

Tayside Managed Care Network for Palliative and End of Life Care Data Collection & Audit Group Terms of Reference

AIM OF GROUP

The overarching aim of this subgroup will be to develop a purposeful and integrated approach to audit and data collection, with cognisance of local, regional and national priorities for improvement and performance review.

OBJECTIVES

The group will build upon the outputs of the Steps to Better Healthcare Palliative Care Data Collection Group and broaden its scope to include 3 key objectives:

- 1. Work collaboratively with the Integrated Health and Social Care Partnerships to consider data collection approaches which capture the quality of palliative and end of life care (PEOLC) across Tayside.**

The indicator ‘% of last 6 months of life spent in a home/community setting’ is reported nationally as a proxy measure and is a performance target for integration bodies, reportable to the Ministerial Strategic Group for Health and Community Care. Additional measures, aligned to the needs of local integration boards, may enhance the value and purpose of this indicator.

Examples of approaches which will be considered:

- a) A regional mortality audit focused on a cohort of expected deaths where greater than 5% of the last 6 months of life was spent in hospital.
- b) Other forms of patient experience/feedback: complaints review, Care Opinion, patient stories.
- c) Selected reporting of process indicators eg use of the Key Information Summary

- 2. Implementation of a Tayside Specialist Palliative Care Minimum Data Set.**

This data set was defined and agreed by the Steps to Better Healthcare Palliative Care Data Collection Group and promotes a standardised approach to data collection within Specialist Palliative Care Services (SPCS). The SBH Data Collection Group has worked with eHealth to integrate the SPCS MDS within EMISWeb, the electronic healthcare system which is replacing MIDIS. The feasibility of EMISWeb as a data collection system, the content of the SPCS MDS and reporting mechanisms will require further evaluation and refinement.

3. Act as an information sharing hub for palliative care related audit, enabling collaboration and dissemination of work.

This already includes:

- a. 2 x regional SPCS Audit Groups (Dundee/Angus and P&K) who meet quarterly
- b. Supporting and expanding the scope of an annual clinical effectiveness event “Celebrating Best Practice”.
- c. Close partnership with the Research/QI subgroup to maintain an up to date database of all ongoing projects and collaborators

GROUP MEMBERSHIP

Elinor Brabin, Consultant in Palliative Care NHS Tayside, Co-Chair

Lynsey Webster, Senior Officer Strategy, Performance and Support Services Dundee,

Co-Chair

Deans Buchanan –Consultant in Palliative Care/Lead Clinician, NHS Tayside

Vivienne Davidson, Principal Planning Officer, Angus

Paul Feltham, Information Systems & Performance Officer, Angus HSCP

Stephen Halcrow – Principle Information Analyst, Local Intelligence Support Team, Angus & Dundee HSCPs

Scott Jamieson, General Practitioner, Angus HSCP

Sarah Lowry, Business Unit, NHS Tayside

Iona Philp, Macmillan Palliative and End of Life Care MCN Manager

Alistair Smith, Principle Information Analyst, NHS National Services Scotland

Sandy Strathearn, Policy Officer, Perth & Kinross HSCP

Rachel Willmot, Information Analyst, Local Intelligence Support Team, Angus & Dundee HSCPs

There should be a representative from each HSCP and individuals attending will have delegated authority. As a minimum those present should include:

- 2 representatives from the HSCPs
- 1 LIST Analyst
- 1 Clinician
- 1 Chair

Other members may be co-opted into the group to provide additional expertise for focused pieces of work.

ACCOUNTABILITY

The Audit/Data Collection Group will be accountable to the Tayside Palliative Care MCN Steering Group. It will meet quarterly and produce an annual action plan to review and evaluate its progress.