

North West Coast Strategic Clinical Network

Cheshire & Merseyside Palliative & End of Life Care Education Strategy Group

Terms of Reference

Overview

The strategy group reports to the Palliative and End of Life Care Network Oversight and Delivery Group for Cheshire & Merseyside through the strategy group Chair. The Oversight and Delivery Group sits within the Strategic Clinical Network as part of NHS England.

Purpose

To operate as a collaborative group to influence education and training on palliative and end of life delivered in Cheshire & Merseyside.

Terms of Reference

1. Agree a strategy for the use of funds, such as MPET money, across the area
2. Monitor and evaluate funded education initiatives
3. Promote and influence consistency and equity in Palliative and End of Life Care Education across Cheshire & Merseyside
4. Provide a link through the chair to the Lancs & South Cumbria Education Strategy Group forming a robust pan North West Coast relationship.

Role & Responsibilities for Strategy Group Chair (appendix A)

- The role of the chair of the strategy group is to develop the work plan in conjunction with the membership of the strategy group and agree the work plan and its outcomes with the network Clinical Lead and Oversight and Delivery Group.
- The chair will liaise with Lancs & South Cumbria Palliative and End of Life Care Clinical Network Education Strategy Group, as part of the North West Coast SCN
- The chair will ensure information is fed to and from the Oversight and Delivery Group
- Tenure of the chair is 3 years, whereupon a new chair will be appointed or the current chair remains with the agreement of the group.

Membership

The Education Strategy Group membership should function as the strategic and delivery lead for education and training on palliative and end of life care across Cheshire & Merseyside. Each locality needs to be represented on the Education Strategy Group. If a locality does not have an overall lead able to represent all major providers of education in palliative and end of life care in their locality, more than one representative is needed.

Role of SPC Locality Representative

The member of the Education Strategy Group should be endorsed and supported by their locality to make strategic decisions on education and training for palliative and end of life care. The representative should have a nominated deputy who is also able to represent their locality. The

locality representative must liaise with their locality group to enable full representation and appropriate decisions and dissemination of information.

Responsibility of SPC Locality Representative

- Actively contribute to the education and training strategy within the network
- Seek out locality education leads and disseminate strategic content
- Participate in developing work plan for approval by Palliative and End of Life Oversight and Delivery Group
- Take an active role in implementing the local education and training plan
- Attend the Network education strategy group meetings

Attendance and Quorate

Representatives should attend 75% of meetings and have named cover for their absence. Each locality needs to be represented for the meeting to be considered quorate.

Meeting Frequency

The group will meet 4 times per year within a month of the Palliative and End of Life Care Network Advisory Group meeting.

Accountability and Reporting

The Specialist Palliative Care Education Strategy Group is accountable to the Cheshire & Merseyside Palliative and End of Life Care Oversight and Delivery Group and will report to this 4 times per year via the Chair of the Group.

Palliative & End of Life Care Clinical Network

Role & Responsibilities for the Chairs of network group

- Pivotal to delivering on the outcomes for the network work programme is leadership engagement and influence through the chair of the group;
- Each network group will have a work plan which contributes to the delivery of the overarching PEOLCN work programme;
- The role of the chair of the sub group is to develop the work plan in conjunction with the membership of the group and agree the work plan and its outcomes with the PEOLCN Clinical Lead and Advisory Group/Programme Board.

Responsibilities of the role include:

- Providing leadership to the network group;
- To act as a champion for patients and their interests;
- Fostering through the group a culture of multi-professional engagement in the improvement of care across integrated pathways. This will include ensuring clinical colleagues are fully committed to the delivery of ambitious programmes of quality improvement and outcomes;
- To lead and oversee programmes of quality assurance such as clinical audit and benchmarking;
- Promote the systematic application of quality framework tools such as NICE Quality Standards, Quality Accounts, etc.;
- Representing the network group at quarterly PEOLCN advisory group/programme board meetings;
- Representing the network group at monthly delivery team meetings.

The position is appointed through a process of seeking expressions of interest and interview where necessary.

Support to the role includes administrative and management support from the core network team; personal development support determined and agreed on an individual basis; regular review with the PEOLCN Clinical Lead.