reliance of hospices (and the wider health system) on the timeliness of social care packages in order to discharge people from the hospice to their own homes.

 Telemedicine, including the 24/7 specialist advice line, is one solution to this.

UFA | AOB

Mark Isherwood referred to the recent shortage of palliative care staff at Wrexham Maelor, which led to a curtailment of hospital-based care during out of hours periods.

- Steve Parry noted that Nightingale House Hospice, which serves the area, was ready and prepared for this shortage and worked with the NHS to ensure coverage during this time. However, coverage of the story in the media led to unnecessary patient and family anxiety.
- Mark Isherwood noted that the CPG could be used in future to put out a factual statement in advance to reassure the public.

The CPG has been invited to share evidence from its Inquiry with the Health Committee on 13 December 2018.