Communications Management Plan

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Communications Management Plan Approval

Name	Role	Date Approved
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Circulated to:

EPaCCS Steering Group
EoLP Communications Team

Effective communication is one of the most important factors contributing to the success of any project/programme of work.

The purpose of this plan is simply to set out the structure (and standard) for how communications will be managed (planned, prepared and delivered); ensuring that all communications are consistent, well-coordinated and responsive to the needs of all stakeholders, including patients and their families/carers.

This Communications Management Plan serves as a guide throughout the duration of EPaCCS implementation, and is a living, evolving document that may be revised if communication requirements change overtime. The plan defines the 'who', the 'what', the 'when' and the 'how' of all EPaCCS related communications.

Purpose:

The term EPaCCS has been around for a number of years. It is a term that has implications for a large number of stakeholders and there is wide variation amongst these stakeholders in relation to their awareness, knowledge and engagement. There is also a gap around public and patient perception and understanding of EPaCCS because most of the local EPaCCS activity to date has concentrated on raising professional awareness.

This plan is intended to clearly set out the goals and objectives for EPaCCS communications activity across Cheshire, taking into consideration the longevity and complexity of local implementation.

What are we trying to achieve?

To raise general awareness and understanding of EPACCS for those people that have the potential to be involved in end of life care conversations, and that work or live in Cheshire. This includes:

- Patients and their significant others
- Those working in Health, Social & Voluntary Care Sectors
- Private Sector Organisations'
- Volunteers
- Carers
- Members of the Public

What do we hope will happen as a result of a raised understanding and awareness of EPACCS?

A system wide approach to using EPACCS, across services involved in caring for people at the end of life throughout Cheshire, with the aim of improving patient outcomes. This will be achieved through:

- Improved leadership and engagement with EPaCCS across stakeholders
- EPaCCS featuring as a strategic priority for local organisations involved in caring for people nearing the end of life
- Individuals feeling empowered to take action around EPaCCS

How we'll make this happen?

- We will strengthen membership of both clinical and IT leadership within the EPaCCS steering group
- We will establish ways to communicate regularly with stakeholders
- We will develop key messages for EPaCCS communications to improve consistency
- We will offer bespoke education and training to local organisations involved in caring for people at the end of life
- We will embed EPaCCS key messages within established education programmes
- We will develop patient and public information resources using our key messages
- We will integrate our EPaCCS key messages within the Public Health & Dementia work streams of EoLP
- We will develop an electronic suite of EPACCS resources accessible via EPAIGE
- We will Identify and develop clinical and non-clinical EPaCCS champions across Cheshire

How will we know we are making a difference?

- Bi-annual reporting of EPaCCS from Primary Care, Hospices and from Care Communities will demonstrate improvements, in both the use and quality of EPaCCS records and these improvements will be sustained
- The active membership of the EPaCCS steering group will be representative of all partner organisations
- Those delivering education and training in Palliative and End of Life Care across Cheshire will have a good understanding of EPaCCS to enable them to field questions raised by attendees
- Patients and members of the public will be accessing information about EPaCCS via online resources

Key Messages

What is EPaCCS?

- EPaCCS is an abbreviation for Electronic Palliative Care Coordination Systems

- Essentially it is about sharing a summary of important and coded information electronically when someone is recognised to be nearing the end of their life, so that this is available at the point of care

- The type of information shared in EPaCCS includes:
    - Important conversations e.g. about prognosis , CPR discussions
    - Patient wishes e.g. Preferred Place of Death
    - Anticipatory care planning details e.g. ‘blue Booklet’ medication’s, , LPA appointed , OOH notified

Language that may differ for patients’ and members of the public

A way of sharing a summary of important information electronically when someone’s health is deteriorating due to their illness or long term condition. Sharing this information will ensure that anyone involved in the persons care is aware of:

- the persons medical condition
- significant people involved in their care or who know the person well
- any preferences or significant conversations that may have taken place
- any plans that have been put into place to help achieve a person’s wishes

Supporting Resources

Patient leaflet
Professional Leaflet
Education Slide Deck
FAQ’s

Purpose and benefits of EPaCCS

Purpose:

