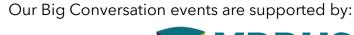
Hospice Data and Commissioning

Big Conversation Wednesday 26th February 2025



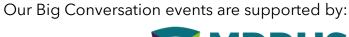




Welcome and introductions

Annette Alcock, Director of Programmes Hospice UK







Big Conversations

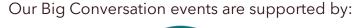
The Big Conversations series comprises webinars, workshops, and roundtables that enable our members to:

- learn more about key issues
- share knowledge and experience to inform our work
- discuss problems and solutions with peers
- get practical guidance to move work forward

We invite you to continue engaging with us in the months ahead, as we explore a range of important topics.









Components of commissioning

Collaborations offer efficiencies, speak as one voice, provide population level solutions

Data and evidence show outcomes, service quality, population reach and system impact

Understand power structures and funding flows; build and influence key **relationships**

Describe services in a system context, and understand NHS priorities and terminology



Hospice UK's role in commissioning



• Influencing and **disseminating** national guidance: commissioning frameworks, operating guidance, agenda for change uplifts



 Sharing local collaboration and commissioning experience: roundtables, regional meetings, hospice support



 Collating and utilising hospice data: finance, service activity and demographics, clinical and care workforce; next step to describe the service models



Provider collaborations and alliances

Hospice Collaborations:

single voice, economies of scale

to engage
to coordinate
to integrate
to influence

PEoLC Alliances:

single contract, joined up service delivery

Hospice Collaboration Leads Network

VCSE Partnerships:

sector voice, system funding



The hospice data framework

Population data

- <u>PopNAT tool</u> (including hospice catchments)
- Future and unmet needs calculations

Service activity data

- Activity and patient demographic survey
- Patient safety measures

Workforce data

Workforce survey

Financial data

- Hospice accounts and financial benchmarking
- Financial sustainability index

Outcomes / impact data

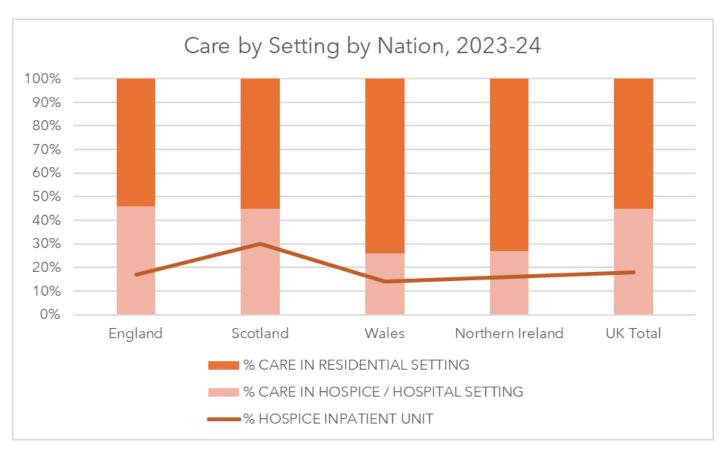
- PCOM360 tool (patient outcome measures)
- Making Data Count (trends and outliers)

Hospice Data
Analysts Network



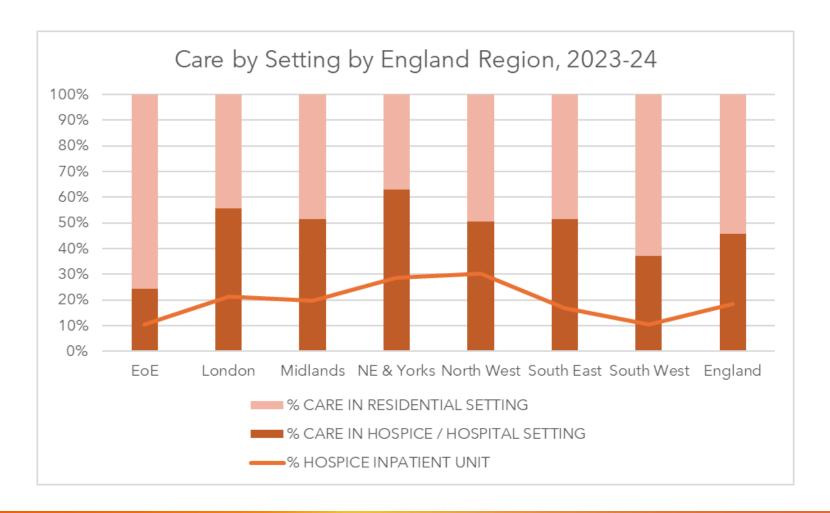
Hospice reach and care setting Hospice UK Hospice Activity and Demographic Survey, 2023-24 82% response rate

