Dear colleague

Welcome to the May GGC Palliative Care MCN which is now the first of 2016 following the unfortunate cancellation of the February meeting. As usual I have tried to put together a brief resume of current issues. Much of this is simply what was in February’s letter. I have used the same structure as before covering both GGC and National issues. The GGC section includes updates from the GGC Palliative Care Action Plan and is thus subdivided into the various Standing and Action sub groups. I have simply listed the different sub groups and their leads. Much of the necessary information is now published on our web site and so the letter is quite short.

**GGC Issues**

**Reorganisation of NHS GGC NHS Acute Services**

As I am sure you are all aware Palliative Care now reports through the Clyde Sector. The Regional component of Palliative Care remains organisationaly unchanged.

**Lead Clinician for Palliative Care**

This post remains unfilled.

**Macmillan Lead Nurse Palliative Care**

I am delighted to welcome Claire O’Neill to her first MCN meeting in her new role as Macmillan Lead Nurse Palliative Care. Claire was a Nurse Consultant in Palliative Care at the Beatson, West of Scotland Cancer Centre prior to taking up this post. She will bring a wealth of knowledge, skills and experience and will be a huge asset to Palliative Care across GGC. Anne Harkness has confirmed that the Macmillan Lead Nurse for Palliative Care will now be a representative on the MCN.

**GGC Palliative Care workforce**

Further good news! Two new consultants in Palliative Medicine, Fiona Finlay and Emma Dymond, have been appointed to work across QEUH and BWOSCC. Emma, who starts on 16th May, recently covered Libby Ferguson’s maternity locum at Marie Curie Glasgow and Fiona, who has already been working as a locum consultant at QEUH and BWOSCC, commences her new post in early June.

**GGC Palliative Care Action Plan**

Again, I must extend my thanks again to all of those involved and in particular to those who have taken lead roles within the groups.

**MCN / Sub group process**

As the GGC Palliative Care MCN is the strategic planning body for palliative care it is important that it ensures that the various Standing and Action sub groups have identified and are working on the key issues in palliative care in GGC. Therefore, I would like the MCN representatives to review the [sub group reports](http://www.palliativecareggc.org.uk/wp-content/uploads/2016/05/MCN_SubGroups_Constituency_Updates_May2016.pdf) and check that the areas being worked on are all appropriate and relevant. In addition, I would ask MCN representatives to raise any particular areas that they feel are currently absent so that they can be considered by the relevant sub group.

**Clerical Support**

At the November MCN meeting there was some discussion around clerical support for the sub groups as clearly those involved have very limited time. Several avenues were to be explored and I hope there will be a further update on progress at the MCN meeting.

**Sub group membership**

This is intended to be fluid. Part of the reporting template includes membership updates. Any changes will be reflected on the GGC Palliative Care website.

**Sub group reporting template**

Work is still underway to produce an on line web form for reporting purposes. This would clearly be a more efficient process. I had hoped that this would be available for this MCN but as you will all be aware due to technical problems, revolving round the use of Internet Explorer 8, this was not possible. I am hopeful that the web form will be operational by August.

**Standing Sub Groups**

* Communications – Jacquie Lindsay
* HI&T – Joanne Freel
* Therapeutics – Elayne Harris
* Web development – Paul Corrigan
* Acute – Jane Edgecombe
* Education / Training – Shirley Byron / Fiona Wylie

**Action Sub Groups**

* Heritage / Legacy / Bereavement – Jackie Britton
* Patient / Carer Involvement – Claire Donaghy / Paul Corrigan
* Care in the Latter Stages of Life – Fiona Wylie
* Care Homes – Kevin Fellows
* Non-Malignant Palliative Care – Karen Hogg / Maire O’Riordan
* Out of Hours Period – Katie Clark
* Power of Attorney – Andrew Strachan
* Queen Elizabeth University Hospital – Alistair McKeown
* Recognition – Euan Paterson

**Themed Input at MCN meeting**

At the November MCN there was a very well received presentation from Karen Allen, Paediatric Practice Development Nurse. This was followed by a very useful Q/A session. It was suggested that a Special Interest slot would be a helpful standing item at the MCN meetings.

