Care Quality Commission

End of Life Care…CQC's findings so far:
the challenges for improvement

Dr Nick Bishop
National Professional Advisor
Care Quality Commission

The numbers

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- 1% of the population dies each year in UK
- 75% deaths are from non-cancer/long term/frailty conditions
- 85% of deaths occur in people over 65
- 54% die in hospital- 35% home (18% home,17%care home)
- 40-50% of those who died in hospital could have died at home (NAO Report 09)
- 70% people do not die where they choose

RCGP Commissioning Guidance in End of Life Care

What CQC found as part of Thematic review

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In England during 2010,

53% of deaths were in hospital,

21% at home

19% in care homes.

Therefore, nationally, approximately 40% of people died in their usual place of residence

Method

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People who lived in a care home and died in hospital between 1 January 2010 and 31 December 2010

People who died within three months of their last admission to hospital from a care home. *We identified admissions from care homes by looking at each patient's postcode at the time of admission*

Review did not cover elective (planned) admissions, nor those under the age of 18.

NHS acute trusts only

Findings

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There were 290,225 admissions from care home postcodes in England (This may include multiple admissions of the same person).

Of these, 57,886 people (20%) died within three months of admission

Findings

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Of the deaths in hospital, over a third (36%) occurred within three days of admission, and over half (56%) occurred within seven days. Forty four per cent occurred between eight and 90 days following admission

Of the total number of people who died in hospital in 2010,12% were admitted from a care home

The cost of admissions that end in death increases for those who die after eight days5 and hospital care is estimated to cost twice as much as social care towards the end of life. (*Social care and hospital use at the end of life,* The Nuffield Trust, 2010).

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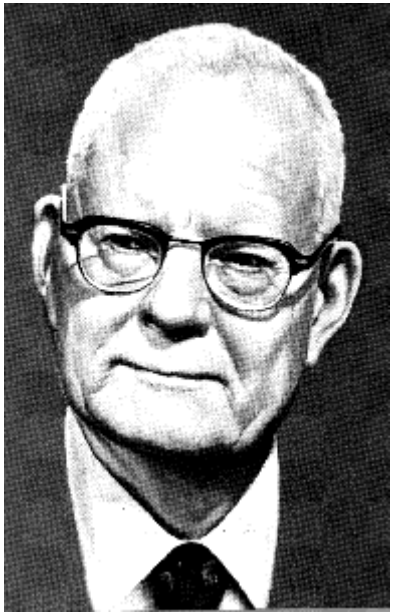
"If I had to reduce my message for management to just a few words, I'd say it all had to do with reducing variation." – W Edwards Deming



The NHS CB Mandate - objectives

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The Mandate

A mandate from the Government to the NHS Commissioning Board: April 2013 to March 2015

Presented to Parliament pursuant to Section 13A(1) of the National Health Service Act 2006

"..reducing unjustified variation between hospitals in avoidable deaths, so that standards in all hospitals are closer to those of the best" – pg 7

"..to shine a light on variation and unacceptable practice, to inspire and help people to learn from the best. We want a revolution in transparency – so that the NHS leads the world in the availability of information about the quality of services" – pg 13

