



Hertfordshire and
West Essex Integrated
Care System



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Integrated Care Board

Culture change strategy for people living with frailty and nearing the end of their life

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Working together
for a healthier future

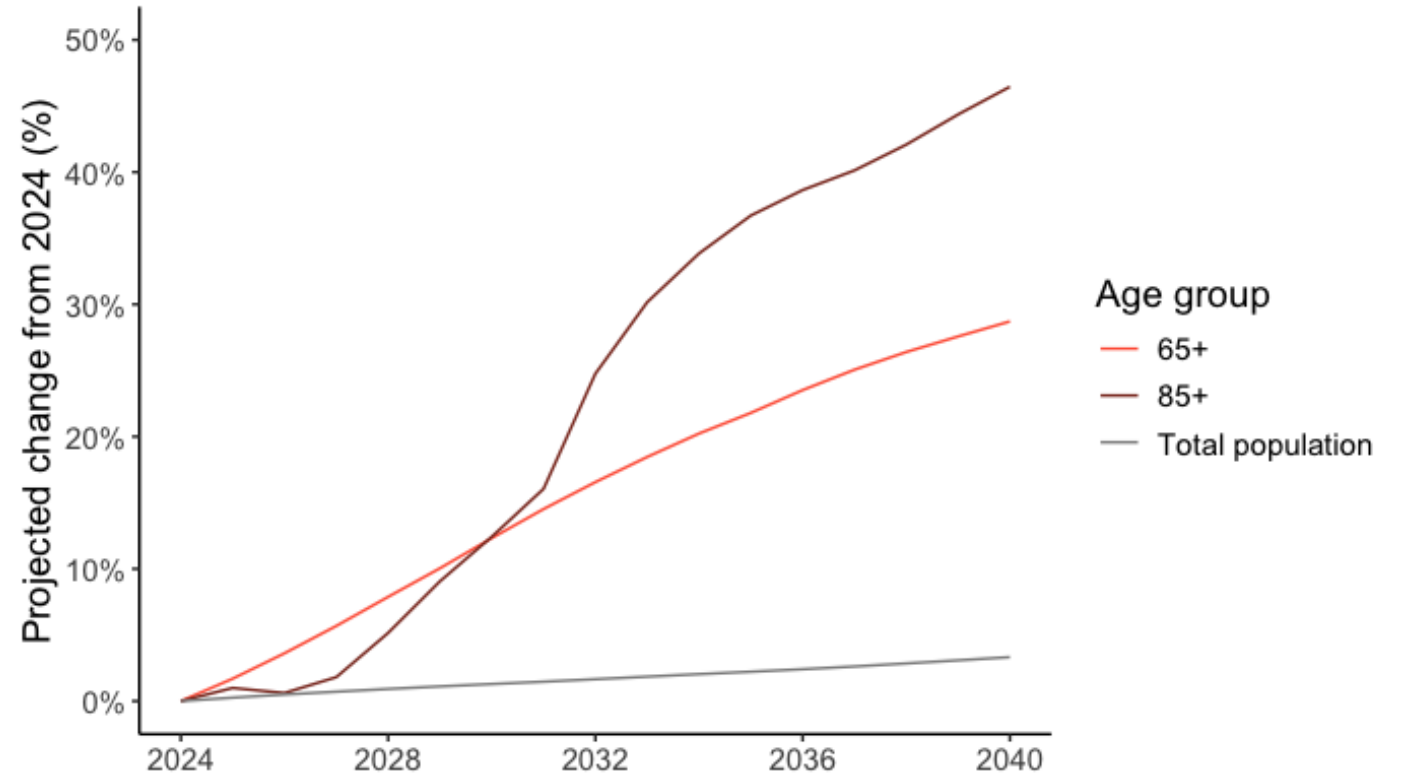


Why do we need to change our culture

By 2040, the population aged over 65 is predicted to increase by 29% and the population aged over 85 by 46% whilst the total population will only increase by 3% compared with 2024.

Most teams and groups across the ICS will therefore have to provide more care to more people living with frailty than ever before.

This will place huge strain on our teams and healthcare resources. To prepare our teams for this challenge we need to speed up the process of culture change



A New Dawn for the NHS

A Manifesto for Putting Personalised Care at the Centre



Nearly half (45%) of people reported that they had received health advice or treatment recommendations that were unsuitable for them in the last two years.