- UK hospices provide palliative and end of life care to 310,000 people annually
- UK hospices provide direct support services to 92,000 loved ones and carers annually
- 18 percent of total activity is delivered in a hospice inpatient unit



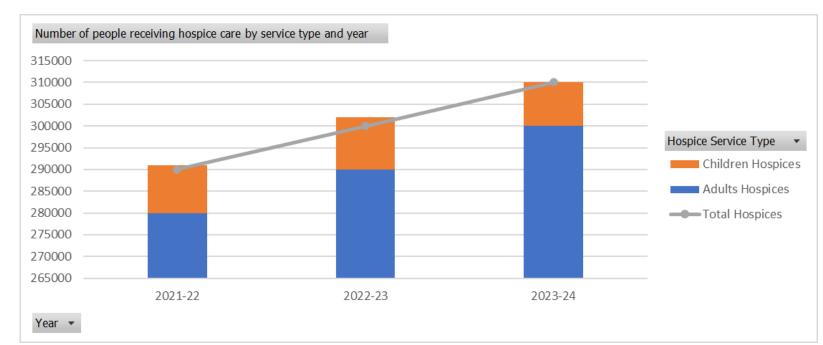


English region hospice care setting





Hospice reach trends



- Continued steady increase in patients cared for by adult hospices
- Slight decrease in children cared for by children's hospices
- Improved reporting of carers services for loved ones

	Adults	Children	Total
Year	Hospices	Hospices	Hospices
2021-22	280,000	11,000	290,000
2022-23	290,000	12,000	300,000
2023-24	300,000	10,000	310,000

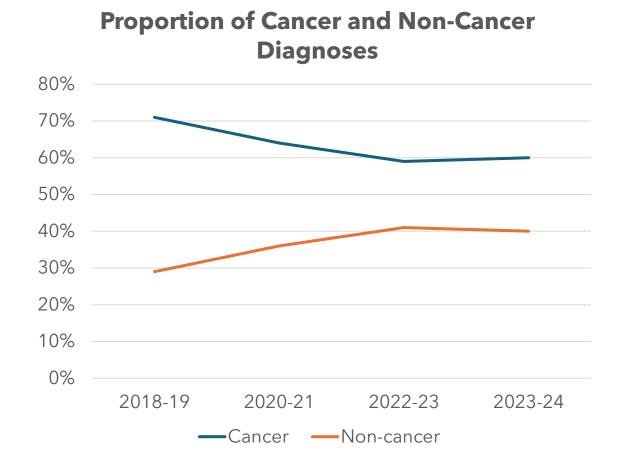


Diagnoses trends

The proportion of cancer and noncancer patients in hospices remains 60% cancer and 40% non-cancer

For children's hospices, neurological conditions account for 54% of those being cared for

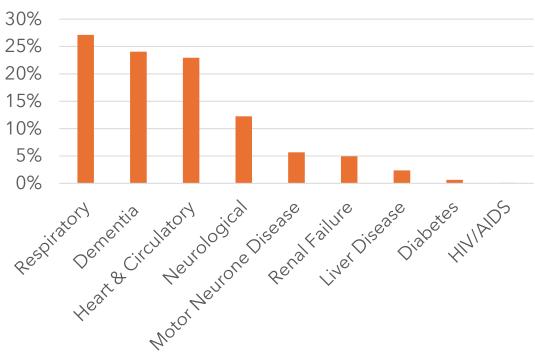
In adult's hospices, there is a slight increase in the percentage of those with heart failure and MND



