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Abstract

Aim: To assess the documentation of hospital-based end-of-life care against components of NACEL and identify areas for improvement

The National Audit of Care at the End of Life (NACEL)(1) is a national comparative audit of the quality and outcomes of care experienced by the dying person and those important to them during the last admission leading to death in acute hospitals, community hospitals and mental health inpatient providers in England, Wales and Jersey.

Methods

This audit investigated the quality of end-of-life care for inpatients who were admitted and passed away on the surgical wards at Crosshouse Hospital between June – September 2022.

23 patients identified → 2 case notes unable to be retrieved → 21 case notes included

This included review of DNAR and TEP forms and patient notes for evidence of the following principles guided by NACEL outcomes (1):

- Escalation planning (TEP/DNAR forms)
- Recognition of the dying patient
- Communication with the dying patient
- Communication with family
- Anticipatory care prescribing
- Involvement of the palliative care team

Limitations

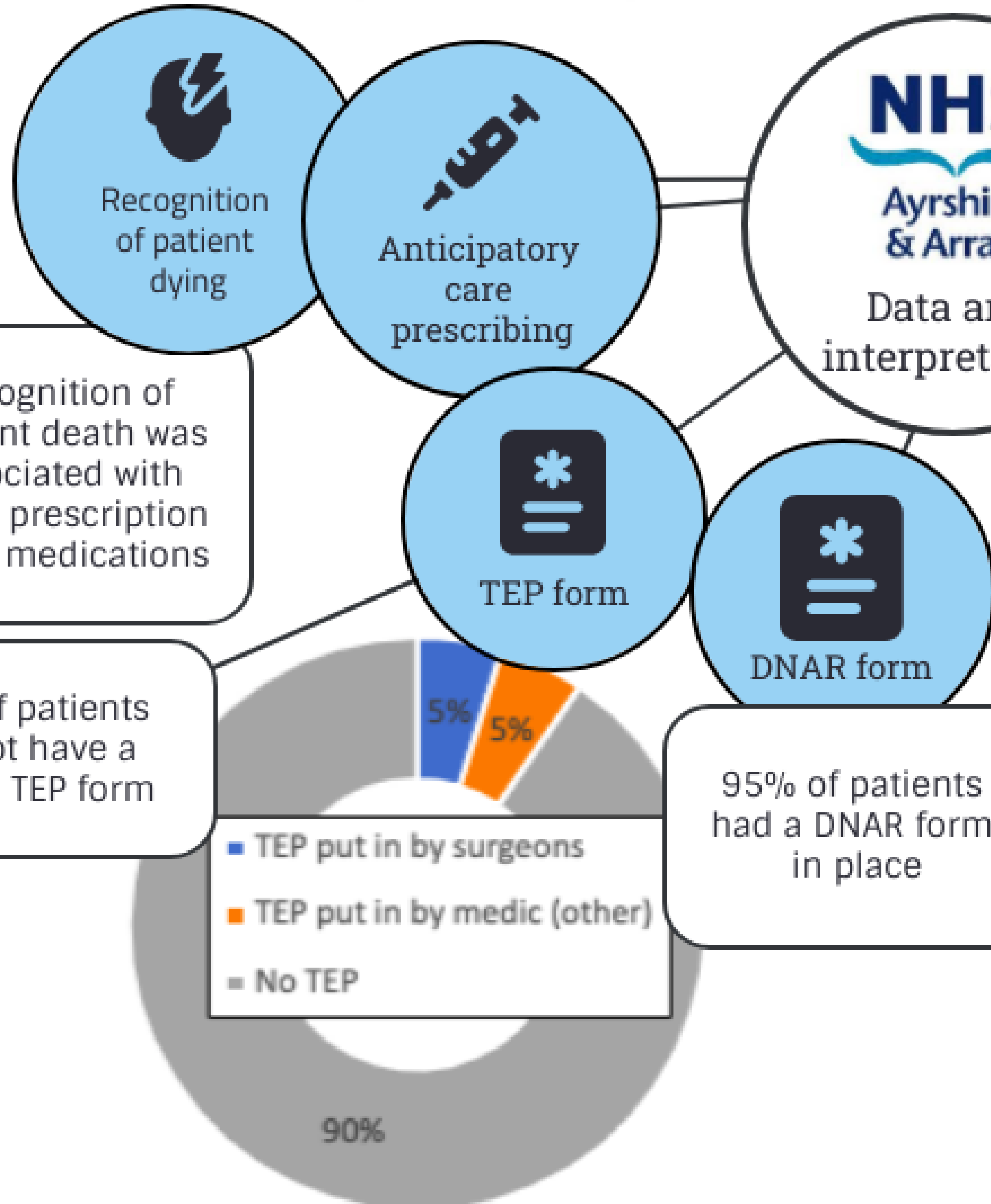
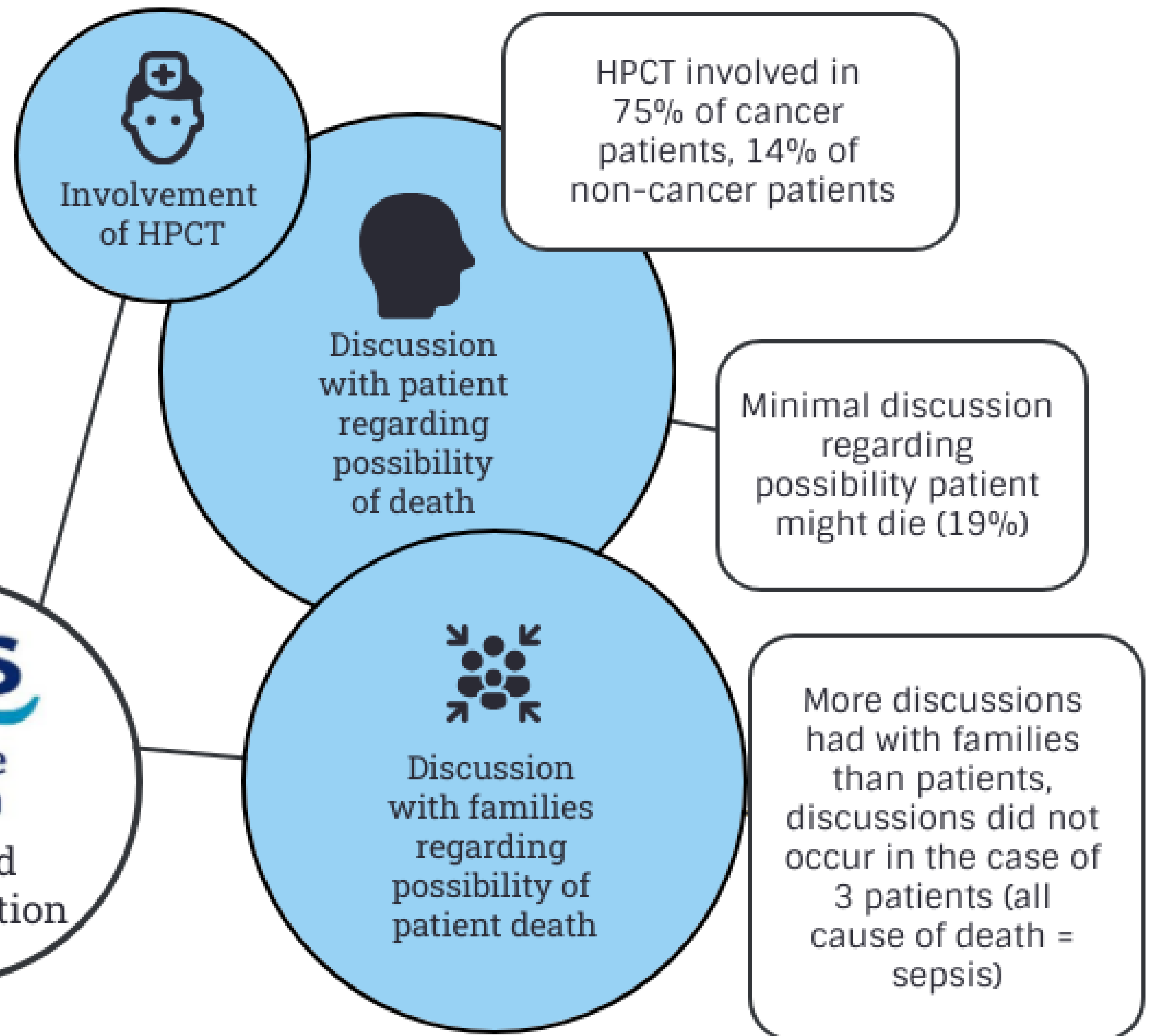
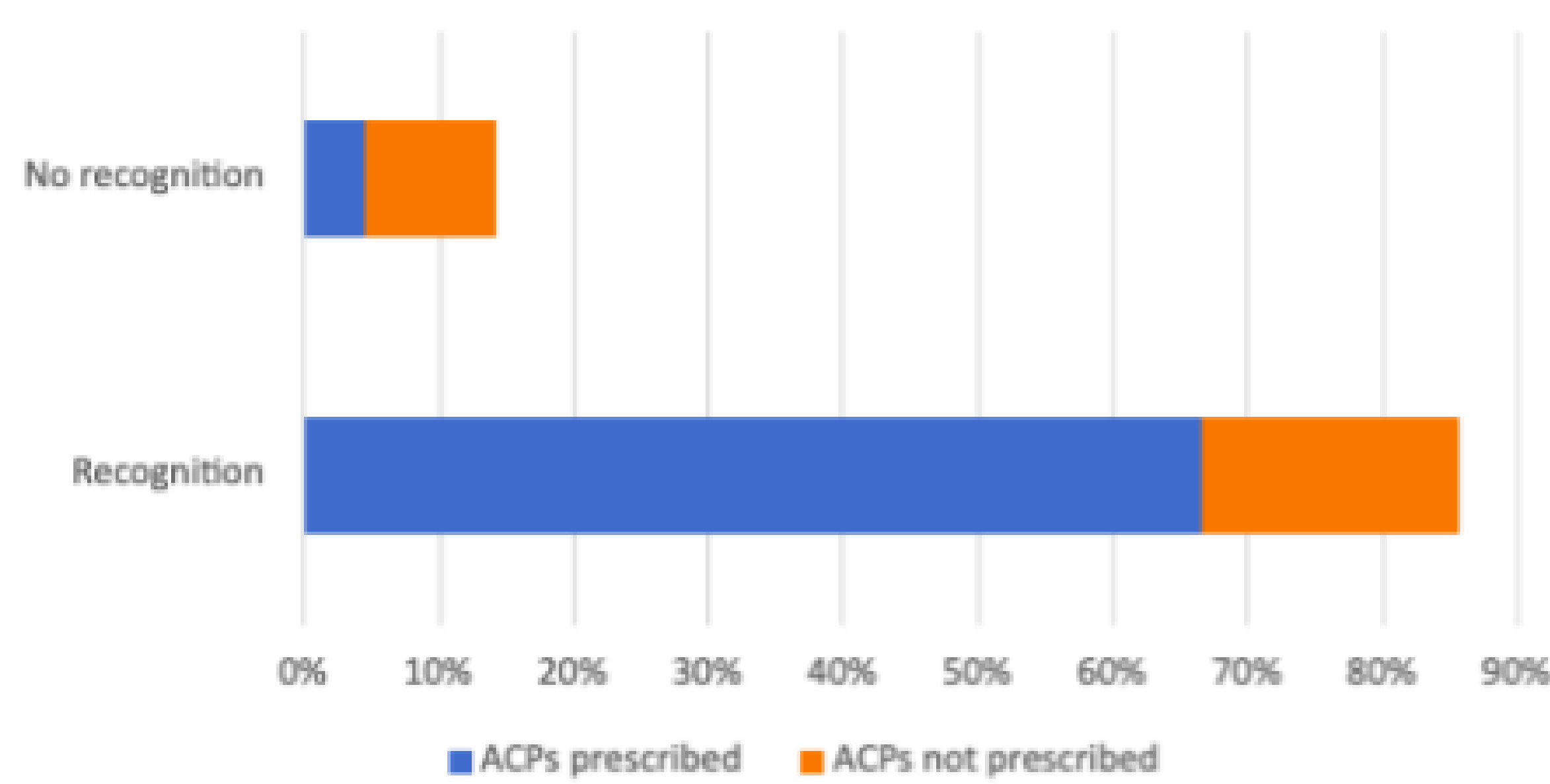
- Small data set
- Possibility of interpretation bias (of case notes)
- Principles tested relied on accurate documentation and clinicians documenting all thoughts during patient care in the first place
- Duration of admission to death was very short for some patients, allowing for limited time to implement good palliative care practices - e.g. 3 patients had a length of admission <24 hours

