Overview of the work of the National GSF Centre in End of Life Care

Enabling a gold standard of care for all people in the last years of life.

Gold Standards Framework gives outstanding training to all those providing end of life care, to ensure better lives for people and recognised standards of care.

Overview Autumn 2017

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The GSF Centre in End of life Care
Our Core Purpose is to train and support frontline staff to enable a gold standard of care for people in the last years of life.

The GSF Centre team has for nearly twenty years, helped generalist frontline staff care better for all people in their final years of life, enabling them to live well until they die. Thousands of doctors, nurses and carers have received training, improving the care of several million people over the years. The GSF Centre, led by its founder and National Clinical Lead Prof. Keri Thomas OBE, provides nationally recognized training and accreditation for people with any life limiting condition in the last years of life.

GSF helps to improve
- **Quality** of care experienced by people
- **Coordination** across boundaries
- **Outcomes** enabling more to live well and die well, reducing inappropriate hospitalisation.

What is GSF in practice?
GSF is a practical systematic, evidence based approach to optimizing care for all people nearing the end of life, given by generalist front-line care providers. GSF is all about quality care – *quality improvement* with training, *quality assurance* with standards of care and *quality recognition* with recognized accreditation.

GSF and the regulator CQC

**GSF Accreditation in hospitals is the only CQC approved information source in end of life care in hospitals** “GSF is a very important tool that I do believe, if people are doing the things that are in GSF, they will find that they come out very well on CQC inspections” Prof Sir Mike Richards, CQC Chief Inspector of Hospitals.

“What is fantastic about the Gold Standards Framework, is that it is focusing care homes staff minds on how can they make that (end of life care) experience the best it possibly can be” - Andrea Sutcliffe, Chief Inspector Adult Social Care, CQC
Improving integrated cross boundary care

In a population based approach to end of life care, GSF helps put patients at the heart of care.

9 Cross Boundary care sites
Dorset, Nottinghamshire, Airedale/Bradford, Barking, Havering & Redbridge, Morecambe Bay/ Lancaster, Doncaster, Southport, Jersey and Wolverhampton

Achievements of GSF

- **Long history**- GSF is one of the UK’s longest established end of life care organisations, well known and active for almost 20 years. Originally funded by NHS DH and now as a voluntary Community Social Enterprise (VCSE).
- **All areas**- Spread to all health and social care settings with training for staff with **10 Training Programmes**
- **Integrated care**— use of GSF as a common vocabulary leading to better Cross-Boundary Care.
- **Well Recognised**—The GSF 6 Accreditation Quality Hallmark Awards are externally recognised by CQC, NICE, and co-badged by RCGP, BGS, Community Hospital Association and leading care homes organizations CE, NCA, NCF, and RNHA.
- **Enabling generalists and motivating staff** - Improving confidence competence, job satisfaction+ staff retention.
- **Sustainable Transformational change** – leading to long-lasting and sustainable culture change.
- **Compassionate care** – integrating compassionate care and spiritual awareness in all programmes, affirming their vital importance.
- **Influencing national policy** contributing to the UK being the leading nation in EoLC..
- **GSF is internationally recognised** being in use and influencing projects in over 8 countries.

Awards to GSF for its work in End of life Care

- CQC– the only recognised information source for end of life care for CQC Hospital Inspectors
- National Skills Academy – Excellent Providers for Social Care
- BMJ Education Award Finalist for Primary Care Programme

Outcomes include:-

- **Earlier identification** of patients in the final year of life, leading to more proactive care.
- More **advance care planning** discussions.
- More dying where they would choose.
- **Halving hospital admissions**, reduced lengths of stay, and hospital deaths
- Greater **staff confidence**, job satisfaction, boosted morale, staff retention, ‘culture change’, more compassionate care.
- **Better carer** satisfaction.
- **Cost saving** for the NHS.
- **Better integrated cross boundary coordination** - better communication with GPs, care homes and hospitals to improve health & social care interpretation.