- To enhance communication and coordination between different teams, services and organisations involved in delivering palliative and end of life care across Cheshire, in order to support improved patient outcomes and care

Benefits:

- To collectively agree to adopt a consistent approach to recording people’s end of life care planning, including their wishes and preferences across Cheshire partners

- To create a place where all end of life information that has been ascertained over-time, possibly by a range of different healthcare professionals/staff, can be viewed

- To provide a mechanism to retrieve information that results in a better understanding of end of life care delivery and experience locally, in order to improve end of life services

Language that may differ for patients’ and members of the public

Purpose:

- To ensure the right information about a persons end of life care , including their wishes, is available at the right time, by those involved in making decisions about their care and treatment

Benefits:

- Everyone involved in a person’s care at the end of life is recording information in the same way
- This information is easily accessible by those involved in a person’s care, including during out of hours and in emergency situations
- The information recorded is helping local services to understand how to best support people to achieve their preferences, and where service improvements may be needed, for example where geographical variations exist

Supporting Resources

Patient leaflet
Professional Leaflet
Education Slide Deck
FAQ’s

National Position of EPaCCS

- There is wide National recognition of the role that sharing electronic patient information has in supporting well-coordinated and personalised care. The importance of electronic record sharing is further supported by the following key documents that all have an influence on how end of life priorities are set for Cheshire:

    - NHS 10 year Plan
    - National Ambitions for Palliative & End of Life Care
    - NICE Quality Standard: End of Life Care for Adults

- Patients and Carers have also identified the importance of sharing information at the end of life
    - What's important to me: A Review of Choice in End of Life Care
    - National Survey of Bereaved People (VOICES)

- Most people assume important information about their health condition and care is already shared with those involved in their care but the reality can be very different

Language that may differ for patients' and members of the public

- The importance of sharing electronic information about a patient and their condition is widely supported by national policy and guidance
- When seeking the views of patients and carers about what is important to them at the end of life, the sharing of key information electronically has been identified as a key priority
- Most people assume important information about their health condition and care is already shared with those involved in their care but the reality can be very different. People can be left feeling distressed by having to repeat difficult conversations with various people involved in their care

Supporting Resources

Education Slide Deck
Professional leaflet
EPAIGE links to referenced documents
FAQ's

EPaCCS in Cheshire

In Cheshire EPaCCS is currently delivered through two main IT systems:

- EMIS
- Cheshire Care Record

There were three key influencing factors that informed our approach to EPaCCS across Cheshire:

- Decision for the GP system (EMIS) to represent the Primary EPACCS Record
- Desire to avoid duplication of information into multiple systems
- Need to ‘piggyback’ other strategic approaches across Cheshire that were aiming to achieve IT interoperability

EPaCCS is currently available in the following settings:

- East Cheshire Hospice & St Luke’s (Cheshire) Hospice
- All GP Practices
- All Community Nursing Teams
- Some Hospital Teams*
- Some Community Out of Hours Teams*
- Social Care Teams*
- Mental Health Services*

*denotes read only access

F**or 2019 onwards the aim is to expand the availability of EPaCCS to include the following:**

- Hospice of the Good Shepherd
- All Hospital Teams
- All Community Out of Hours Teams
- NHS 111
- North West Ambulance Service
- Care Homes

Language that may differ for patients’ and members of the public

- Across Cheshire we are already sharing key end of life information electronically with some of the people involved in your care: GP’s, Nurses, some of our Hospice staff and with Social workers

- Our aim over the next few years is to share this information further with other services that may be involved in your care such as the Out of Hours Doctors, the Ambulance Service and with hospital teams

Supporting Resources

EPaCCS Landscape Document
Education Slide Deck
Patient Leaflet
Professional leaflet
FAQ’s

How to generate an EPaCCS record

- EPaCCS is essentially a set of data codes that provide a common language across IT systems

- The generation of an EPaCCS record therefore occurs via any of the following means:
    - Using the national EPaCCS template within the EMIS library
    - Selecting an EPaCCS code that may have been integrated within other local service specific EMIS templates e.g. Frailty Assessment, District Nurse templates, ONE template
    - Free texting the data code into the EMIS record

- The full EPaCCS dataset represents information that *should* be considered, and where appropriate discussed, with patients (and their families/carers) in a timely way

- In most circumstances completion of EPACCS will occur over a period of time and by several different people involved in the person's care

- It is not always necessary or appropriate to complete all elements of the EPaCCS dataset

Language that may differ for patients' and members of the public

- At the moment anyone involved in your care who is using a system called 'EMIS' can create an EPaCCS record that can then be shared electronically with other services involved in your care.