Variation in death rates after admission from care home

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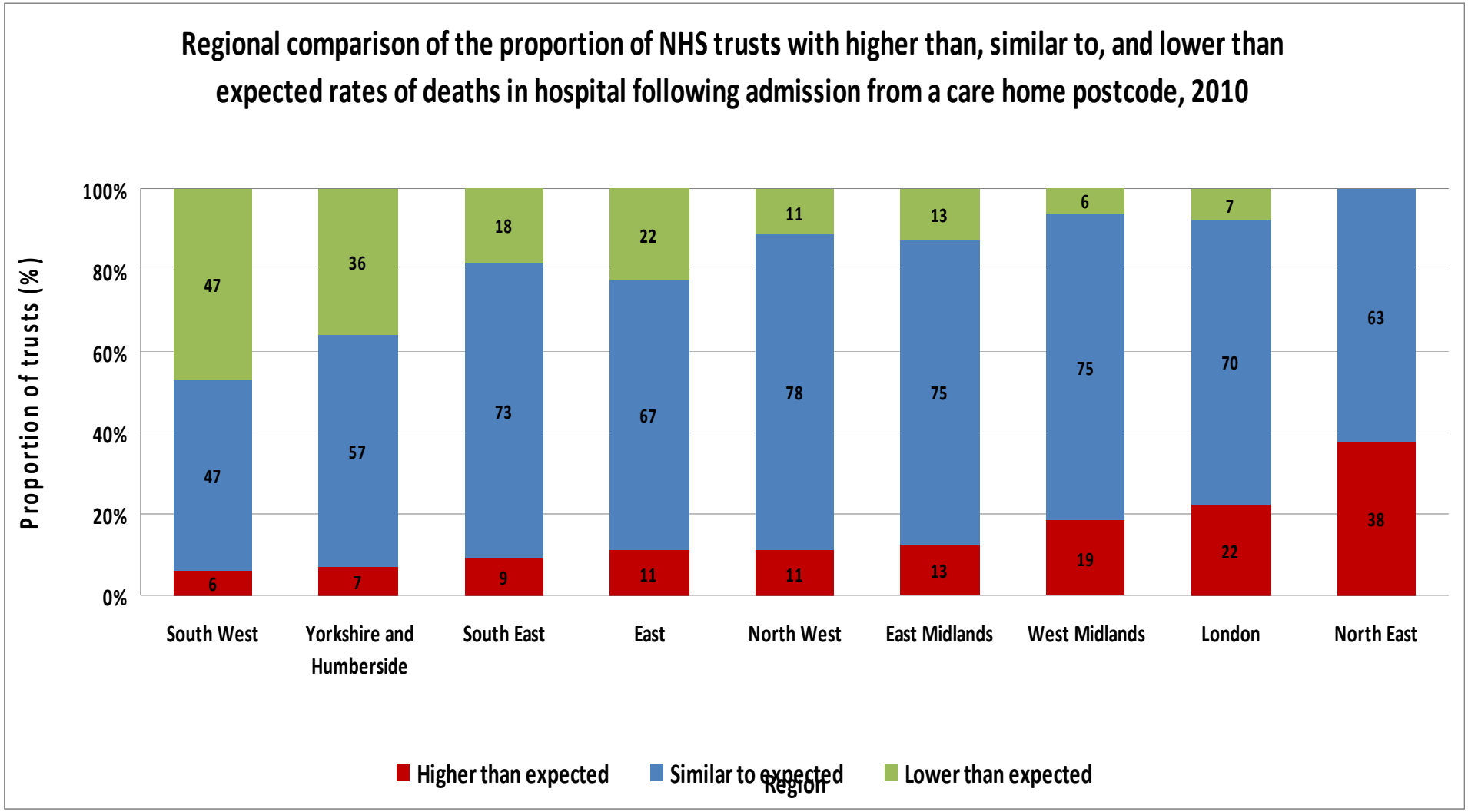
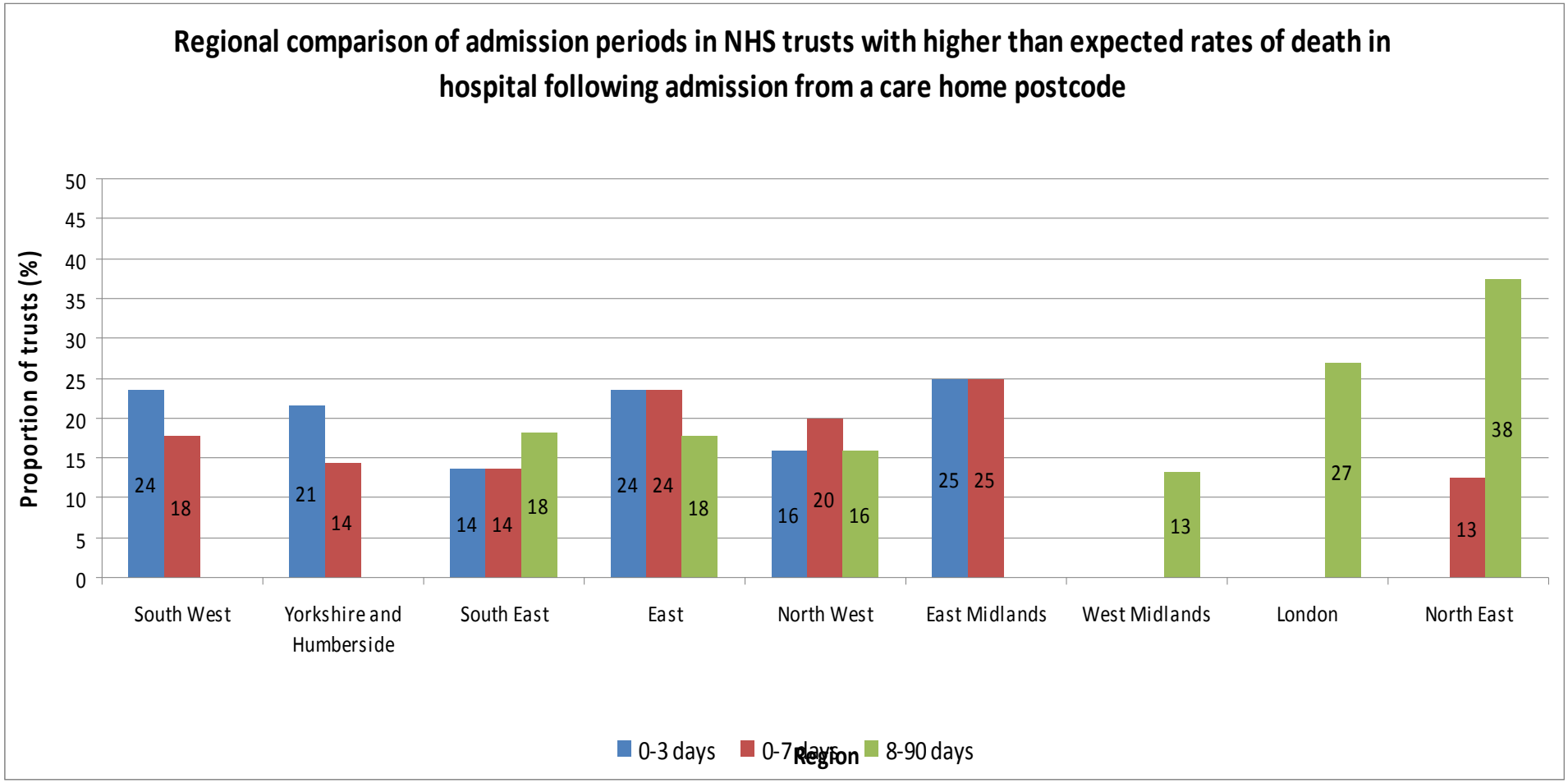