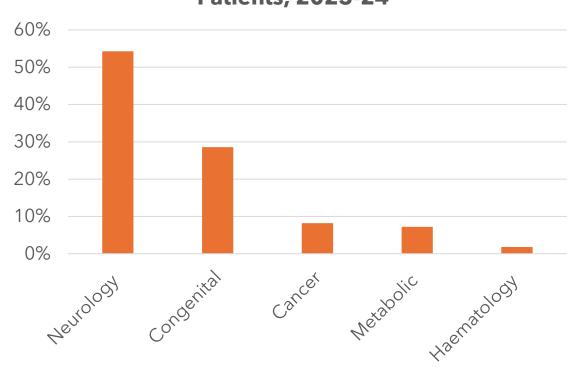


Diagnoses breakdowns, 2023-24

Non-Cancer Diagnoses for Adult Hospice Patients, 2023-24



Diagnoses for Children's Hospice Patients, 2023-24



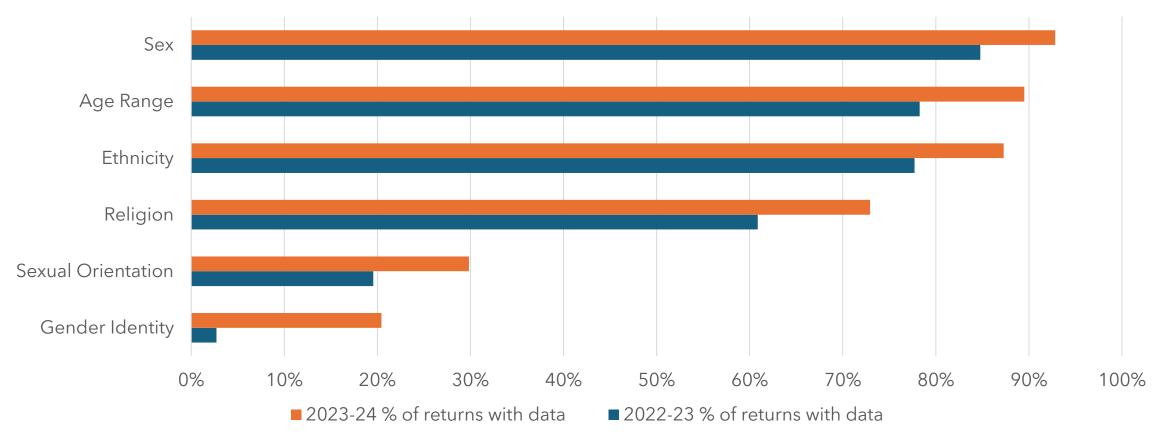
N=88





Demographic data completeness trend







Hospice clinical and care staff Hospice UK Hospice Workforce Survey, 2023 73% response rate

In 2023, a head count of **16,000 clinical and care staff** were employed by hospices in the UK

Of which:

12,200 Nurses and healthcare assistants

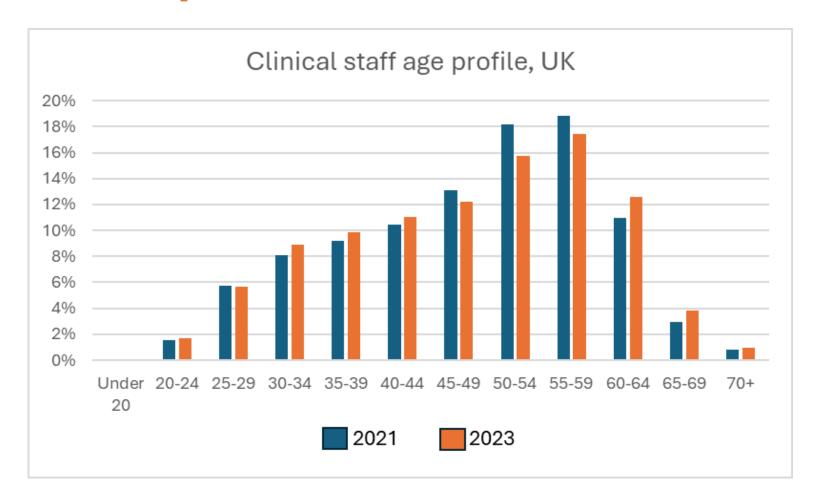
950 Doctors

2,850 Other health and care professionals



Demographics of hospice staff

- 91 percent of the clinical and care workforce is female
- 35 percent of clinical and care staff are over 55 years of age
- In Wales, this is 45 percent
- 5 percent decrease in 45-60 year-olds in two years, so who will provide experienced supervision?