- This EPaCCS record created within EMIS can then be shared across different other IT systems used in different care settings. In the future we are aiming for hospital electronic systems to also have the capability to create EPaCCS records that can be shared across services.

- You may wish to talk with the people involved in your care about the type, and amount of information that is shared about you through EPaCCS. You can also request that this type of information is not recorded or shared.

- Sharing of key information via EPaCCS is something that should routinely happen between services involved in your care, once it is recognised that a person's condition may be deteriorating, and when conversations in relation to this deterioration have taken place. Therefore when you talk to your health professional, you may find that you already have an EPaCCS record.

Supporting Resources

Education Slide Deck
Professional Leaflet
Patient Leaflet
Cheshire EPaCCS dataset
FAQ's

How do we measure that EPaCCS is making a difference in Cheshire?

- Data reports are currently being collated and reported on twice yearly from the following services that use EPaCCS:
    - All GP Practices
    - East Cheshire Hospice
    - St Luke's Hospice

- We are continually developing and revising our data collection and reporting strategies with the aim to include more services who are using EPaCCS within the next two years, and thereby obtaining a richer picture of the impact of EPaCCS on patient outcomes

- Services who wish to run their own independent reports can do so using the resource entitled 'read codes for Cheshire end of life searches' obtained via the Cheshire EPAIGE

- In recognition that the full EPaCCS dataset is quite extensive, in Cheshire we are suggesting three minimal data fields are **considered and recorded in the GP system by the time a person has died:**
    - they were **identified**[1] as approaching end of life
    - they were given the opportunity to have some form of **advance care planning discussion**[2]
    - they had a recorded **cardiopulmonary resuscitation**[3] **status**

    - ✓ [1] by identified we mean, sensitive, timely conversations have been initiated with the patient (and their families/carers) to discuss their condition and their likely prognosis/disease trajectory and to explain the term palliative, which would then be recorded using relevant, locally agreed GSF/Supportive care coding.
    - ✓ [2] for some patients this will not be appropriate i.e. they don't wish to discuss future care needs, or they lack capacity to make informed decisions. We would like to see that these instances are also being recorded and communicated between healthcare professionals using the associated coding
    - ✓ [3] including possible outcomes that the patient did not want to discuss CPR, or that they were for CPR

- We also measure the number of patients with a recorded Preferred Place of Care/Death AND an Actual Place of Death recorded. By looking at this data we can start to understand how many people do not die in their place of choosing and why this might be so we can assess if we need to change our service provision or some other element of their care

- The EPaCCS dataset also includes a series of codes to signify that a person have given their consent to share their end of life information- this is a nationally defined information standard for EPaCCS which is also reported upon locally.

- Whilst use of the consent codes within EPACCS does not in fact control the actual sharing of coded information within EMIS, they symbol a reminder to the person completing EPaCCS to check that appropriate conversations have taken place with the patient and their significant others about their condition, and any preferences for their care.

Language that may differ for patients' and members of the public

- As part of our desire to continually improve local services, non-identifiable data from local GP's and from Hospices, is regularly reviewed to understand how EPaCCS is currently being used, and what benefits this appears to be having for patients'.

- Over time we hope that other services e.g. hospitals and community nursing will also be included in the review of EPaCCS data

- By reviewing EPACCS data it is hoped that by the time a person has died, that three key things will have happened and have been recorded within EPaCCS:
    - The persons deterioration has been recognised
    - They have been given an opportunity to discuss their preferences and choices
    - We know whether resuscitation has been discussed

- As part of our data review, we are also looking at where patients are dying in relation to their preferences. In the future this will tell us what services you have access to so that we can change and improve those services according to what people need and want.

