# RE: Sheffield Teaching Hospitals NHS Foundation Trust – Response to Healthwatch Sheffield Report on Palliative and End of Life Care

Dear colleagues,

We would like to thank Healthwatch Sheffield for producing such a valuable and sensitive report into people's experiences of palliative and end of life care across our city. We are especially grateful to the individuals, carers and families who contributed, and who gave their time and insight in what were clearly very personal and, for some, difficult circumstances.

We acknowledge and welcome both the areas of good practice highlighted in the report, and the clear challenges that need to be addressed. The report is a timely and powerful reminder of the importance of getting this area of care right for every patient, every time.

We recognise that some patients and families felt well supported, especially where care was coordinated and delivered by our specialist palliative care teams. However, we also acknowledge that there were times when patients and families felt communication was unclear, support inconsistent, or discharge poorly managed. Feedback about a lack of culturally responsive care, privacy, or clarity around the dying process is deeply concerning.

As a Trust, we are sorry for these experiences. We are committed to doing better and have already begun a wide-ranging improvement programme that directly responds to these themes.

#### **Sheffield Teaching Hospitals End of Life Care Improvement Work**

We have reviewed the Healthwatch findings alongside our internal "Learning from Deaths" programme, staff feedback, and carer experiences. This is shaping our Trust-wide response and is already influencing practice on the ground.

Our improvement work includes:

# Earlier Identification and Planning

Supporting staff to identify patients approaching end of life earlier and engage in timely care planning discussions.

Improving Communication: Rolling out new training to help staff talk openly
and compassionately with patients and families about dying, planning ahead,
and bereavement. We are developing digital stories from the experience of
patients and those that matter most to them and using this powerful message
in education of staff.

# Advance Care Planning

Expanding the use of ReSPECT (Recommended Summary Plan for Emergency Crae and Treatment) and personalised care planning tools across all relevant clinical areas.

# Support for Families and Carers

Enhancing communication and recognition of unpaid carers; introducing updated bereavement booklets tailored to each local area.

# Equity and Inclusion

Working with community partners and the STH chaplaincy team to improve how we meet the needs of people from a range of cultural, faith and ethnic backgrounds.

- Hospital Discharge: Working with community partners to make sure people
  who want to die at home can do so safely and with the right support in place.
  We are continually improving access to medication at home through 'pink
  card' pre-emptive prescribing.
- Staff Confidence and Culture: Supporting staff to feel confident, supported, and skilled in delivering end of life care across all wards—not just specialist teams. We are developing a network of end-of-life care champions who will disseminate information and education to staff in their area.

#### Information Access

Developing a central intranet hub for staff to access end of life care guidance, resources and updates.

# Alignment with the Care 2035 Vision

This programme also supports the delivery of our wider organisational strategy, Care 2035, which commits to:

- Putting people and their families at the centre of care decisions,
- Addressing health inequalities and supporting diverse communities,
- Supporting and developing a compassionate and skilled workforce,
- Promoting joined up, digitally supported pathways of care across the system.

#### **Next Steps**

In the next 12 months, we are focused on:

- Embedding improvement work across all wards and clinical settings,
- Strengthening coordination between hospital, community and voluntary sector services,
- Expanding staff training in communication and symptom management,
- Improving the consistency of discharge planning for patients at end of life,

 Continuing to involve patients, carers, and experts by experience in shaping our work.

We are working closely with our partners in the South Yorkshire Integrated Care Board, local hospices, and primary and social care teams to deliver a coordinated and equitable approach to palliative and end of life care.

#### Conclusion

We are committed to acting on the learning from this report. Everyone at Sheffield Teaching Hospitals involved in end of life care is determined to improve the experience of patients and those important to them; both now and in the future.

We would welcome the opportunity to continue working alongside Healthwatch Sheffield, our community partners, and colleagues across the system to improve this essential area of care.