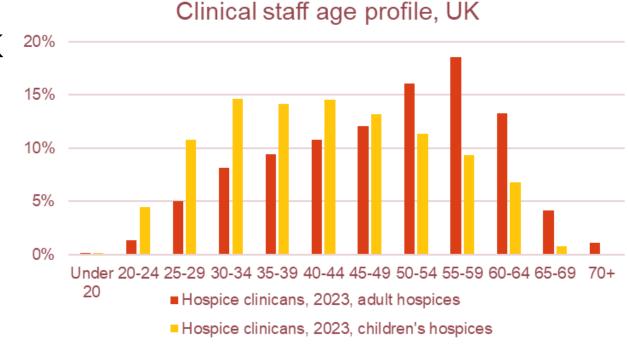




Demographics of children's hospice staff

Different profile in adult and children's hospice workforce in the UK

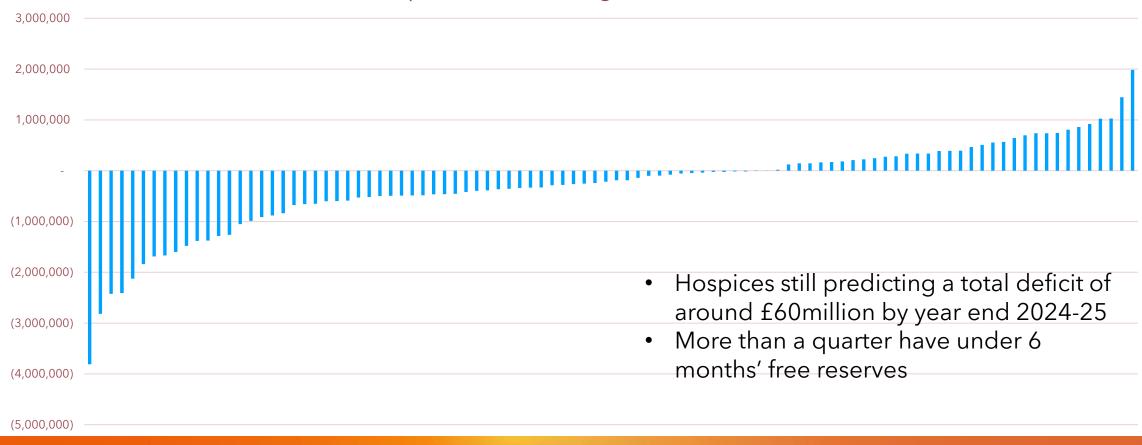
- 77 percent of children's hospice staff are female compared to 92 percent of adult hospice staff
- 17 percent of children's hospice staff are over 55 years of age compared to 37 percent of adult hospice staff





Hospice deficits / surplus 2024-25 Q3 Financial Benchmarking Network

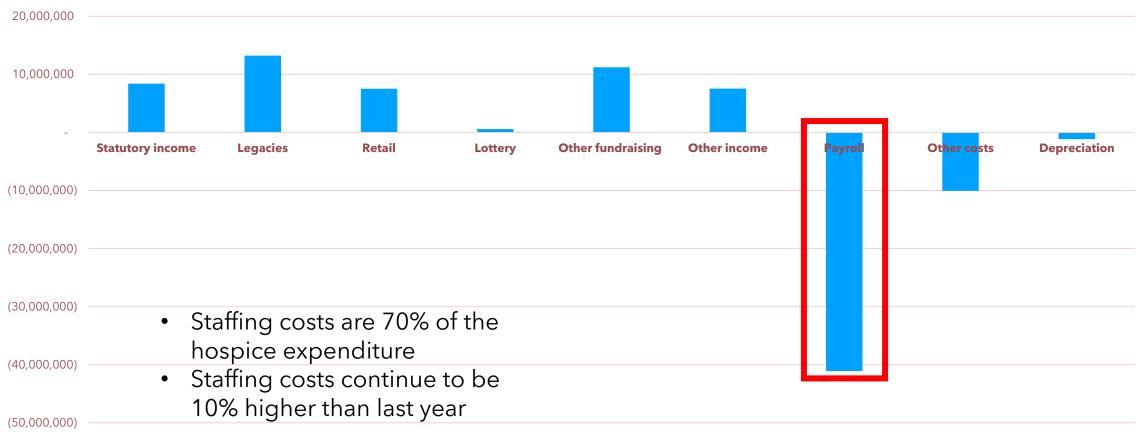
Deficit / Surplus (before changes in investment values)