Supporting Resources

Consent Statement
Your Cheshire EPaCCS Data Explained
Cheshire EPaCCS Data Searches
Patient Leaflet
Professional Leaflet
Education Slide Deck
FAQ's

What action do I now need to take to support better use of EPaCCS?

- If you are an EMIS user, find out who is using EPaCCS within your organisation and who can help you to start coding End of Life Information - if you're unsure contact The End of Life Partnership who will be able to point you in the right direction

- If you don't have access to EMIS, discuss this with your line manager to see if gaining access is possible- speak to the End of Life Partnership if you need help with this

- If you do not use EMIS as your current system but you communicate with colleagues who do, ensure you include in your communications to them important conversations you have had with patients and their families that can then be coded on EPaCCS. For example if you are filling in a discharge letter for a patient who is leaving hospital.

- If you have access to the Cheshire Care Record you need to view this regularly to obtain any relevant End of Life information for people that you are involved in caring for

- Ensure that you have activated the 'EOL coordination summary view' on your EMIS so that you can view coded end of life information across all your data sharing permissions in one place

- If you work in a GP Practice you need to switch on the information sharing DATA SHARING AGREEMENT for end of life to ensure the information is flowing correctly. More details about how to do this are available on EPAIGE.

- If you attend any multi-disciplinary meetings where palliative and end of life patients are being discussed, encourage your peers to use and view EPaCCS to support the coordination of that persons care, or to support reflective practice following a death

- Find out who is administrating the recording of deaths within your EMIS system and encourage them to record Actual Place of Death as part of this process

- Find out by contacting The End of Life Partnership, how to access your EPaCCS bi-annual data reports and use them to share your progress and to motivate the team

- Get familiar with the resources and information available on Cheshire EPAIGE so that you feel knowledgeable in talking about EPACCS ,and so you can sign post others to help improve their understanding

- If you have something good or bad to tell us about EPaCCS, or if you have an idea to share, or wish to become an EPaCCS Champion- please get in touch with The End of Life Partnership

Language that may differ for patients' and members of the public

- If you think that you should have an EPaCCS record, or if you wish to know if information about you is already being shared via EPaCCS, then discuss this with the professionals involved in your care

- Download the EPACCS patient leaflet to find out more about EPaCCS across Cheshire

- If you know somebody who may benefit from having an EPaCCS record, share the patient leaflet with them and encourage them to speak with those involved in their care

Supporting Resources

EPAIGE Resources:
How to Activate the Summary View
What is the Cheshire Care Record?
Cheshire Care Record GP Data Sharing News Feed
GSF Top Tips
Patient Leaflet
Professional Leaflet
Education Slide Deck

How do I find out more about EPaCCS?

- Visit Cheshire EPAIGE www.cheshire-epaige.nhs.uk and follow the EPaCCS links from the homepage
- Contact The End of Life Partnership on 01270 758120 for bespoke training requests or advice
- Speak to the clinical staff working at your local Hospice or in the Specialist Palliative Care Team
- Become a member of the EPaCCS Steering Group or become an EPaCCS Champion for Cheshire. To express your interest please contact **annamarie.ratcliffe@eolp.org.uk**

