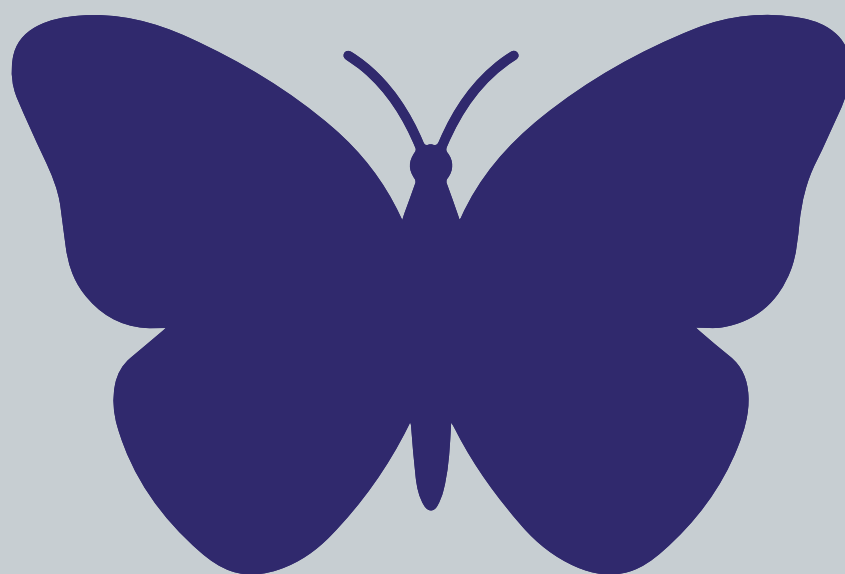


End of life all age strategy

2025-28



Foreword

I am delighted to present our end of life care strategy for 2025-28. Within it we have re-affirmed our commitment to delivering the very best end of life care to our patients and those important to them. We believe that all staff across our organisation, whether in clinical, administrative or support functions, have a part to play in ensuring excellence in care. We will continue to enable our staff to deliver such care through supporting both their education and their wellbeing.

In this strategy we have extended our ambitions to explore an all-ages approach to end of life care and look forward to collaborating with colleagues across the organisation to develop this.

I am particularly proud of the work undertaken by our new end of life education and improvement team and their roll out of the 'purple butterfly model of care'. Having a dedicated team to deliver end of life education and training Trust-wide is crucial for us to enable our ambition of patients receiving the same level of excellent end of life care irrespective of which ward or team is caring for them.

More than ever, we have worked to include the voices of our patients, lived experience representatives, lay partners, staff and volunteers. We have aligned our thinking with partners and colleagues across the North West London Integrated Care System (NWL ICS) considering direction from the London regional and national palliative and end of life care leadership.

Finally, I would like to extend our gratitude to the patients and bereaved relatives who have worked alongside us and shared personal insights and experiences. This has been key to helping us to shape our work for the next few years.



Professor Dame Janice Sigsworth
Chief nursing officer

Introduction

Our end of life strategy, 2025-28 is based on national guidance,^{1,4} local evidence and service user insights, underpinned by our Trust values. This document sets out a clear vision for our work and the strategic commitments which will guide us through the complex landscape of palliative and end of life care over the next three years.

Our vision

Every person, and those important to them, approaching the end of their life will receive compassionate and individualised care when and where they need it.

Our mission

All staff and volunteers will understand their responsibility in the delivery of end of life care and will have the necessary skills and confidence to care for those that need it (death literacy).

Our strategic commitments

We will focus on our patients, staff, organisation and partners. We will deliver these commitments through a detailed work plan for 2025-28, overseen by the Trust's end of life steering group.

Definitions

Terminology for end of life and palliative care can differ between professionals and services as well as between the countries in the UK. At the Trust, we adopted definitions that align with the World Health Organisation (WHO) and NHS England.

End of life care	Palliative care	Bereavement care
involves the treatment, care and support of people thought to be approaching the end of their life. This includes people who are imminently dying in hours and days as well as people with progressive, life-limiting illness who may die within the next 12 months.	is an approach that can help patients, and those important to them, to cope with problems associated with life-threatening or life-limiting illness. Palliative care recognises that psychological, spiritual, as well as family and financial worries can be just as important as physical problems. Some people need palliative care early on in their illness, other people need it as they approach the end of their life.	is the help and support given to bereaved people and those facing the loss of someone important to them. This may include practical help and resources as well as support to cope emotionally with the grieving process.

¹ Ambitions for Palliative and End of Life Care: A national framework for local action 2021-2026. (2021) National Palliative and End of Life Partnership

² One Chance to get it Right (2014)

³ NICE Guidance. End of Life Care for Adults: Service Delivery [NG142] (2019)

⁴ NICE Guidelines. End of life care for infants, children and young people with life limiting conditions: planning and management [NG61] (2019)

Our patients

We will strive for our patients and those important to them to receive the highest quality person-centred end of life care when they need it.