Cost pressures 2024-25 Q3







What can we do with this data?

Population data

denominator for comparison: catchment area or prevalence

equity of access by: need and patient characteristics and geography and diagnosis

Workforce data

map functions to need

recruit and upskill for required capabilities

attractive T&Cs and succession planning

Service data

meeting patient needs: responsive, equitable, coordinated

clinically safe: regulatory compliance

financially sustainable: funding models



Hospice UK's role influencing decision-makers



 Curating the data on need (PopNAT, complexity) and collating the hospice care data (activity and demographics, workforce, cost)



• **Speaking as one voice**, campaigning and complementing the local messages (funding, workforce, charity sector)



Engaging and influencing with Parliament, Ministers,
 Departments of Health and national NHS bodies



Showing the impact of hospice care

Across the UK, you can look at the number of people receiving hospice care and the number of registered deaths. However, you cannot use the two figures to get a percentage as they do not directly correlate.

	People receiving	Registered deaths in
Country	hospice care 2023-24	2023
England	260,000	544,054
Scotland	19,000	63,445
Wales	12,000	37,309
NI	11,000	17,254



Population Needs Assessment Tool (PopNAT)

England Care System Level Needs

View data covering Population, Health, Deprivation, Demographics, and Care Network by pre-defined Health areas within England

England Childrens Needs

View data covering Population, Demographics, and the Care Network, presented to support Childrens Hospices within England

England Local Needs

View data covering Population, Dementia, and Demographics for a custom study area within England



Population Needs Assessment Tool

Select a Level of Geography

Data is available to view at multiple levels of geogra set of areas first and the most granular ones last.

Hospice Catchment (Adults)

Catchment areas for Hospices serving Adults

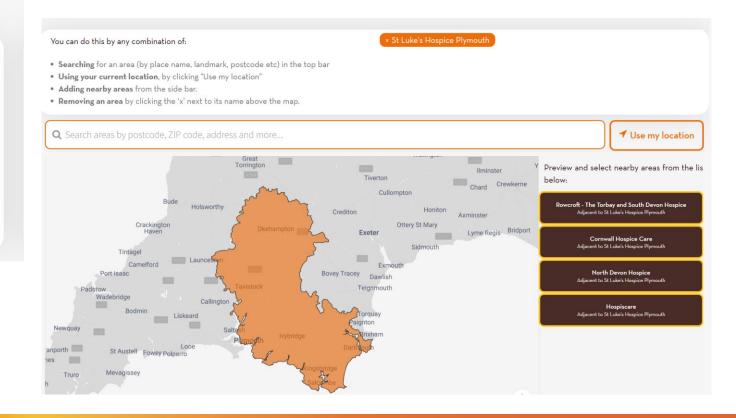
This unique geography set, created by HospiceUK based on information supplied by Hospices, is constructed through the merging lower tier local authorities.

Note: This dashboard only shows a data for a single UK nation, so catchments which extend beyond that area may have incomplete or inaccurate data

Integrated Care Board

Integrated Care Boards (ICBs), as part of the Integrated Care Systems (ICSs), are organisations focused on bringing NHS providers together to improve population health and establish shared strategic priorities.

This level of geography is important for population needs assessments as ICBs are the primary entity involved in planning, commissioning and related decision making that affects NHS and local care providers in England.





