Guidance at End of Life (GAEL) for Health Care Professionals: A Quality Improvement Project



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Abbreviated Abstract: Guidance at End of Life (GAEL) for Health Care professionals was created to aid clinical decision making and good practice in the care of the dying patient within NHS Greater Glasgow and Clyde. A quality improvement project was carried out with an aim to embed GAEL as standard end of life practice within the hospital setting. An audit bundle was produced, and reports generated. These reports identified positive areas of practice and areas for further development.

Related publications:

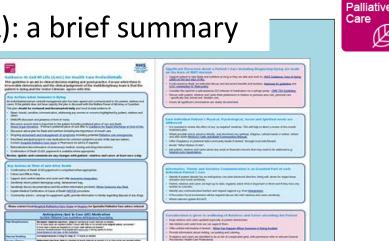
- ¹ Scottish Palliative Care Guidelines (2022)
- -² Scottish Government, 'Caring for people in the last days and hours of life' Guidance (2014)





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Guidance At End Of Life (GAEL): a brief summary

- Developed in 2014 and most recently updated 2020
- Comprehensive reference document intended to support staff to provide care that is holistic and considers not only the individual needs of patients but also considers the needs of their families, carers and friends.
- Aligned with the Scottish Palliative Care Guidelines¹ and The 'Caring for people in the last days and hours of life' Guidance and associated 4 principles: ²
 - i. Informative, timely and sensitive communication is an essential component of each individual's care
 - ii. Significant decisions about a person's care, including diagnosing dying are made based on MDT discussion
 - iii. Each individual person's physical, psychological, social and spiritual needs are recognised and addressed as far as is possible.
 - iv. Consideration is given to the wellbeing of relatives or carers attending the person.



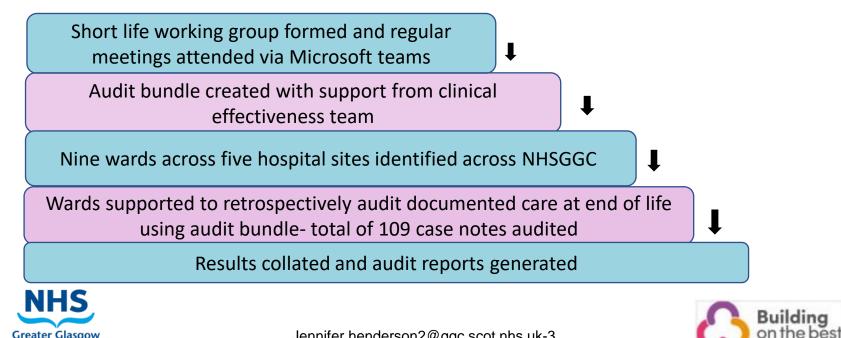


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Quality Improvement Project

Palliative Care

Aim - To embed GAEL as standard end of life practice within the hospital setting



Greater Glasgov and Clyde

Results and Next Steps



Examples of key areas identified for improvement:

•Documentation of discussions around advanced care planning and what is important to the patient

Documentation of discussions around family and carer preferences in relation to pressure area care/personal care
Documentation of communication at time of and after death

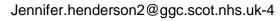
Next steps:

- Short life working group meet to consider the analysis provided in audit reports
- Identify and agree priority areas for improvement
- Feedback to each ward to consider the areas identified for improvement with the aim to repeat the audit cycle in future to assess tests of change

Examples of good practice identified:

- \bullet Anticipatory prescribing in line with Scottish Palliative Care Guidelines 1
- Daily documentation of symptom assessment • Documentation of Treatment Escalation Plan





NHS Greater Glasgow and Clyde