



## End of Life Care

### 1. Introduction

End of life care services support people (and their families) approaching the end of their life to live as well as possible until their death. The goal is to enable people to die where they wish to, reducing the number of deaths in hospital. End of life services encompass all adults with advanced, progressive illness and include care given in all settings.

Approximately half a million people die in England each year, almost two-thirds of whom are aged over 75 years. The majority of deaths (58%) occur in NHS hospitals, while 18% occur at home, 17% in care homes, 4% in hospices and 3% elsewhere.<sup>1</sup>

A recent National Audit Office [report](#) noted that up to 35% of patients who died in hospital could be managed in other settings. The DH End of Life Care Strategy (2008) aimed to radically improve the care that people received at the end of their lives, and ensure that they could die in the place of their choice, where feasible.

### 2. The Local Picture

In Hounslow, there were 1,383 deaths during 2010 (based on provisional data)<sup>2</sup> of individuals aged 1 year or older. Of these, 1,336 (97%) were non-accidental deaths. More than half of these deaths occurred in hospital (58%), with 35% occurring at home.

The majority of deaths in Hounslow in 2010 occurred in hospital (58%), a figure higher than the national average but comparable to the London and North West London averages for 2008. The percentage of deaths that occurred at home increased in 2010 compared with previous years; in 2009, 29% of deaths occurred at home. ([Table 1](#))

Of the deaths that occurred at home during 2010, the main cause of death was also ischaemic heart disease (22%), followed by neoplasms of the digestive organs (9%). ([Table 2](#)) Of the in-hospital deaths, the main cause of mortality was ischaemic heart disease, which accounted for 13% of all deaths in Hounslow in 2010. This was followed by cerebrovascular disease (10% of deaths), and influenza and pneumonia (8% of deaths). The pattern of causes of death has remained consistent since 2007. ([Table 3](#))

In terms of patients aged over 75 years, the majority of in-hospital deaths are for females (60% in 2010). The median length of hospital stay prior to death was eight days. This is a reduction compared with previous years, where the median length of stay was 11–12 days before death. ([Table 4](#)) These figures are reflected in patients who were admitted in an emergency. ([Table 5](#)) In 2010, the total cost of hospital admissions where the patient died was £923,000, equating to an average of £100 per death.

The top three causes of in-hospital death for patients aged 75 years and over in 2010 were ischaemic heart diseases (11.5%) and cerebrovascular disease (10.6%). Deaths from cerebrovascular disease makes up a smaller proportion of deaths in 2010 compared with

<sup>1</sup> Department of Health (2008) End of Life Care Strategy.

<sup>2</sup> End of Life and Palliative Care: a factsheet on end of life care provision in the London Borough of Hounslow (JSNA)

previous years: 14% in 2008 and 14% in 2009. ([Table 6](#)) The main reasons these patients were admitted to hospital were noted as 'influenza and pneumonia', or 'diagnosis missing'. Almost one in five patients admitted to hospital who died did not have a reason for their admission noted. ([Table 7](#))

### 3. Strategic Leadership and Collaboration

NHS Hounslow and the London Borough of Hounslow have produced an End of Life Care (EoLC) Joint Commissioning Strategy for Adults 2011–16, which outlines the commissioning and service improvements needed to ensure that people are able to die where they wish, and that the proportion of deaths occurring in hospital are reduced.

Hounslow's EoLC Joint Commissioning Strategy will rely on key partnership working between NHS Hounslow and the Borough's Commissioners, Specialist Consultants and Nurses in Palliative Care, GPs, Consultant Geriatricians at West Middlesex University Hospital, district nursing teams, Marie Curie Cancer Care and other voluntary sector providers.

The Strategy will ensure:

- 38% of deaths to take place outside of a hospital setting ;
- 85% of registered patients will have been offered a care planning discussion;
- 85% of GP practices to enable more coordination between services caring for patients at the end of life;
- 90% of care homes will be supported to access training on end of life care; and
- 44% of patients dying in hospital to be placed on a designated EoLC pathway.
- 64% of patients who die will have been on the register.

The Strategy will ensure:

- Increased identification of patients at the end of life, irrespective of their diagnosis and place of residence;
- Improved integration and coordination of services facilitated by greater use of End of Life Care tools in all settings;
- Equitable End of Life Care for those living in nursing and residential care homes, together with increased support to care homes.
- Education, training and support of the End of Life Care workforce across the care pathway, irrespective of role and location;
- Proactive engagement with carers, families, service users and the local population regarding End of Life Care issues and priorities;
- For those choosing or requiring acute hospital admission in the dying phase, improved environment and care;
- Improved access to palliative care professionals for symptom management as required;
- Responsive housing services with appropriate criteria;
- Sensitive and responsive support throughout the patient journey for carers, chosen family members and friends;



- A reduction in complaints and an increase in the overall level of satisfaction;
- A Borough-wide core set of metrics that are monitored and managed;
- Undertake work with GP practices to ensure coordination between services caring for patients at the End of Life stage; and
- Link with the roll-out of the End of Life Care register across London in 2012/13.

#### **4. Priorities**

The following are key priority areas in End of Life Care in the London Borough of Hounslow in 2011/12:

- A Borough-wide End of Life Care register, including End of Life Care wishes; and
- A significant reduction in deaths in hospital (a greater proportion of deaths to occur at home and in care homes).

#### **5. Summary of Need**

The table summarising the needs in this area has not been completed as it is not considered applicable to End of Life Care.