Conclusions

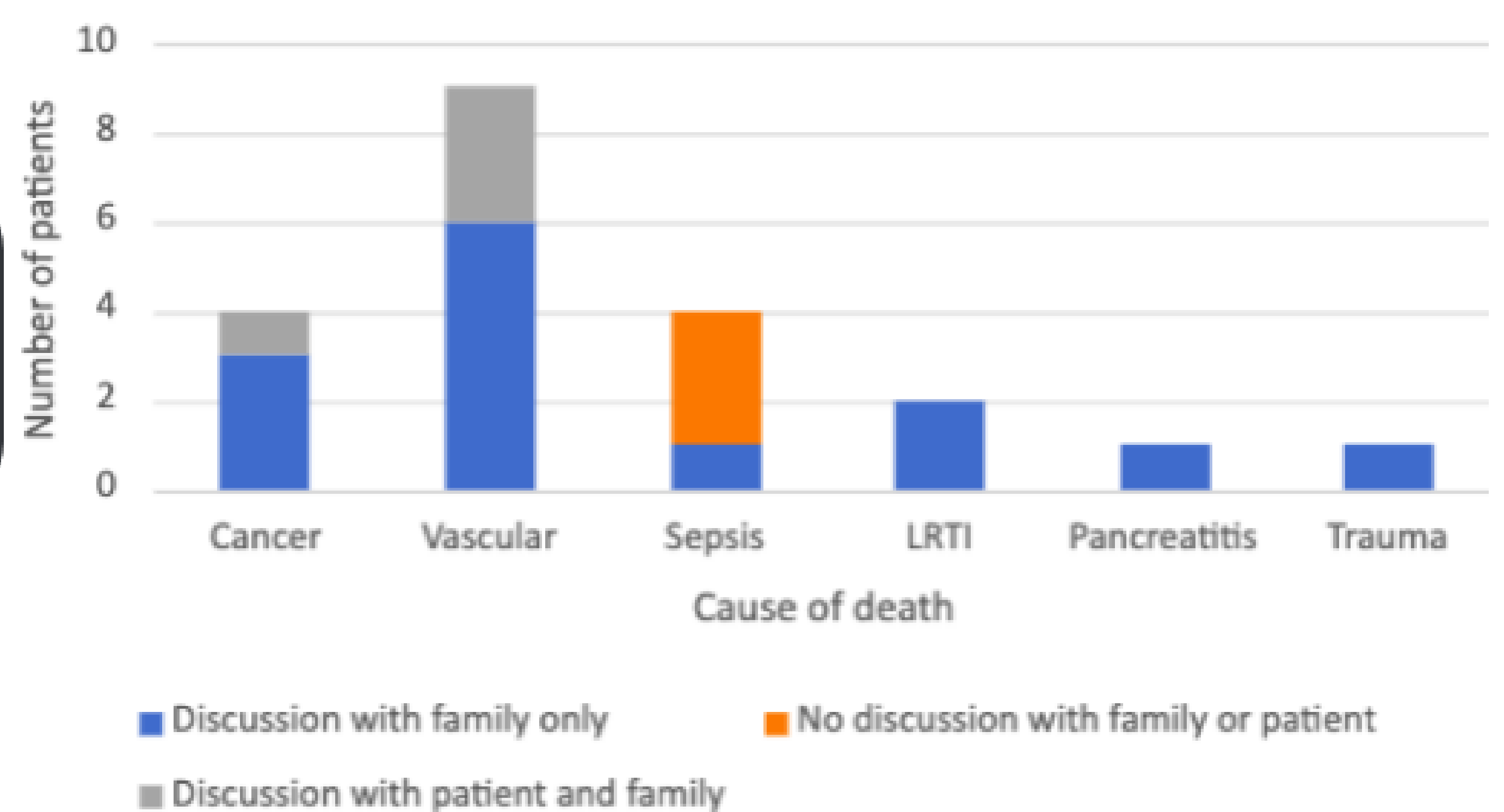
- Improvement needed in the completion of TEPs (higher completion overall of DNAR forms)
- Better prescription of anticipatory medicines when patients recognized to be dying
- Surgical team better at discussing with families possibility of death than patients themselves
- HPCT more likely to be involved in death of cancer patients than non-cancer patients, more education needed

Findings

Recognition of dying and prescription of ACPs



Discussion with patient and family regarding possibility of death



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References

1. Healthcare Quality Improvement Partnership, NHS Benchmarking Network, (2022/23). *National Audit of Care at the End of Life (NACEL): Fourth round of the audit. Summary report.*