

Report of the Chair of the Health Overview and Scrutiny Committee

**Scrutiny Review – End of Life Care Review – ‘The Use & Effectiveness of DNACPR<sup>1</sup> Forms’**

**Summary**

1. This report sets out the recommendations arising from the end of Life Care Scrutiny Review. A copy of the full final report is at **Appendix 1** to this report and Councillor Funnell, the Chair of the Health Overview and Scrutiny Committee will be in attendance at the March Cabinet meeting to present the report.
2. Cabinet are asked to consider the recommendations arising from this review.

**Background to the Review**

3. Over the course of several meetings in 2011 discussions were had around undertaking a review on End of Life Care issues. It was quickly identified that this would be an enormous topic to review in its entirety and it was decided that it would be better to narrow the scope to something more manageable. This led to a workshop being held in August 2011 between the Health Overview and Scrutiny Committee and various key health partners who subsequently agreed the specific focus as *The Use and Effectiveness of DNACPR Forms*; with the overall ambition for the review being:

*To ensure that patients wishes and instructions are acted upon by health professionals and carers at the end of life, especially in terms of ensuring that instructions in relation to information on DNACPR forms is up to date and adhered to when required.*

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<sup>1</sup> Do Not Attempt Cardiopulmonary Resuscitation

4. Over a series of informal meetings the Committee gathered the evidence set out in **Appendix 1** and its associated annexes. This led to the following recommendations being made:

**Recommendation 1** – that key health partners, namely York Teaching Hospital NHS Foundation Trust, Yorkshire Ambulance Service, Independent Care Group and York GPs, led and co-ordinated by the Vale of York Clinical Commissioning Group look at ways of better publicising the existence of DNACPR forms and in doing this they make use of the wealth of experience and knowledge that already exists within voluntary organisations such as the Carer’s Forum’ and LINks (soon to be HealthWatch) to assist them with holding public events.

**Recommendation 2** - That key health partners namely York Teaching Hospital NHS Foundation Trust, Yorkshire Ambulance Service, Independent Care Group, York GPs and the Out of Hours (OOH)Service led and co-ordinated by the Vale of York Clinical Commissioning Group review whether the redesigned handover forms for the OOH Service GPs have improved the sharing of information around end of life care wishes (including DNACPR forms) and explore whether there are further improvements that can be made in relation to information sharing.

**Recommendation 3** – That key health partners ensure that there are appropriate co-ordination arrangements in place to ensure that patients can discuss their end of life care wishes and those wishes are enacted. The Neighbourhood Care Teams should play a pivotal role in responding to this recommendation, in particular in terms of identifying patients most at risk of health problems and looking at ways of talking to patients about their End of Life Care needs, including DNACPR orders.

**Recommendation 4** – That the Multi-Agency Workforce Development Group within the city be asked to consider how they can support all care homes within the city to achieve this.

**Recommendation 5** – That once a DNACPR form is in place:

- i. there is a known protocol setting out who will undertake the review of the form and when
- ii. the review date should be clearly stated on the front of the form
- iii. there are processes in place within key health partners’ internal policies to identify which forms are due for review and how these will be undertaken
- iv. it is ensured that the completion of planned reviews is monitored.

## **Consultation**

5. The Committee consulted with a wide range of key health partners during the course of this review and further details of these are set out within **Appendix 1** to this report.

## **Options**

6. Having considered the final report at **Appendix 1** and its associated annexes, Cabinet may choose to amend and/or approve or reject the recommendations arising from this review as set out in **paragraph 4** of this report.

## **Analysis**

7. Analysis of the evidence gathered is contained within the body and the analysis sections of the full final report at **Appendix 1** to this report.

## **Council Plan 2011-15**

8. This review is linked with the 'protecting vulnerable people' element of the Council Plan 2011-2015; specifically the theme of 'safeguarding adults and promoting independence'. Two of the key outcomes of this theme is 'more people will live for longer in their own homes' and 'there will be a focus on independence and greater choice and control over their lives for vulnerable people'.

## **Implications**

9. Implications are set out within the full final report at **Appendix 1** to this report.

## **Risk Management**

10. In compliance with the Council's risk management strategy there are no high risks associated with the recommendations within this report. However if no action is taken then end of life care may not be as effectively planned as it could be and this will increase risks in respect of finances within the health care system.

## **Recommendations**

11. The Health Overview and Scrutiny Committee ask the Cabinet to:
  - (i). Note the contents of the final report attached

(ii). Consider the recommendations as shown at **Paragraph 4** of this cover report

Reason: To fully inform the Cabinet of the outcome of this scrutiny review.

## Contact Details

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Report  
Approved



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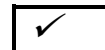
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Wards Affected:

All



**For further information please contact the author of the report**

### Background Papers:

Listed in Appendix 1

### Annexes

**Appendix 1**      Final report & associated annexes