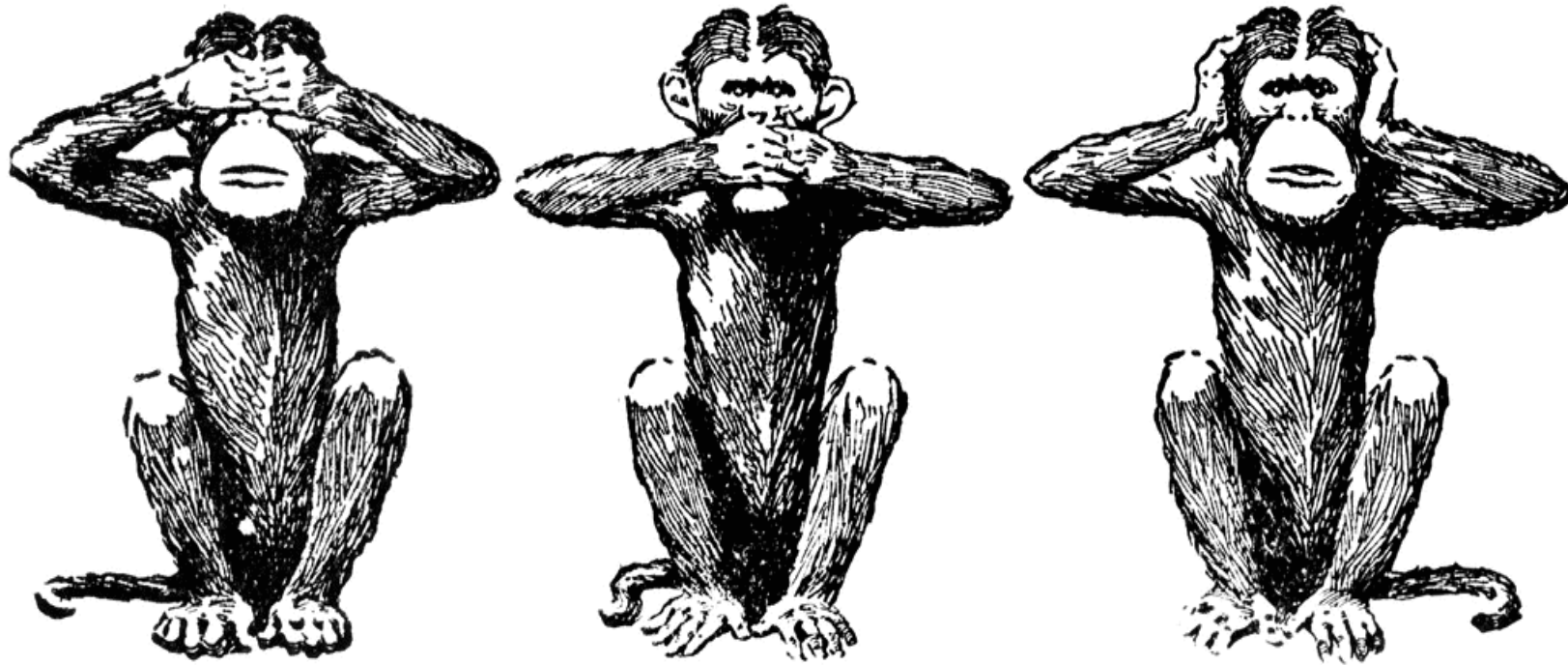
Almost a third (32%) said their condition worsened due to this avoidable unsuitable advice, increasing to 40% for those with long-term conditions and nearly half (45%) for those with multiple conditions.

A lack of personalised care led to:

- Worsening conditions for a third of people who said the advice they received was unsuitable.
- A quarter of people stopping following the advice or treatment early.
- 3 in 10 people requiring additional GP visits, with a 2 in 10 requiring a visit to A&E.
- This rose to more than 6 in 10 for those with multiple health conditions.

Every professional's responsibility not to ignore & not to act too late

Failing to identify those who may be nearing their end of life can create avoidable added distress/detriment for the person and also for their loved ones



"How people die remains in the memory of those who live on"

Dame Cecily Saunders Founder of the Hospice movement

What is Frailty and End of Life? Why is it important in Personalised Care?

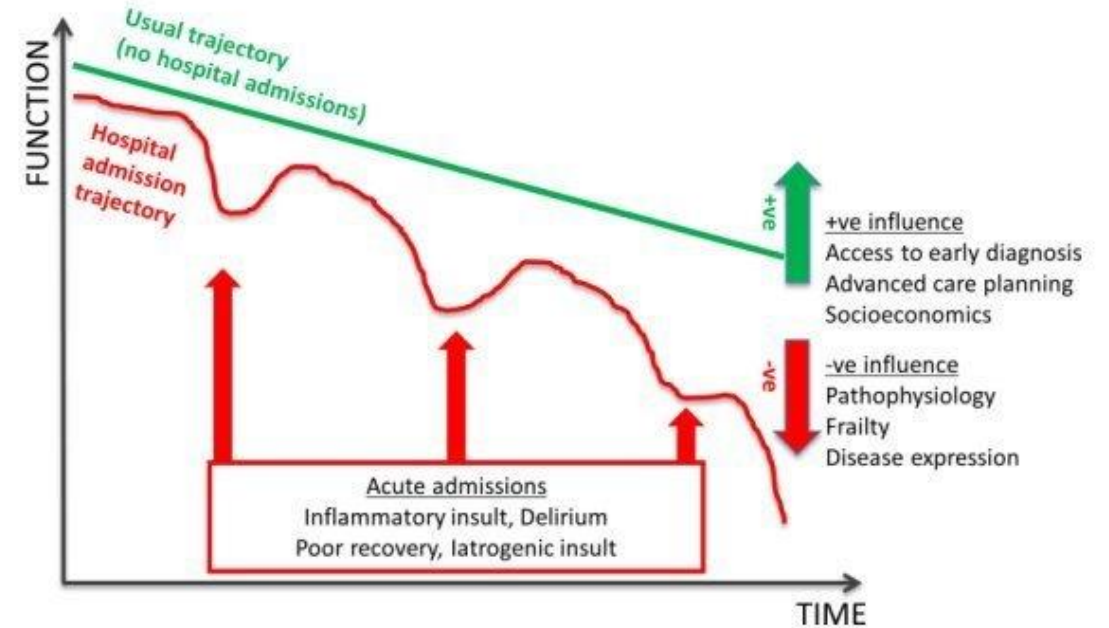
“Frailty is when someone’s overall health becomes weaker, making it harder for them to bounce back from illness, injury, or stress. It’s not just about age—it’s about how well their body and mind can cope with everyday challenges.”

