

**HEALTH SCRUTINY PANEL**

**16 JULY 2010**

**END OF LIFE CARE  
EVIDENCE FROM NHS MIDDLESBROUGH**

**PURPOSE OF THE REPORT**

1. To introduce representation from NHS Middlesbrough, in attendance at the meeting today to present information pertaining to End Of Life Care in Middlesbrough.

**RECOMMENDATIONS**

2. That the Panel notes the information presented today and incorporates it into the overall review.
3. That the Panel pursues any lines of enquiry felt pertinent, with representatives of NHS Middlesbrough.

**CONSIDERATION OF REPORT**

4. Members will recall that End of Life Care (EOLC) was identified as the first substantive topic for the Panel to investigate during 2010/11. The Panel has already received a detailed introductory briefing from the regional clinical lead for End of Life Care about some of the issues facing EOLC in Middlesbrough and the wider region. The Panel has also agreed its terms of reference to govern the review.
5. Following the consideration of introductory information, it is now for the Panel to gather detailed information the management and provision of EOLC in Middlesbrough. To that end, NHS Middlesbrough will be in attendance at the meeting today to provide information to the Panel and address the Panel's questions.
6. On behalf of the Panel, NHS Middlesbrough has been asked to submit a paper outlining key information pertaining to NHS Middlesbrough's

understanding of EOLC services in Middlesbrough and to set out its views on particular questions. Those questions are outlined below:

- 6.1 How many deaths were there in the Middlesbrough population in 2009?
  - 6.2 What were the main causes of those deaths and what were the percentages of the main causes of death?
  - 6.3 What is the percentage split for place of death? i.e. between home, hospital, hospice, nursing home?
  - 6.4 What is the (2010/11 financial year) budgetary provision for End of Life Care (EOLC) in Middlesbrough?
  - 6.5 To which service providers does that money go and in what proportion?
  - 6.6 What does the current EOLC service provision in Middlesbrough look like? I.e. where are the EOLC facilities and what are numbers of WTE staff, whose principal focus is EOLC?
  - 6.7 The research for 'A Good Death' highlights that around 15% of people would wish to die in a hospice and around 60% would like to die at home.
  - 6.8 How does Middlesbrough's current capacity for specialised EOLC service provision look against that demand?
  - 6.9 Does Middlesbrough have a well publicised and accessible information source for those seeking advice or information about EOLC?
  - 6.10 What does NHS Middlesbrough expect commissioned providers to do to ensure that sufficient time and notice is given to people that they are approaching the End of Life, to ensure that their wishes can be put into practice?
  - 6.11 How much progress has been made so far in Middlesbrough, in your view, as to the implementation of 'A Good Death'?
  - 6.12 Is EOLC service provision seamless, between organisations, in Middlesbrough?
  - 6.13 Is NHS Middlesbrough satisfied that EOLC skills are viewed as core skills for frontline health services workforce?
  - 6.14 Where should EOLC develop from here?
7. NHS Middlesbrough has addressed the above questions in a paper, which is attached to this covering report as Appendix 1. It is anticipated that NHS

Middlesbrough will initially speak to the attached paper, picking out salient points ahead of dealing with questions from the Panel.

8. The Panel is asked to consider the information supplied by NHS Middlesbrough, pursue any lines of enquiry felt appropriate and incorporate the evidence gathered into the overall review.
9. The Panel is asked to note that the Department of Social Care, Middlesbrough and Redcar & Cleveland Community Services and South Tees Hospitals NHS Foundation Trust have all been arranged to attend future meetings of the Panel to provide their perspectives on EOLC.

### **BACKGROUND PAPERS**

10. Appendix 1- Please see the attached paper, prepared and submitted by NHS Middlesbrough.

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