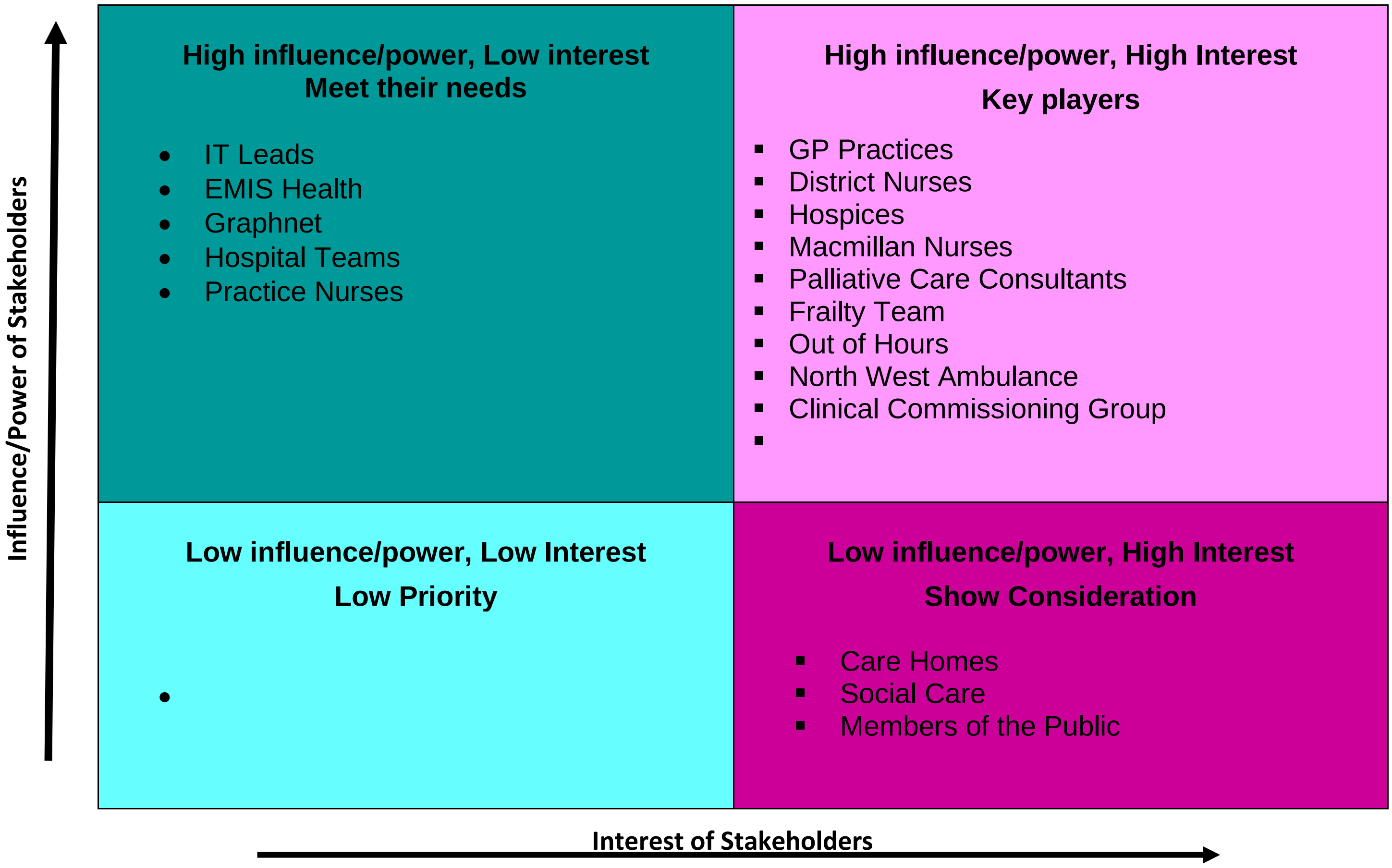
Language that may differ for patients' and members of the public

- Contact The End of Life Partnership on 01270 758120 for advice or bespoke training requests
- Speak to your GP, District Nurse, Macmillan Nurse, or a member of staff from your local Hospice
- Download the patient information leaflet from XXXXXX (new patient website)

Supporting Resources

EPAIGE
Professional Leaflet
Patient Leaflet
FAQ's

Stakeholder Analysis



High influence/power, Low interest
Meet their needs

- IT Leads
- EMIS Health
- Graphnet
- Hospital Teams
- Practice Nurses

High influence/power, High Interest
Key players

- GP Practices
- District Nurses
- Hospices
- Macmillan Nurses
- Palliative Care Consultants
- Frailty Team
- Out of Hours
- North West Ambulance
- Clinical Commissioning Group

Low influence/power, Low Interest
Low Priority

Low influence/power, High Interest
Show Consideration

- Care Homes
- Social Care
- Members of the Public