**28th September 2020**

**“A good send off?”**

**A new Healthwatch report into End of Life care**

**Today Healthwatch Brighton and Hove publish a report into the experiences of people receiving end of life care. 15 people and their families told Healthwatch about their experiences in and out of hospital and, in the report, we describe their hospital discharge and subsequent care in the community.**

End of life care was not a dignified and well-arranged experience for many. The sensitivity and dignity of individual care planning that we would expect was not always provided. Our recommendations have been accepted in full by the NHS with a pledge to improve the care pathway and correct the elements of personal insensitivity and absence of coordinated planning that we found.

**Fran McCabe, Chair of Healthwatch Brighton and Hove, said today**:

"People and their families should expect a 'Good send-off'. It is the final, and in some ways, most precious gift that the NHS and social care services have to offer. The excellent care we found in specialist services are not always extended to everyone and these are issues that the NHS and care services must address with urgency."

**Healthwatch have made 10 recommendations to improve End of Life care:**

1. Greater focus on patients at the end of their life to improve their experience and hospital performance.
2. Increased or improved use of specialist support teams both on End of Life Care and Discharge Planning and a recognition that most discharges of people with terminal care are complex *for the patient and family*.
3. Better information and active early involvement of patients in planning their care and routine inclusion of their families. Implementation of the NHS ‘Let's Get You Home Policy’ and practice.
4. Reconsideration of the quality of care that can be given in the Discharge Lounge for patients who are terminally ill and will not be dis-charged in a short time.
5. A review of the practice of readmitting patients through the Emergency Department within days of hospital discharge and a consideration of a patient fast track continuity plan (rather than the admission being regarded as a new episode of care) to avoid this if their condition deteriorates.
6. Involving patients and families in training programs on End of Life.
7. Open and sensitive discussion of End of Life Care planning and a consideration of revisiting the agenda that would have been addressed in Dying Matters week which was postponed because of COVID-19.
8. Proactive involvement of GPs, and other primary care and community health services and a review of the communications systems between hospital and general practice.
9. Improved coordination of the services that already exist including those in the voluntary and charitable sectors and chaplaincies.
10. Rapid provision of resources and care where there are gaps to assure ‘A Good Send-off’.

**David Liley, Chief Officer, Healthwatch Brighton and Hove said today:**

"This report reveals an insensitivity to people and their families facing end of life care that is unacceptable. Our recommendations will not require expensive or complex changes in staffing or practice but will require the NHS and care system to implement their own policies and adhere to best practice expectations. COVID-19 brings an even more urgent element to implementing the recommendations of our report."

**Press release ends**

**For further help and advice and to escalate issues of concern contact:**

**Healthwatch Brighton and Hove**

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*Broadcast media: our spokesperson will be available for pre-recorded interviews either down-the-line, for radio or for television via online platforms. Should broadcasters wish to have a representative in a studio Healthwatch will try to accommodate such requests and expect interviews to be conducted in accordance with Government COVID-19 guidelines.*

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Also:

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