Variation in Length of Stay



Hospital admissions from care homes

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The regions with the highest proportion of trusts with higher rates of hospital deaths also had the highest proportion of trusts where such people stayed in hospital for more than a week before they died.

Hospital admissions from care homes

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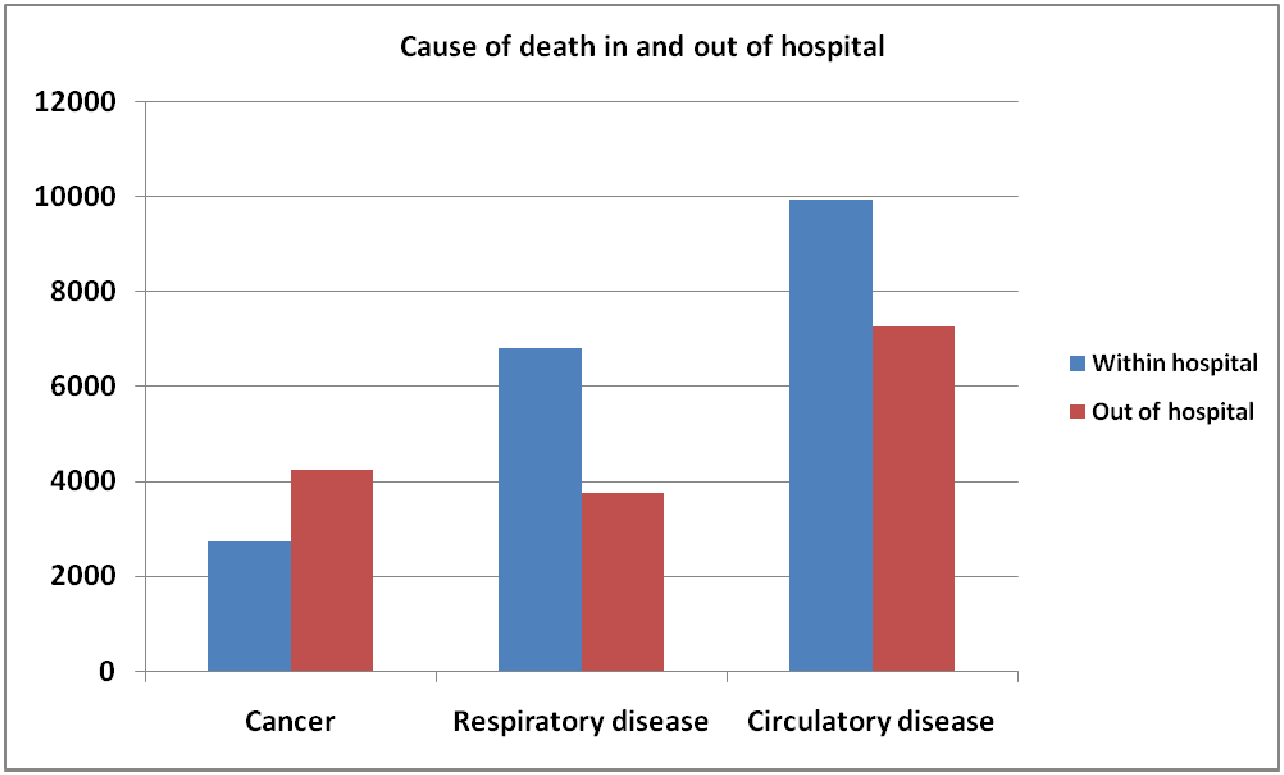
- **Higher proportions of people died of respiratory and circulatory disease in hospital than cancer:**



Data source: Hospital Episode Statistics - January to December 2010

Questions….