I am delighted to welcome Julia Gray, Consultant in Old Age Psychiatry in East Renfrewshire HSCP to the May MCN meeting. Julia has had a long and enduring interest in Palliative Care and indeed was chair of the South Sector Palliative Care Group back in the days when there were 3 Glasgow sectors, no Palliative Care MCN and indeed when Clyde was part of a different Health Board!

Following some further preliminary enquiries other possible topics include Patient Feedback, Palliative Care and Parkinson’s Disease and Palliative Care and Addictions. It would be helpful to discuss these suggestions and any other options at the MCN.

**National Issues (Scottish)**

**Strategic Framework for Action (SFA)**

The [Strategic Framework for Action, the Executive Summary and the supporting Technical document](http://www.gov.scot/Publications/2015/12/4053/downloads) were published on 18th December 15. Looking at the 10 Commitments I have to say that I feel a large amount of the key professional issues are contained within the first two of these though commitment 6 probably lies at the very heart of the matter. Some also feel slightly aspirational! Clearly the critical aspect will now be the formation of the implementation group (Commitment 10).

Craig White and Tim Warren, National Clinical Lead and Policy Lead for Palliative Care respectively, are currently reviewing the work programs of stakeholder groups to ensure that they are best placed to support the implementation of the Strategic Framework for Action on Palliative and End of Life Care.

I would like to suggest that we devote some time at the MCN to the SFA and its ‘fit’ with GG&C’s Palliative Care Action Plan.

**National Advisory Group (NAG)**

The NAG last met shortly before the publication of the SFA. The [draft minutes](http://www.palliativecareggc.org.uk/wp-content/uploads/2016/02/CWPEOLC-NAG-46-15-Draft-Minutes-3rd-December.pdf) of this meeting are available but as the NAG meeting scheduled for April 7th was subsequently cancelled these are still not ratified. There has not been any mention of reorganising the cancelled meeting and so the next scheduled meeting remains the 14th of July. The NAG members have been informed that the composition of the group is to change.

**Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) & Children and Yong People’s Acute Deterioration Management (CYPADM) Scottish Policies**

The Scottish Government ‘light touch review’ is now, as far as I am aware, complete. However, the UK wide work on the Emergency Care and Treatment Plan has led to a delay in the publication of this work.

**NHSS Scotland Palliative Care Guidelines App**

I have carried this forward from previous letters. Sixteen of the Scottish Palliative Care Guidelines are now available in app format providing offline access. The app can be downloaded from the [Android](https://play.google.com/store/apps/details?id=com.scet.palliativecare) or [iPhone](https://appsto.re/gb/jXnE5.i) stores or via [mobile knowledge](http://www.knowledge.scot.nhs.uk/home/tools-and-apps/mobile-knowledge/guidelines.aspx) on the Knowledge Network.

The app is the product of a collaborative partnership between the [Scottish Centre for Enabling Technologies](http://www.uws.ac.uk/research/research-institutes/computing/scet/) at the University of West of Scotland, SHOW NHS National Services Scotland and the Chairs of the guideline steering group Dr. David Gray and Dr. Paul Baughan.  I would be very grateful if this information could be shared as widely as possible. Healthcare Improvement Scotland are also keen to receive feedback at hcis.pallcareguidelines@nhs.net

**National Issues (UK)**

**Emergency Care and Treatment Plan (ECTP)**

As you are aware there is UK national work looking at the production of an Emergency Care and Treatment Plan. The ECTP will record a summary of treatments that would or would not be felt to have benefit and also which treatments the individual would or would not wish to receive. The consultation period concluded at the end of February.

**MCN meeting dates**

The two remaining MCN meeting dates of 2016 are:

25th August (Thu)

22nd November (Tue)

I look forward to seeing you all on the 18th.

Euan Paterson

Chair, GGC Palliative Care MCN