Population Needs Assessment Tool

Select a Level of Geography

Only one level of geography is available for selected topic and has been pre-selected for you.

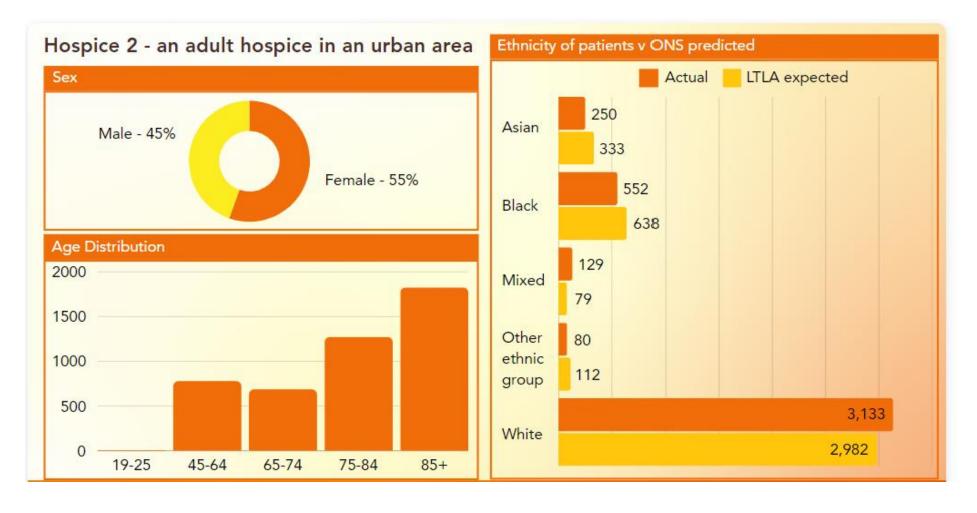
Neighbourhood 2021

This level of geography is comprised of Middle Super Output Areas (MSOAs) in Wales. They are used to report data for small areas and have a minimum population of 5000 people per MSOA. They allow for more precisely targeted needs assessment.





Comparing local patient demographics

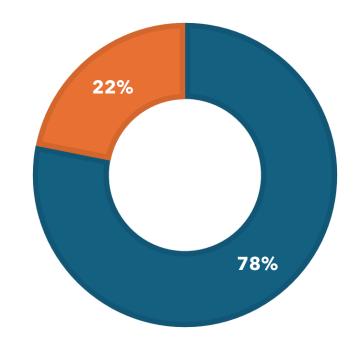




Using PCOMs

Use of Outcome Measures by Adult Hospices, 2023-24





Hospices continue to use Patient Centred Outcome Measures (PCOMs) in the same proportion as last year

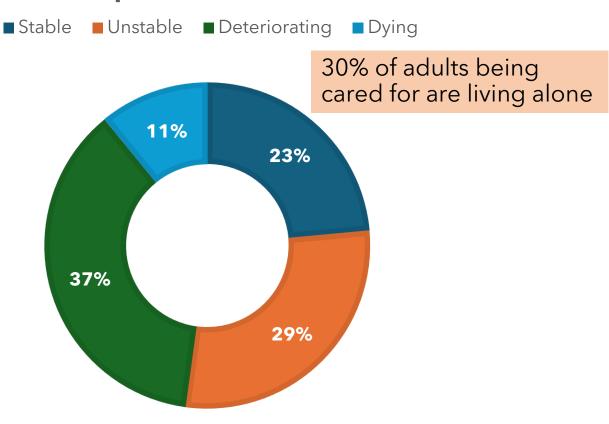
PCOMs are the OACC suite measures:

- Phase of Illness
- AKPS (Australia-modified Karnofsky Performance Status)
- IPOS (Integrated Palliative Care Outcome Scale)
- CPOS for children (launched at the Big Conversation in February 2025)
- Barthel



