

Hospice UK briefing on the Health and Social Care Committee report into palliative care

On Tuesday 24th March, the Health and Social Care Committee published its [report into palliative care](#).

The committee commissioned the report following the increase in public attention towards palliative and end of life care due to the Terminally Ill Adults (End of Life) Bill. The report follows [recommendations](#) from the Committee's Expert Panel and [an evidence session](#) with Minister Stephen Kinnock.

The government will respond to the report within 60 days.

Modern Service Framework

Since the expert panel concluded its work, the Modern Service Framework has been announced. The Committee shares concerns that it may come too late or lack accountability, particularly following evidence from Hospice UK. The Minister said ICBs would be directly accountable to the department.

The Committee concludes that while the MSF is welcome, the number of issues it needs to resolve are a challenge in and of itself. It is also not clear how the MSF compares to existing documents such as the Ambitions Framework and NHS National Standards. The Committee's recommendations focus on ensuring there is accountability from ICBs and DHSC to meet the framework, and say arrangements for this should be set out in the MSF interim report in the Spring.

Hospices

The Committee specifically referenced hospices throughout, but also included a section setting out the funding challenges hospices are facing and the important role of hospices, especially in supporting the government's shift.

The report highlights that the current funding model is not fit for purpose and has created stark regional disparities due to a reliance on charitable funding. It draws on Hospice UK research to underline the need for reform, supporting what the committee called '*an integral part of palliative and end of life care provision at home and in the community*'.

The Committee recommends that the Government moves towards sustainable and predictable models of funding, including financing running costs.

Other recommendations

The Committee highlights commissioning, data, workforce, and bereavement as other key areas of concern.

On commissioning, the Committee recommends that the Government includes standards within the MSF for the provision of children's and young people's services, and to support the transition to adult services. This is alongside the government doing more to support 24/7 access, with specific guidelines and requirements in the MSF.

The Government's lack of data on the provision and delivery of palliative and end of life care is seen as impeding its ability to develop and deliver services. A 90% target for the percentage of individuals in the last year of life documented on the Palliative Care Register is recommended, along with the Government reporting annually on progress. Stronger data-sharing methods and culture between the NHS, social care, voluntary organisations, and provider organisations are recommended, including ensuring that access to the future single patient record is shared.

The Committee acknowledges that much of palliative and end of life care is delivered through generalist services. It praises the workforce but highlights that training is not always available for generalist services when dealing with palliative and end of life care cases. Shortages within the specialist workforce are identified as putting services in an unsustainable position. The NHS 10 Year Workforce Plan is highlighted as a way to solve these challenges by ensuring clear pathways for training and increasing capacity for specialist palliative care. The Committee also recommends that the plan include end of life care as a core skill for health and social care staff.

Bereavement and pre-bereavement support are recognised in the report as essential. Yet it also notes that access is not equitable, and gaps have appeared despite the Ambitions Framework. The Committee expresses a clear preference for holding ICBs to account on the delivery of bereavement services now, given the clear expectations already laid out in guidance. They ask the department to outline how it will monitor ICB progress and what steps will be taken with those not delivering an acceptable level of service.

If you have any questions please email policy@hospiceuk.org.