Identifying ‘Gold Patients’

GSF registered or ‘Gold patients’
- Identified from any area, included on electronic register
- Given Gold card, information sheet
- Can access help-line or ‘Gold Line’ to coordinate their care
- Treated as special
GSF projects across the UK

North
- Lancashire/Morecambe Bay – 15 practices, 1 whole Hospital
  30 wards & Care Homes
- Locala, Kirklees—31 Care Homes
- Cumbria – 13 community hospitals
- Wrightington Wigan & Leigh Trust - 1 ward
- Durham - 44 Care Homes
- Tameside & Glossop - 12 GP Practices
- Bury 33 GP practices (silver)
- Wirral – 6 GP practices
- Airedale, Yorkshire – I whole hospital, 30 GP practices
- Manchester – 2 acute hospitals 4 wards, 10 Domiciliary care
- Merseyside - accredited hospice, 1 whole hospital (Clatterbridge)
- Doncaster CCG - whole Hospital and 9 practices (Gold) and 19 practices (Silver) programme primary care
- Wakefield— Pinderfield whole hospital

Central
- Nottingham – 30 Foundation Level, 1 acute hospital -
- 2 wards, 2 Hospices, 12 GP practices
- Derbyshire - 6 GP practices
- Warwickshire – 36 GP practices 19 Care Homes
- Northampton – 5 Care Homes (Foundation Level)
- Leicestershire—8 community hospitals
- Stoke & North Staffs - 16 GP practices

London / South East
- South East London, St Christopher’s Hospice - 122 care homes
- Barking Havering Redbridge – 70 GP practices, whole hospital, 60 care homes (XBC Site)
- St Francis’ Hospice, Romford—32 Care Home
- Stanmore Royal Orthopedic Hospital 4 wards
- North East Essex – 42 GP practices, 3 care home
- HM Prison—Norwich

South West
- Dorset -14 community hospitals, acute hospitals
  3 wards, 11 GP practices, 125 Care Homes
- Cornwall – 14 community hospitals
- Devon/Exeter – whole hospital
- Cotswolds, Longfields - 11 Care Homes

13 GSF Regional Centres - Delivering training mainly to care homes in their areas:
- Arthur Rank Hospice, Cambridgeshire
- Locala, Huddersfield, Yorkshire
- Longfield Hospice Care for the Cotswolds, Gloucestershire
- North London Hospice
- Princess Alice Hospice, Surrey
- Pilgrims Hospice, Kent
- St Francis Hospice, Romford
- St. Christopher’s Hospice, Sydenham
- St Richards Hospice, Worcester
- St Michael’s and St Wilfrid’s Hospices, East Sussex
- Weldmar Hospice, Dorset
- St Mary’s Hospice, Birmingham
- St Benedict’s Hospice, Sunderland

GMC GSF EOLC Course
- 35 Hospital Doctors at Stoke - 44 GPs Oxford
- Hospital Doctors - Barking, Havering and Redbridge
- Acute Hospital, GPs - Wandsworth CCG

International GSF projects & Collaborative Centres:
- Jersey (XBC site), 16 Care Homes and 6 Domiciliary Care Agencies, 1 Hospice, 12 GP Practices, 1 hospital
- Ireland, St Johns Hospital, 7 Care Homes
- Australia & New Zealand South Africa , China, Hong Kong, Singapore, Japan, Canada, Holland, Belgium, India.
10 Current GSF Training Programmes

Primary care
- Since 2000, almost every GP practice now uses Foundation Level basic (bronze) GSF principles i.e. palliative care registers and meetings. Now, since 2011, next stage GSF includes Going for Gold programme—a practice based learning programme with Accreditation Quality Hallmark Award (partner RCGP) and Silver programme with either distance learning or interactive workshops involving 549 practices.

Care homes
- Over 3,000 care homes trained since 2004 (25% of all nursing homes) with over 600 accredited with Quality Hallmark Award (partners Care England, NCF, NCA, RNHA) and many re-accredited 6 years on. GSF Care Homes recognised by CQC as examples of best practice. Training delivered in different ways and by Regional Centres.