Understanding complexity and currencies

Phase of Illness when entering hospice care, 2023-24



Last Year of Life Currency Model

Currency Unit	Phase of Illness	AKPS Functional Status
CAE01A	Stable	High
CAE01B	Stable	Medium
CAE01C	Stable	Low
CAE02A	Unstable	High
CAE02B	Unstable	Medium
CAE02C	Unstable	Low
CAE03A	Deteriorating	High
CAE03B	Deteriorating	Medium
CAE03C	Deteriorating	Low
CAE04Z	Dying	-
CAE05Z	Deceased	-



Evidencing media and engagement work

Financial benchmarking service cuts survey





Fifth of UK hospices cutting services amid funding crisis, finds report

The Telegraph

Why Labour's NHS pay rise could be catastrophic for hospices

Matching lucrative public sector salaries will cost struggling facilities £66m

Agenda for Change then National Insurance uplift calculations

End-of-life care to be 'stripped back' if NHS can't fund hospices hit by tax hike

Rachel Reeves's plan to raise employer NI will worsen 'urgent funding crisis' faced by hospices - who rely mostly on charity



MailOnline





staff costs

Hundreds of hospice beds shut due to a lack of funding - charity

Hospices are largely funded by donations, fundraising and income from charity shops (I) (I) (I) (I)

Activity survey bed usage data





Building the funding and commissioning ask



• Stabilising the hospice sector: one-off government payment asks were

based on deficits, currently based on pay parity

o £4m in Wales; now £3m recurring

£5m recurring in Scotland
£100m capital funding in England



Hospices in England to receive £100m funding boost



 System-wide commissioning and accountability: there are variously, across the nations, elements of PEoLC strategies, commissioning frameworks and service specifications, but no up-to-date funding mechanisms



 Sustainable hospice statutory funding: converging on full costs of agreed core and specialist service models. However, most hospice services are essential to PEoLC and to delivery of care out of hospital, so systems need to look across all statutory funding streams as well as looking to hospices to bring charitable funding. The Herald



Scottish News Health Education HQ Transport Investigations UK News Hospice CEOs warn that sector is 'struggling enormously'

Describing the hospice offer

- To negotiate sustainable funding, we need to know:
 - o How much our sector spends on PEoLC services
 - o How much our sector provides in PEoLC services
- But we also need to describe:
 - What our sector provides across the remit of PEoLC service models descriptions
 - o How much should be funded by the NHS which services and to what standard
- And package this nationally for use locally:
 - o How to commission / contract with hospices advising on guidance
 - o What are the minimum standards required supporting a framework



Elements of a funding model

Know COST

How much we spend

Know REACH

Who we are seeing

Know ACTIVITY

How much we deliver

Describe SERVICE MODELS

What we provide

- consistent terminology
- service brochure
- acuity & urgency

Revisit POPULATION NEED

How much is needed

- head of population
- prevalence
- patient complexity
- MDT staffing

Calculate ADMISSIONS AVOIDANCE

How it adds value

- clinical methodology
- case studies

Arrive at OPPORTUNITY COST?

How much we save the NHS hospitals



Hospice service models

by acuity (green, amber, red) and urgency (planned, reactive)

living well outpatient / day hospital inhospice inpatient beds reach services care specialist palliative care non-specialist specialist bereavement community hospice at home / virtual wards visits / visits / rapid support domiciliary care response planned planned hospital reactive compassionate avoidance single point of access communities reactive hospital discharge



Next steps

- Keep influencing and using the national guidance and frameworks
- Share the service models and case studies
- Decide on admissions avoidance methodology (Sue Ryder? Birmingham?)
- Prepare for the currencies
- Join the networks, complete the surveys, speak a similar language
- Service Activity and Demographic as well Workforce survey planned for April to June 2025:
 - o same time period as accounts 2024-25 and snapshot workforce on 31st March 2025
 - o demographic survey to include referral, discharge and length of stay questions
 - workforce survey to include whole workforce and pay bands, recruitment and leaver questions



Q&A



Feedback Survey



Please consider sparing a few minutes to answer this survey, so that we can continue to improve future Big Conversations events:

https://forms.office.com/e/gEPvsJc6p9



Jobs Board March 2025 Sale

All job listings on our Jobs Board are half price from 1st March to 31st March.

Check out our packages starting from just £74 for a standard listing.









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Thank you



