

## The National GSF Centre in End of Life Care

We have run quality improvement training programmes since 2000 and validated accreditation in many settings, leading to the GSF Quality Hallmark Award. Training is delivered through workshops, distance learning, the GSF Virtual Learning Zone or from the GSF Regional Centres, with intrinsic evaluations assessing progress against national standards. GSF meets all national standards: NICE, DH, RCGP, QIPP, CQUINS, Skills for Care etc.

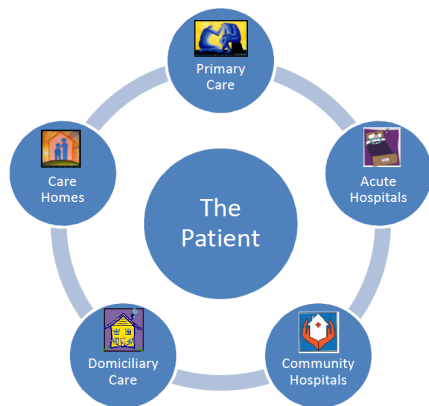
**GSF accredited care homes are recognised by CQC as models of best practice.**

### GSF provides:

Quality Improvement	Quality Assurance	Quality Recognition
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## Integrated Cross Boundary Care

Added together, GSF programmes used in different settings can help improve integrated cross boundary care between different providers. See the GSF cross boundary care (XBC) programme 'Joining up the dots'.



**GSF - Providing the right care for the right person, in the right place, at the right time.....every time.**

# What is the *impact* of GSF?

GSF leads to better ...

## Quality of care

Improvements in staff skills and confidence leading to a better experience of care for patients.

*"GSF has made my work simpler, drawn me closer to residents and relatives and given me confidence in discussing end of life care."*

Care Home GSF Lead Nurse

## Coordination of care

Better communication, coordination and integrated cross boundary care.

*"GSF has provided a common vocabulary between hospitals and the community."*

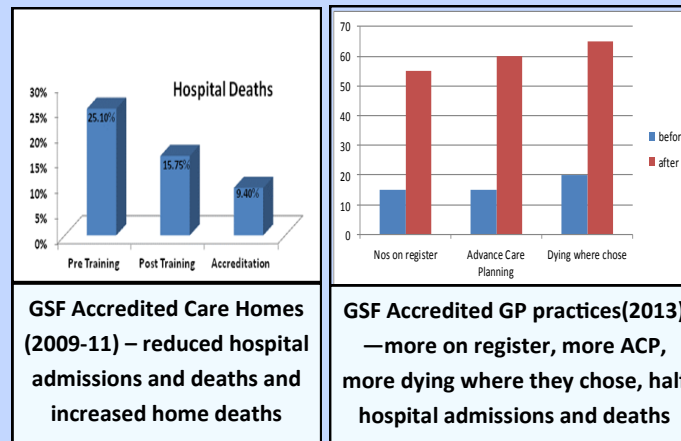
Dr Karen Groves, Southport Hospital

## Outcomes for patients

Enabling more to live and die where they choose, reducing hospitalisation and cost.

*"GSF is one of the most significant developments in end of life care since Dame Cicely Saunders founded the hospice movement."* Penny Handsford, Nursing Director, St. Christopher's Hospice

### Outcome measures



**The leading UK provider of training and accreditation in end of life care for generalist frontline staff**



*'Enabling a gold standard of care for all people nearing the end of life'*

The National  
**Gold Standards Framework**  
Centre in End of Life Care

[www.goldstandardsframework.org.uk](http://www.goldstandardsframework.org.uk)

Email [info@gsfcentre.co.uk](mailto:info@gsfcentre.co.uk)

Tel 01743 291890

## GSF in Primary Care

**Why?** The leading quality improvement programme for GP practices building on GSF QOF, leading to next stage Going for Gold and GSF accreditation endorsed by RCGP.

**How?** Practice based learning programme - 6 one hour modules over 6 months plus the popular 'GSF-in-a-day' workshops. Individual practices or in groups.

**What GSF Improves** Better quality proactive care, earlier recognition, better coordination in line with patients' wishes, reduced hospitalisation, more living and dying well.

*"GSF has become part of the fabric of improving end of life care in this country and has made a real difference for thousands of patients and their families."*

Prof Sir Mike Richards  
DH National Director  
End of Life Care



## GSF in Care Homes

**Why?** The leading quality improvement programme in the UK, with over 2,300 care homes trained (almost 50% of nursing homes) a sustainable programme and well recognised GSF Accreditation Quality Hallmark Award.

**How?** A full programme of six workshops over 9 months in your area, plus DVD / VLZ or blended scheme for home-based learning. A new Foundation level is also available.

**What GSF Improves** Better quality of care, proactive planning, working with GPs, staff morale, more advance care planning and reduced (usually halved) hospital deaths.

*"It has been life changing for us, improving all aspects of care, not just towards the end of life."*

Manager of a GSF Care Home



## GSF in Acute Hospitals

**Why** Over 54% of deaths occur in hospital, yet half could have died at home (NAO Report 2009). There is a need for culture change and more compassionate care in hospitals (Francis Report, LCP Review 2013).

**How?** Two year step-by-step programme with resources, training workshops, support, coaching and evaluation, leading to Foundation level and Accreditation.

**What GSF Improves** Earlier recognition of patients, inclusion on registers, asking about needs and preferences, improving communication with GPs, reduced hospital stay and death rates leading to more dying where they choose.

*"GSF is well thought through, patient focussed and joined up. People can see that the difference GSF is making is quite transformational."*

Mike Connolly, Palliative Care Nurse



## GSF IT Solutions

Making it easy to do the right thing.

GSF IT Solutions can enhance clinical care by earlier alerting of patients nearing the end of life, ensuring better populating of GP's GSF/palliative care register, prompting key actions and better cross-boundary communication + locality registers/EPaCCS.



**GSF and HOSPICES – There are 8 GSF Regional Centres in the UK running programmes in their communities and several are hospices. Some hospices are GSF Accredited and we are working with them to develop a new GSF Hospice Support Programme. Contact the GSF Centre for details.**

## GSF Dementia Care

**How?** Four distance learning modules on a Virtual Learning Zone with evaluation and University credit options

**What GSF improves?** Confidence and awareness, pain management, advance care planning and reduces hospitalisation for people with dementia.

*"The GSF Dementia Care Training Programme will help ensure that people with dementia are given the best possible care at end of life."*

Professor Alistair Burns DH National Clinical Lead for Dementia



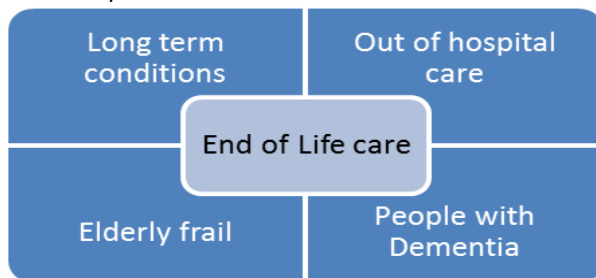
## GSF in Community Hospitals

As with Acute hospitals but adapted for community hospitals, leading to better quality care and cross boundary communication.



## Commissioning End of Life Care.

EOLC is important in at least five areas of commissioning



## GSF in Domiciliary Care

**Why?** Well trained domiciliary care workers can support people to live longer at home.

**How?** Fully resourced on Virtual Learning Zone for groups of carers. Trainers cascade and evaluate.

*"Domiciliary carers who have completed the GSFDC programme have grown in confidence, now working in partnership with district nurses."*

Gillian Moncaster  
Manchester City Council.

