



Submission from the Irish Hospice Foundation

The IHF welcome the opportunity to submit to the Independent Review Group established to conduct an impact analysis on the separation of private practice from the public acute hospital system.

The IHF submission on this topic will focus on the need for the private hospital system to ensure that they provide the holistic approach to palliative care as recommended by [Report of the National Advisory Committee on Palliative Care](#) and the recent [HSE 3 year Palliative Care Framework](#). The latter document recommends that that specialist palliative care services should be available to all patients in need, wherever they are, and whatever their disease.

Our submission draws attention to the equity issue that prevails for those patients in the private system who do not have access to palliative care, and we would recommend that future funding arrangements ensure that patients who are dying in private hospitals and their families have full access to palliative care service on a 24/7 basis.

The Irish Hospice Foundation was established in 1986. Our vision is that everyone can expect a good end to their life. Since our inception we are proud of the advancements made in the striving for the best care at end of life for all the people of Ireland.

All of us will be touched by death at some stage. No-one will escape the pain of loss, whether it is the passing of a parent, a brother or sister, a child or a close friend. Some experiences of death will be very good. But we know, from our work in all care settings, that more can be done to improve care at end of life. This is particularly true of the private hospital sector as they are increasing their remit in this area, and we estimate that of the 30,000 people who die in Ireland every year, 8% (2,400) of these deaths take place in private hospitals.

The Hospice Friendly Hospital (HFH) Programme is an initiative of the Irish Hospice Foundation. It seeks to ensure that end of life, palliative care and bereavement care are central to the everyday business of hospitals. Of the 46 hospitals that participate in the HFH there is an increasing number of private hospitals who engage in the HFH programme and networks, but to date their level of activity is limited.

Our work with private hospitals to date, which has included the provision of end of life resources and training in communication, training in communication on end of life matters (Final Journeys and Dealing with Bad News), helping them establish an end of life committee, and participation in the HFH Networks has given us some insight into the challenges that people who are dying (and their families) in private hospitals face; these are briefly highlighted below.

Specific Challenges private hospitals face in the provision of palliative care, end of life care and bereavement care

- Lack of access for patients to specialist expertise in palliative care
- Difficulties amongst staff when communicating difficult news relating to diagnosis and
- Challenges in offering bereavement support to the person or family
- Preparation for discharge home to die
- The treatment of the remains after death
- Lack of appropriate spiritual support
- Management and communication regarding post mortems

The IHF welcome the review that is taking place, and would request that these issues are considered when the working group is making its recommendations for the future funding mechanisms for private hospitals, particularly with regard to specialist services. We would be happy to provide more information on the HFH programme and background to the challenges outlined above.

Marie Lynch
IHF, Head of healthcare programmes
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