

# REFERENCE CENTRE DEVELOPMENT

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Supported by the Coordinating Centre at The University of Liverpool Palliative Care Unit

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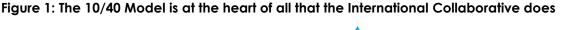
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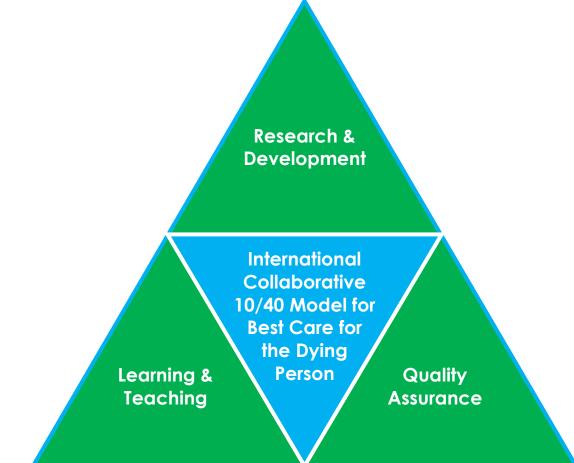
## **1. INTRODUCTION**

It is important that all professionals involved in the care and support of the dying person are competent, safe, confident and effective in delivering a high standard of care. To support this aim, the International Collaborative for Best Care for the Dying Person has developed a framework for the delivery of care known as the 10/40 Model.

The 10/40 Model is based on the **ten** key principles and **forty** outcomes of care that are at the heart of all the Collaborative does. Its Ten-Step Implementation Model provides a platform from which Collaborative members can develop their own robust documentation and practice to suit their local context and governance arrangements, with the assurance that it is based on a valid, reliable and transferable international evidence base in care for the dying, developed by the Collaborative over many years. The Model can be viewed online at <u>www.bestcareforthedying.org/10-40-Model</u>.

For successful implementation, it is essential that the 10/40 Model is supported by education, research and development, quality assurance and a robust implementation and dissemination process to ensure translation of best care to the bedside. To facilitate this support, the International Collaborative has established the role of Reference Centres as an important part of its continuous quality improvement programme.





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## 2. WHAT IS AN INTERNATIONAL COLLABORATIVE REFERENCE CENTRE?

An International Collaborative Reference Centre provides support to health and social care services in a given region or country to develop, implement, and formally embed the 10/40 Model within the core business and quality governance structure of their individual organisations. It enhances the assistance already available from the International Collaborative Coordinating Centre by providing knowledge and advice based on direct experience of implementing the 10/40 Model within the cultural norms, national policies, and healthcare economy of a specific country. A Reference Centre also maintains oversight of the activity undertaken to underpin the sustainability of the 10/40 Model by the participating organisations in its locality.

#### 2.1. Criteria

The opportunity to establish a Collaborative Reference Centre is available to organisations meeting the following criteria:

- The organisation is formally registered with the International Collaborative, having paid the appropriate annual membership fee.
- The proposed lead personnel for the Reference Centre have attended an International Collaborative Foundation Course.
- The organisation:
  - a) currently supports 10 or more centres/organisations registered with the International Collaborative
    - OR
  - b) has run a one-day awareness course on a care plan congruent with the International 10/40 Model for Best Care for the Dying Person and the work of the International Collaborative for ten centres/organisations that may wish to join the International Collaborative.

Those centres or organisations who wish to join the International Collaborative must attend an International Collaborative Foundation Course, either by commissioning one from the International Collaborative coordinating centre or by attending the Summer School.

#### 2.2. Functions

International Collaborative Reference Centres provide six main functions.

- 1. To maintain, develop, and enhance the clinical documentation for their given region/country to ensure congruence with the International Collaborative 10/40 Model.
- 2. To provide guidance, co-ordination, and support to the organisations across their given region or country to ensure the robust implementation and sustainability of the International Collaborative 10/40 Model.
- 3. To provide further education, training and support as requested by the organisations across

their given region or country engaged in the International Collaborative 10/40 Model.

- 4. To collate implementation information from the organisations across their given region/country and submit an annual report to the International Executive Committee as described in Section 2.3 below.
- 5. To support organisations across their given region or country with the development of a quality assurance programme in line with health services' existing quality governance and risk framework.
- 6. To contribute the learning from the implementation and training of the organisations across their defined region or country back in to the International Collaborative for the furtherance of the International Collaborative 10/40 Model.

#### 2.3. Annual reporting responsibilities

An International Collaborative Reference Centre will be expected to produce an Annual Report to the Executive Committee of the International Collaborative. The Annual Report will include:-

- Progress against the Action Plan
- The number of organisations it is supporting
- Documentation of any organisations that have received complaints/raised concerns
- Research and development activity
- Learning and teaching activity
- Quality assurance activity
- Key objectives for the year ahead.

To facilitate the collation of this report, the Reference Centre will require the organisations in its locality to provide the following information in relation to the 10/40 Model:

- The benefits and improvements in care following the implementation, including information on how this has been evaluated.
- A summary of the education and training provided to support implementation and sustainability
- An overview of research activity
- Key objectives for the following year
- Concerns or complaints from organisations regarding the International Collaborative 10/40 Model
- Concerns or complaints from relatives/families/carers regarding the use of the Care for the Dying Person documentation
- Suggestions for improvements or further development of the Care for the Dying Person documentation

## 3. ESTABLISHING AN INTERNATIONAL COLLABORATIVE REFERENCE CENTRE

Achieving Reference Centre status positions an organisation at the forefront of quality improvement activity in care for the dying at a regional and/or national level, and the opportunity is available to any organisation meeting the criteria set out in Section 2.1 above.

#### 3.1. The Reference Centre application process

An organisation wishing to become a Collaborative Reference Centre must submit a completed application form to the International Collaborative Coordinating Centre. This requires:

- submission of a clinical document for use at the bedside to be matched for congruence with the International Collaborative 10/40 Model, unless such has already been approved by the Executive Committee.
- A commitment from the proposed Lead Facilitator to share learning by participating in International Collaborative Facilitator Network.
- A 500 word action plan to establish an International Collaborative Reference Centre.
- A letter of support from the organisation's Executive Board and the Lead Clinician in palliative and end of life care.

Support and mentorship for the development of action plans is available from the International Collaborative Coordinating Centre.

#### 3.2. Acknowledgement of participation

Following submission of its Annual Report, the Reference Centre will receive a letter of acknowledgement from the Executive Committee and a certificate in recognition of its work and contribution to the 10/40 Model and the wider International Collaborative vision.

In turn, the Reference Centre will provide a letter acknowledging participation to each organisation in its locality.

## 4. SUPPORTING DOCUMENTS

International Collaborative Reference Centre Application Form

#### The International Collaborative 10/40 Model for Best Care for the Dying Person

#### The International Collaborative Facilitator Network

"Specialist expertise and general challenge meet here in the dimension of our common humanity."

Dame Cicely Saunders