



Royal College of General Practitioners & Marie Curie Daffodil Standards

General practitioners play a key role in caring for people with advanced serious illness and those who are nearing the end of their life. But providing that care at a consistently high level of quality can often be challenging.

The RCGP and Marie Curie have developed the Daffodil Standards: a set of voluntary standards for GPs, to help them assess and improve the end of life care they provide.

Developed over the last two years in consultation with GPs, the standards are self-assessed and each standard includes support resources. Practices who adopt the standards will be able to display the Daffodil Mark, highlighting their commitment to excellent end of life care, and support for people with advanced serious illness.

Practices across the UK have already piloted the standards. Their feedback has been invaluable in making sure the standards are effective and achievable for practices.

The Daffodil Standards will be formally launched in Spring 2019, but you can express an interest in adopting them now using the reply slip in this leaflet.

“GPs and our teams often care for a patient and their family, from when they are born to the end of their lives. It’s a relationship that is unique in medicine, and is precious.

Making sure that patients and their families feel supported at the end of life is an essential part of what we do, and in many ways, one of the most privileged aspects of our role.

I’m delighted the College has partnered with Marie Curie to develop a set of voluntary ‘Daffodil Standards’ for practices to support them to deliver palliative and end of life care, so that our patients are receive the highest possible quality care at a time when they are often most vulnerable.”

Helen Stokes Lampard,
Chair of the Royal College
of GPs



“We all know the hugely important role GPs and other practice staff play in the care and support people get at the end of their lives - this will only increase in the coming years.

We have been working with the RCGP for over five years, and I am very pleased to see our work with the College resulting in this important initiative. These new Standards offer the opportunity to improve patient experience and to do what I know all GPs want to do: improve the quality of care provided.

I do hope you will sign up to hear more about the standards as they are rolled out next year.”

Jane Collins,
CEO Marie Curie



Why is this initiative so important?

Over 500,000 people die in the UK every year – one person every minute. This number is set to grow and, combined with an ageing population living with complex, life-limiting conditions, the number of people who will need palliative and end of life care will continue to increase. We also know there's much more that can be done to improve people's end of life experiences – one in four people don't get the care and support they need at the end of their life.

The RCGP & Marie Curie national 2015 survey confirmed that 97% of GPs felt general practice plays a key role in the delivery of care to people approaching the end of life, and their families.

End of life priorities

General practice is doing extremely skilled and sensitive work, not just in end of life health care, but also in their understanding of the complex issues facing patients and those important to them, navigating the legal framework and offering bereavement support for family and carers.

It's therefore vital that practices are clear about their strategy to care for people affected by advanced serious illness and end of life care.

We know people's top priorities at end of life are to be free from pain and to be with the people they love. They would prefer to be cared for and die in familiar surroundings such as their home or care home. People's experiences are better when their needs are identified early and their care is properly co-ordinated, with those important to them and regard for their personal care preferences.

Quality care

At present, 25% of NHS healthcare spend is on people in the last year of life, with most still dying in hospitals. This is putting increasing pressure on our health and care system and is unsustainable in the long term.

Great end of life care in primary care can make a huge difference, but it can be difficult to always provide that care consistently to every patient. The Daffodil Standards use quality improvement methodology to help practices achieve this.

What are the Daffodil Standards

The new RCGP & Marie Curie Daffodil Standards: UK General Practice Core Standards for Advanced Serious Illness and End of Life Care are a blend of quality statements, evidence-based tools, exercises and quality improvement steps. They help practices place continuous learning and quality improvement at the heart of end of life care.

GP practices which voluntarily sign up to the Daffodil Standards are making a commitment to undertake a programme of continual improvement. The standards don't replace any existing standards, formal accreditations or training programmes.

Developed with a wide range of experts and GP practices, the standards are based on evidence. They outline eight core domains in which GP practices should aim for the highest possible standards to ensure compassionate, safe and effective care. Each area includes free tools to help achieve step-by-step improvements.



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The eight core domains are:

- 1. Professional and competent staff**
- 2. Early identification**
- 3. Carer support - before and after death**
- 4. Seamless, planned, co-ordinated care**
- 5. Assessment of unique needs of the patient**
- 6. Quality care during the last days of life**
- 7. Care after death**
- 8. General practices being hubs within compassionate communities**

Ongoing improvement

Each year, your practice will set an ambition to make improvements in at least three of the eight core domains. Using the tools provided, practices will be able to assess their own progress as well as identify ways to improve further.

The aim is for GP practices to complete the full review cycle of the standards across each of the eight core domains within a three-year period.

Practices should share their commitment with their patients and discuss it with their Patient Participation Group, displaying information in the waiting room and on the practice website. This should help the practice gather feedback from patients and those important to them.

