

Major palliative care funding review published

July 4 2011

A team from the Cicely Saunders Institute at King's College London, partnered with South West Public Health Observatory and Whole Systems Partnership, has made a major contribution to the Palliative Care Funding Review for England, published today (1 July).

The review has recommended to Government the introduction of the first ever per-patient funding structure for <u>palliative care</u> in England which could save the NHS up to £180 million a year.

The review has also found that of the 457,000 people a year who need palliative care, around 92,000 have none at all, and those that do have access to variable packages of care.

If the report's recommendations are implemented, this could also lead to 60,000 fewer hospital deaths by 2021, palliative care for everyone who needs it, and better outcomes for all patients at the end of life. King's contribution to the review specifically outlined the benefit to patients and families of palliative care assessment and intervention, and the cost-effectiveness of this approach for the NHS. The researchers proposed a potential per-patient funding system, based on the complexity of individual patient needs (a 'complexity profile'), which could be developed to help reduce current inequities.

Professor Irene Higginson, from the Cicely Saunders Institute at King's, said: 'We very much welcome the recommendation for a funding system based on individual needs and a complexity profile for each patient. It's a



great step in the right direction. Next, we need to test these profiles rigorously before implementation, linking them to patient outcomes so that we know they are making a positive difference for people with advanced progressive illness and their families.'

Dr Fliss Murtagh, also from King's and lead of the project team to the report, said: 'The proposals of the review team - especially the recommendation for funding based on patient and family needs - have real potential to address some of the existing inequities in the system. However, the challenge will be in the implementation of these recommendations. With our partners, we undertook the scientific work behind this review, and are glad to see some of our findings adopted in the final report. However, the evidence and proposals do need further development if they are to be successful in improving quality and equity of care.'

Speaking at the launch event, Thomas Hughes-Hallett, Chair of the review, said: 'No other country in the world has introduced such a system for both adults and children, so the step is both a bold and necessary one.

'The recommendations of the review have three key aims:

• To create a fair and transparent funding system which can be achieved by developing an NHS palliative care tariff which is based on the needs of patients;

• To provide better outcomes for patients that is supported by a funding system which incentivises good quality outcomes for patients, irrespective of both time and setting; and

• To provide better value for the NHS by incentivising the commissioning of integrated care packages and stimulating the development of community services.'



Professor Sir Alan Craft, co-author of the report, added: 'The Government must act on the recommendations contained in the review because evidence shows us that incentivising the provision of palliative care leads to better outcomes for patients, supports choice and is the most cost effective way of using NHS resources. We need to remove the barriers within the current system to enable this to happen.'

More information: The final report follows an extensive consultation process with the palliative care sector and more information on the work of the review can be found on its website <u>www.palliativecarefunding.org.uk</u>

Provided by King's College London

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