

Care Homes and hospitals Innovating Collaboratively to increase End of life care options: Evaluation of the CHOICE project

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Background:

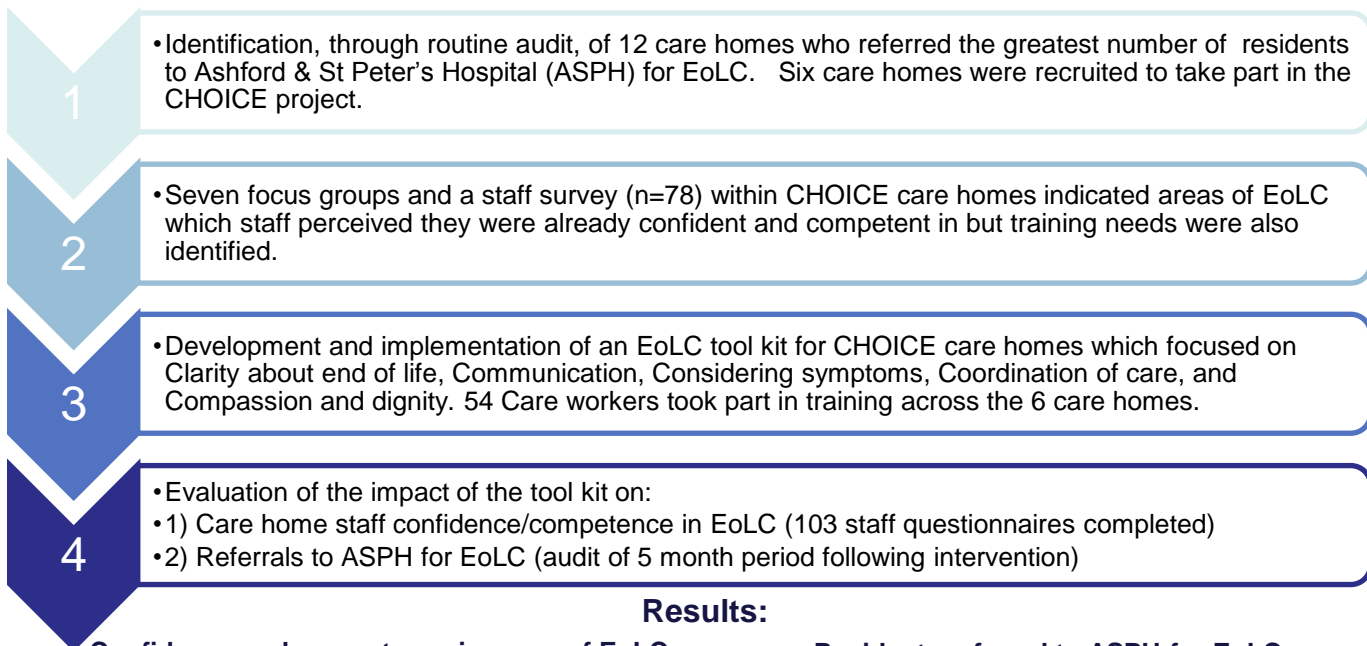
- A 'good death' is subjective but for many people it would involve being in familiar surroundings (DoH, 2008).

Aim:

- To increase the confidence and competence of care home staff in end-of-life care (EoLC).
- To enable more residents the opportunity to experience EoLC in their care home rather than an acute setting.

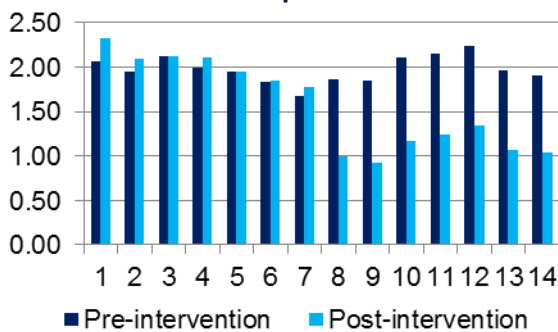
Method:

A four phase project employing appreciative enquiry:

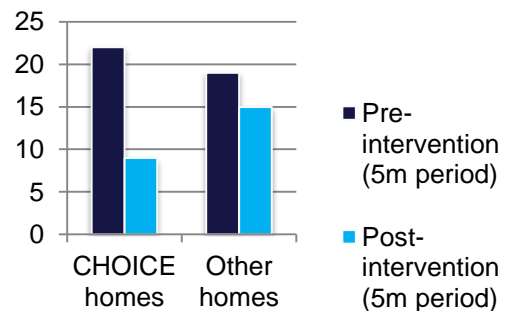


Results:

Confidence and competence in areas of EoLC:



Residents referred to ASPH for EoLC:



- Following the intervention, there was a trend for staff to report feeling more supported both in terms of emotional and clinical support within the care home (Q8 & Q9) and feeling able to source external support (Q10 GP/DN; Q11 Hospice/PCN). In addition, there was an increase in confidence in managing all EoL symptoms.
- There was a 59% reduction in the number of residents (from 22 to 9) referred from CHOICE homes to ASPH for EoLC following the intervention compared to a 21% reduction (from 19 to 15) from the comparison homes.

Conclusion:

- Training care home staff in EoLC can increase the opportunity for residents of care homes to experience EoLC in familiar surroundings rather than being transferred to a hospital setting.