

Quality and continuity of End of Life care between home, nursing homes and district hospitals

**Ann Jackson, Judy Purkis, Carole Rudge
Gillian Hundt & Loraine Blaxter**

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Background to study

- **Nationally reported statistics (Dr. Foster) flagged up high mortality rate in one district hospital.**
- **Internal hospital audit revealed;**
 - **that 38% of deaths could potentially have received EOL care elsewhere.**
 - **31% (of all deaths) occurred within 48hrs of admission.**
- **Anecdotal evidence suggested that people were being transferred from the community into hospital for EOL care.**

Study Aims

- Map patient pathways for end of life care from home or nursing homes to A/E and on to admission
- Identify critical junctures of referral and care decision making and to work with key professionals and personnel to improve quality in end of life care and maintain choice at end of life.
- Learn from the experiences of key health and allied health professionals and relatives to improve end of life care
- Introduce/evaluate changes based on findings

Methodology

- **Identify deaths occurring within 48hrs following admission where acute hospital care was deemed not appropriate.**
- **Recruit a purposive sample of relatives (n=25) to explore the pathway of care and decision making.**
- **Interview identified key informants to explore the patient pathway from primary into secondary care.**
- **Undertake focus groups with those delivering EOL care in different settings.**

To date

- **Oct 2005 – Oct 2006 review records of all patients (n=292), dying within 48 hours of admission.**
- **All patients dying suddenly and unexpectedly excluded.**
- **Remaining notes (n=151) reviewed by clinicians to determine if hospital admission was ‘appropriate’**
- **Patients classified as ‘Inappropriate’ hospital admissions formed the study sample (n= 70)**

**Next of kin/carers (n=70) contacted by letter
6-12 months following bereavement.**

- 28 did not reply**
- 9 refused**
- 11 next of kin could not be traced**

22 participated in study.

**Semi structured taped interviews, at home,
using topic guide**

Key informants (n=14) interviewed

Initial findings and issues

High incidence of patients;

- admitted from nursing homes**
- coming from most deprived areas of the county**

- **32% of patients admitted were moved three times within 48 hours**
- **Protocols in community affecting delivery of care** (intravenous therapy, advance life directives)
- **Communication** (between services and relatives, choices, awareness)

Any Questions?

**THANK YOU FOR
LISTENING.**

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