Seacroft Dying well in the Community – July 2023 Project Update

The project

The Seacroft Dying Well in the Community Project was established to develop new approaches to providing care and support at the end of life in the community within a defined locality. This would allow an approach focused on the particular needs of that community as well as developing approaches that could be adopted and tested. Potentially, ideas could then be rolled out in other localities across Leeds.

The project consists of a core group consisting of health and third sector staff who work within the Seacroft and surrounding areas Local Care Partnership (LCP). The group has met four times at the LS14 Trust in Seacroft.

In June and July, the project also held two facilitated workshops to agree the next steps for the project and in particular to discuss the more clinically focused aspects of the work. The second workshop held at Chapel FM included wider stakeholders who have an interest in the project.

The formation of the Seacroft Core Group has raised awareness of each other's roles as well as of the community assets, training offers and services that are available locally, some of which, staff involved were not aware of previously.

In July, LS14 Trust arranged for some core group members to meet with a group of Seacroft residents to discuss what was important for them: We talked about

- care and support at the end of life
- forward planning for death (wills, wishes etc.,)
- talking about death and dying.

The key messages from this were that people wanted more dialogue about death and dying; better information about support with planning and access to support after a loved one had died.

Drawing on all of the above, the project is now at a point where it can start to deliver the tasks that the group has identified as a priority (see below). This means that, for now, the project will continue to support and focus on the work in Seacroft and surrounding areas and look at options for the Morley LCP area later in the year.

The work on the clinical pathway (developing consistent and high-quality care co-ordination and case management at end of life in Seacroft)

- Clinical leadership from Seacroft Primary Care Network for this work area has been identified
- Task group established for this workstream

Next steps

- Gold Standard framework case management meetings – need to ensure consistent, best practice approach across Seacroft (including the need to review cases after the death). Identify the 'as is' arrangements in Seacroft for multi-disciplinary case management of people at end of life and living with frailty)

- Advance Care Planning – incorporate 'What matters to Me' conversation into all planning in the PCN
- Document and define the care co-ordination role for those at End of Life so that there is shared understanding of what the role involves to provide consistency across partners
- Clarify the care co-ordination lead responsibility for those at end of life
- Explore potential for unregistered community workforce taking on a care co-ordination role for those at End of Life in Seacroft

The work on Seacroft community and information

- A task group to develop the 'Dying Well in Seacroft' Information offer has been convened
- The focus has been agreed as the information will be for the public as well as professionals and will cover planning; people at end of life; support and advice after the death
- Areas of information will include: care and support; spiritual; emotional; affordability; funeral planning; gardening; pets; housing; bereavement support etc
- We will link in with city-wide work on End of Life information

Next steps

- Initially focus on the information offer before looking at training for staff working in the Seacroft Community and death/community café proposals in more detail.

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