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What are the facilities that hospitals provide at the end of life that prompt admission from normal place of residence?

Could at least some of these facilities be made available in the normal place of residence?

What would it take to do this?

Will Commissioners take this on?

Conclusions

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Care Homes and primary care providers should consider their role in preventing unnecessary admissions to hospital.

Responsibility for driving dignity and safety ultimately lies with providers.

Service providers should explore regional variations in the number of admissions of care home service users to hospitals and resultant deaths within a short period of time.

This….?

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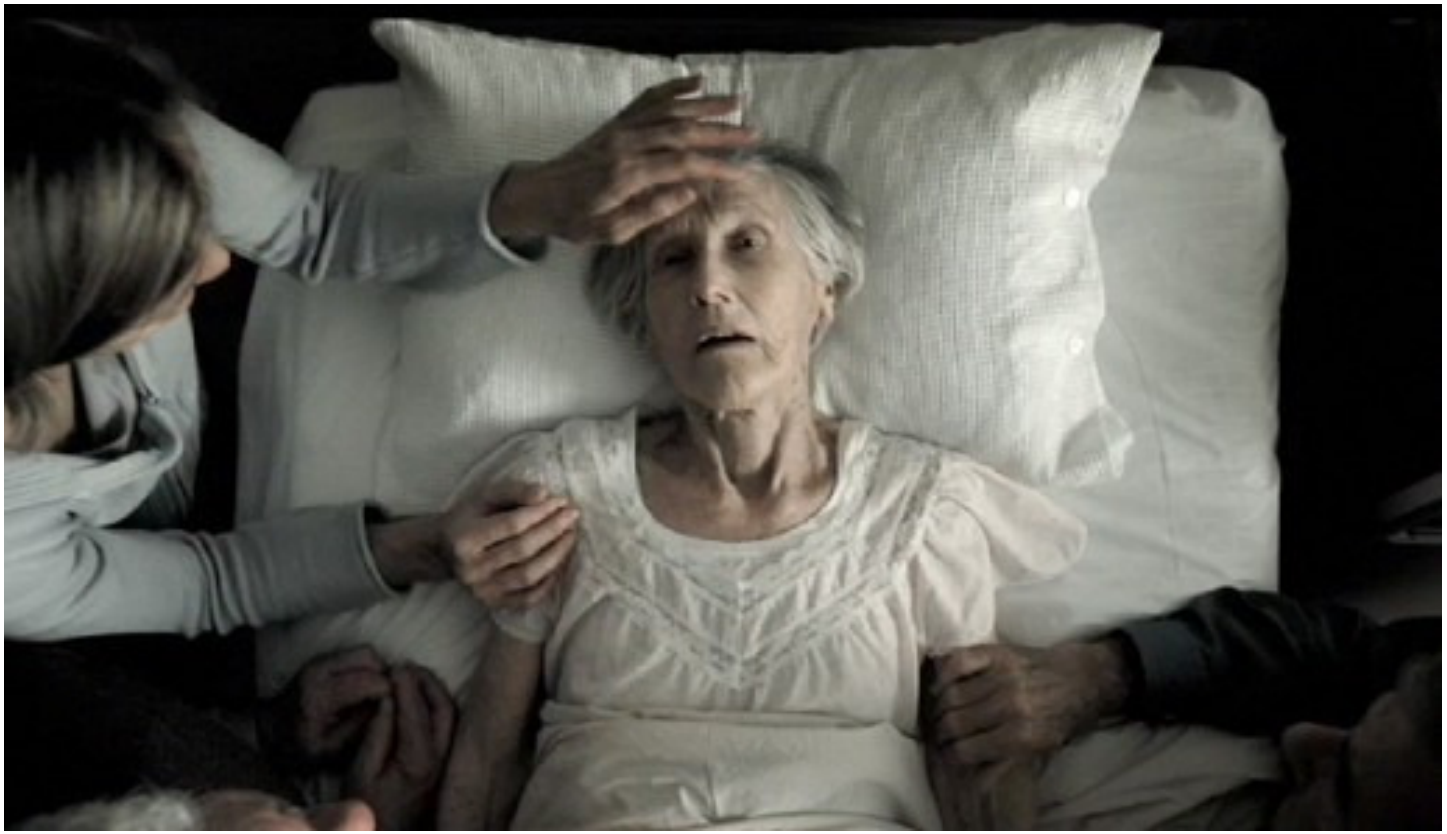

….or this?

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Thank you……

nick.bishop@cqc.org.uk