Not just age: Frailty isn’t just about being old. Some older people are very robust, while others may be frail.

Whole-person view: It affects physical strength, mental sharpness, and energy levels.

Increased risk: Frail people are more likely to fall, get sick, or struggle with recovery

Can change: Frailty can get better or worse depending on support, care, and lifestyle



“Just because we can do something (intervention/action) That doesn't necessarily mean to say we always should for each & every person”

Due to the loss in built in reserves with rising frailty, we may commonly see overall shift towards harm from clinical interventions, medications, procedures

TO REDUCE AVOIDABLE HARMS NEEDS A SHIFT IN OUR UNDERSTANDING, CULTURE AND CLINICAL PRACTICE

Culture Shift to Personalisation, Shared Decision Making and Anticipatory Care



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What role can you play

Be aware of peoples wishes

Do you know if your client / resident has an advance care plan or documentation about their wishes

Be aware of patients wanting to 'start the conversation'

Or start the conversation with them

Be aware of the prevention opportunities

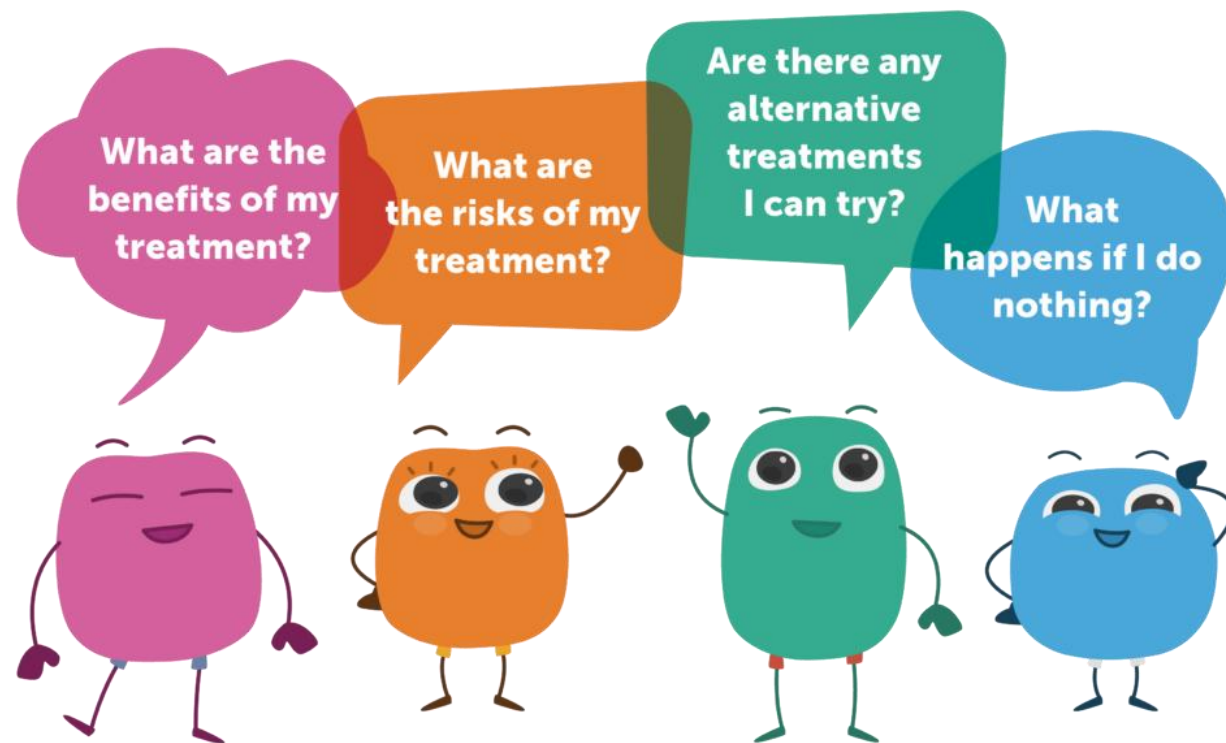
Encourage your resident / client / relatives to ask. 'Its ok to ask'

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**Are your
medicines
working for
you?**



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