Acute hospitals
- Over 40 hospitals and 250 wards involved and 10 whole hospitals in training in a 2 year supported programme with 6 workshops, all tools and resources plus evaluation. and 10 moving to accreditation and the Quality Hallmark Award if from 2015 (partner British Geriatrics Society). The hospital accreditation process is recognised by CQC as the ONLY Information Source in EOLC in hospitals for CQC.

Community hospitals
- Over 50 GSF community hospitals in Cornwall, Dorset, Cumbria and Leicestershire.
- 28 currently accredited co-badged by The National Community Hospital Association.

Domiciliary care
- Train the trainers cascade programme, distance learning on the Virtual Learning Zone. Currently 42 agencies in training with over 1600 care workers achieving certificates so far. Radical organisational changes demonstrated plus improved confidence of staff and better collaboration with primary care.
- New style delivery planned for Autumn 2017 using video-conferencing.

Dementia care
- 4 modules VLZ distance learning platform, focusing on person centred, communicating with people with dementia regarding end life care, improving pain and symptom assessment and management, care planning and reducing hospitalisation.

Hospice Support
- Some hospices requested an adapted programme specific to hospices - mainly home care/day care units supporting use of GSF for patients at home, and improving cross boundary care. First hospices accredited September 2014 and now many re-accreditations.

Clinical Skills Course
- Delivered via VLZ for nurses and healthcare assistants, improving clinical skills in caring for residents in care homes and at home, tailored to help provide high quality clinical care alongside the use of GSF.

Spiritual Care Course.
- Interactive workshops and an on-line 4 modular, distance learning course tailored to the needs of each organisation, emphasizing delivering compassionate self care, spiritual assessment, the ‘heart’ aspects of person centred care, resilience and developing compassionate systems for all care providers.

Prisons
- A new programme supporting people in prison receive top quality end of life care. Progressing to Accreditation in 2016, Norwich Prison being the first to be GSF accredited with the Quality Hallmark Award.
How is training delivered?

Our training is delivered through:
- Interactive workshops
- One of our GSF Regional Centres
- Distance Learning filmed programmes on the GSF Virtual Learning Zone
- Blended learning (combination of the above)
- Fast track programmes
- Foundation Level, (Silver) Enhanced level, leading to Accreditation and the GSF Quality Hallmark Award

How is impact evaluated?

Quantitative and qualitative assessments in all programmes

1. **Key outcome ratios** showing impact of change before and after GSF against key metrics.

2. **Comparative audits** – patient level (online After Death Analysis - ADA), staff confidence, organizational questionnaire, patient/carer views.


4. **Visit/interview** for quality assessment.

More reports of cumulated evidence published in journals.

http://www.goldstandardsframework.org.uk/evidence

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**Progress achieved—examples from GSF accredited teams  Sept 2017**

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<tbody>
<tr>
<td>Aims of GSF accredited organisations</td>
<td>Early recognition of patients - aim 1% primary care, 35% hospital, 80% care homes</td>
<td>Advance Care Planning discussion offered to every person</td>
<td>Decreased hospitalisation + improved carers support</td>
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<tr>
<td>GP practices (Rounds 1-4)</td>
<td>75% - 90% patients identified on registers</td>
<td>68% offered ACP discussion</td>
<td>Halving hospital deaths, 71% carers offered support</td>
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<tr>
<td>Acute Hospitals</td>
<td>35% identified early (range 20-58%)</td>
<td>92% offered ACP discussion (range 85-100%)</td>
<td>Length of stay reduced, Carers support improved</td>
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<tr>
<td>Community Hospitals</td>
<td>45% identified</td>
<td>98% offered ACP</td>
<td>Carers support improved</td>
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<td>Care Homes accredited</td>
<td>98% identified, 81% identified in dying stages</td>
<td>98% offered 95% uptake</td>
<td>Halving hospital deaths + admissions, 97% carer support</td>
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