To achieve this, we will continue to:

- champion compassionate end of life care that is tailored to individual circumstances – cultural, social, psychological and spiritual
- promote the use of a holistic approach, advance care planning, information sharing and coordinated care
- support discharges for patients at the end of life who prefer to be cared for outside of hospital
- ensure adult patients discharged with a fast-track package of care have their advance care plan documented on the London Universal Care Plan (UCP)
- continue to work on Trust-wide improvements related to cardiopulmonary resuscitation (CPR) and treatment escalation decisions
- promote the use of individualised planning for the last hours and days of life
- provide responsive specialist palliative care reviews five days a week for adults
- work with site practitioners to facilitate out of hours end of life care and support
- provide 24/7 chaplaincy service for those facing bereavement
- give practical support to bereaved relatives via patient affairs
- offer seven days a week medical examiner service for the review of urgent cases where there is a need for urgent registration of death
- provide specialist bereavement support to families who have lost a baby, child or young person.

By 2028, we plan to:

- offer all adult patients recognised as approaching the end of their lives the opportunity to have advance care planning conversations which will be documented and shared on the London UCP
- improve recognition of the last year of life by exploring the use of trigger tools
- ensure patients and those important to them receive timely assessment and appropriate support and information to meet their needs
- ensure systems and processes are in place to support rapid discharges for people at the end of life, when they wish to be cared for outside of hospital
- work to offer equitable and fair access to face-to-face specialist palliative care advice and support seven days a week
- explore all ages bereavement support for those identified as being in need
- explore the role of end of life volunteers to support patients and those important to them.

Our staff

We will ensure our staff and volunteers have the knowledge, skills and support to provide excellent end of life care.

To achieve this, we will continue to:

- provide end of life and palliative care learning resources and training
- roll out the 'purple butterfly model of care' to empower staff to deliver excellent care to patients, and those important to them, in the last hours and days of life
- use the end of life big room approach to share learning and drive the delivery of improvement priorities
- learn from end of life incidents, complaints and other available data
- provide 24/7 access to specialist palliative care telephone advice to staff
- offer staff wellbeing and 'Grief Matters' support through CONTACT
- work with the learning from deaths programme and medical examiner service to support shared learning from those who die in our hospitals
- talk about 'Dying Matters' to promote death literacy amongst our staff and volunteers as well as patients and those important to them.

By 2028, we plan to:

- deliver end of life education, in line with the national framework, for all patient facing staff groups using a strategic approach, utilising existing enablers such as our Pathway to Excellence programme
- support the delivery of Trust-wide communication skills so that all staff feel confident and competent to have compassionate end of life conversations
- ensure all patient facing staff and volunteers understand and feel confident in the delivery of end of life care, within the remit of their role, through full implementation of the 'purple butterfly model of care' across all adult wards and areas
- support a network of expert end of life care champions, representing all adult wards across the Trust, who can champion end of life care delivery within their clinical areas
- offer education and support to create the opportunity for staff to debrief routinely after a death within their local teams
- co-ordinate systems and processes to facilitate the sharing of good practice and learning across the organisation.

Our organisation

We will work collaboratively with colleagues across all divisions and specialisms to deliver focused improvements and promote equitable access to palliative and end of life care.

To achieve this, we will continue to:

- work with colleagues through the end of life steering group to deliver a strategic approach to end of life care across the organisation
- maintain effective governance and reporting structures which support the Trust-wide approach to end of life care responsibility and delivery
- co-design our end of life approach with support from lay partners and lived experience representatives as core members of our end of life delivery programme
- work to understand the data available to us regarding end of life care delivery across the organisation, including feedback from patients, families, carers and staff, so we can make informed decisions regarding priority improvements.

By 2028, we plan to:

- work with colleagues through the end of life steering group to explore and develop an all-ages strategic approach to end of life care
- explore the ability to design and develop more detailed data dashboards which allow us to identify and understand unmet need
- monitor end of life performance against key metrics using business as usual methods to support integration and ownership, for example divisional and directorate scorecards and our ward accreditation programme
- explore opportunities to incorporate end of life competency monitoring into mandatory training, induction, appraisal and personal development review processes
- work to improve the environment and facilities that support patients and those important to them whilst receiving end of life care within our hospitals.



Staff with the purple butterfly trolley, which provides resources for patients at the end of life and those important to them.

Our partners

We will work collaboratively with our system partners to deliver focused improvements and promote equitable access to palliative and end of life care.

To achieve this, we will continue to:

- work collaboratively with specialist palliative care and end of life care leads across the North West London Acute Provider Collaborative (NWL APC) to deliver once for North West London (NWL) solutions
- maintain good working relationships with local hospices and community specialist palliative care providers through joint working, education and regular meetings
- collaborate with digital and business intelligence teams across north west London regarding shared record systems and joint data dashboards.

By 2028, we plan to:

- work collaboratively with providers and commissioners across the NWL ICS to design co-ordinated palliative and end of life care services to meet the needs of the local population
- work collaboratively with the NWL APC to promote equitable access to specialist palliative and end of life care services in our hospitals
- improve access to palliative and end of life care for locally identified under-served populations by better understanding the barriers people face and working with our partners to overcome them.

You can find more information and contact us on our website,
www.imperial.nhs.uk/end-of-life-care

Staff: search for 'end of life care' on the intranet.

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