



Dr Karen Chumbley
End of Life Board Lead

PCN End of Life Care Leads

There are now clinical leads in end of life care appointed in 7 of the 10 North East Essex PCNs. The aim of these roles is to improve the outcomes for people registered with the PCN in the last year of life and their impact will be measured via the North East Essex end of life data dashboard. The end of life leads are:

Dr Annie Soares: Colte ARA

Claire Smith: Ranworth Group

Dr Farman Ali: Clacton PCN

Dr Mary Kamanda: Colte RMT

Dr Uchenna Gandonu: Mill Road Group

Ben Taylor: Creffield Group

Dr Beth Mclean: Colchester Medical Practice

End of Life Hub Referrals

St Helena and the Community district nursing team have a shared referral form for palliative and end of life care. The district nurses and the hospice nurse specialists are working together in teams aligned to the PCNs. Please use the form in Ardens labelled in the NEE Community services page as 'End of Life' and titled 'Last Year of Life Services referral' for all referrals for palliative and end of life care for both the community and hospice services.

An entry on the My Care Choices Register does not constitute a referral to hospice or community services. It is helpful to create a referral for SinglePoint awareness even if the person does not require other hospice services if they have been given SinglePoint's contact details. This enables the SinglePoint team to access the clinical record if the person calls for support.

Palliative Care Education Development

St Helena and St Elizabeth Hospice (East Suffolk) have created a new learning and development hub called **Hospice Education**.

Hospice Education will be launched in January 2022 and will provide an extensive range of palliative and end of life education, training, learning and development sessions.

If you identify any learning needs in your teams that you would like to see catered for by this team please contact

education@stelizabethhospice.org.uk

Previous education sessions on opioids and anticipatory prescribing can be viewed on the Die Well website at: <https://www.nee-alliance.org.uk/our-work/die-well/education-for-healthcare-professionals/>

Anticipatory Prescribing Templates

Prepopulated anticipatory prescribing templates are not recommended as this can inhibit an individualised approach to prescribing.

This has been a particular issue in the prescribing of levomepromazine for nausea and vomiting at the end of life for which the starting dose is 6.25mg – 12.5mg over 24 hours sc. The lower dose of 6.25mg is the usual appropriate starting dose for someone who is frail otherwise there is a risk of over sedation.

Glycopyrronium 24 hour maximum dose is usually 1.2mg before an alternative medication is considered.

The guidance on anticipatory prescribing is available on the Die Well webpage on

<https://www.nee-alliance.org.uk/our-work/die-well/useful-documents-for-professionals-working-in-end-of-life/>

Feedback from My Care Choices Users

We are surveying people who are on the My Care Choices Register about their experiences of care, particularly the quality of conversations with health care professionals, the dignity with which they are treated and their symptom control. This is an anonymised survey system to support service improvement.

A member of the My Care Choices team will be contacting people newly registered on the system to ask if they are willing to take part in the survey. Please ensure that anyone sharing their choices is aware of the name '**The My Care Choices Register**' to help avoid any misunderstanding when they are contacted.

Thankyou for all that you are doing to support people at the end of life in North East Essex. Over the last 12 months 56% of people who have died have had the opportunity to record their preferences for end of life care on the My Care Choices Register. This enables more people to be cared for outside of hospital in their place of preference.

Over the last 2 years anticipatory prescribing levels (as recorded on the My Care Choices register) have increased from 35 to 61% which has enabled timely symptom control for many more people.

If you have any comments on end of life care in North East Essex or any suggestions for improvement, please contact me at kchumbley@sthelena.org.uk