

End of Life Care Programme

The Hillingdon Pilot

**Sarah Mc Donagh
Heart Failure Specialist Nurse
The Hillingdon Hospital**

End of Life Care Programme

Aims:

“To provide sensitive, quality care for **all** dying patients, across **all** diseases, in **all** settings ...

... so that more people receive their choice of care and die in their chosen place”

‘Building on the best’, DoH,2003

- Work from Parkes (1985) found that only 24 % of people dying in hospital wanted to be there. Of those patients who actually died in hospital 61% had previously stated a preference to die elsewhere.

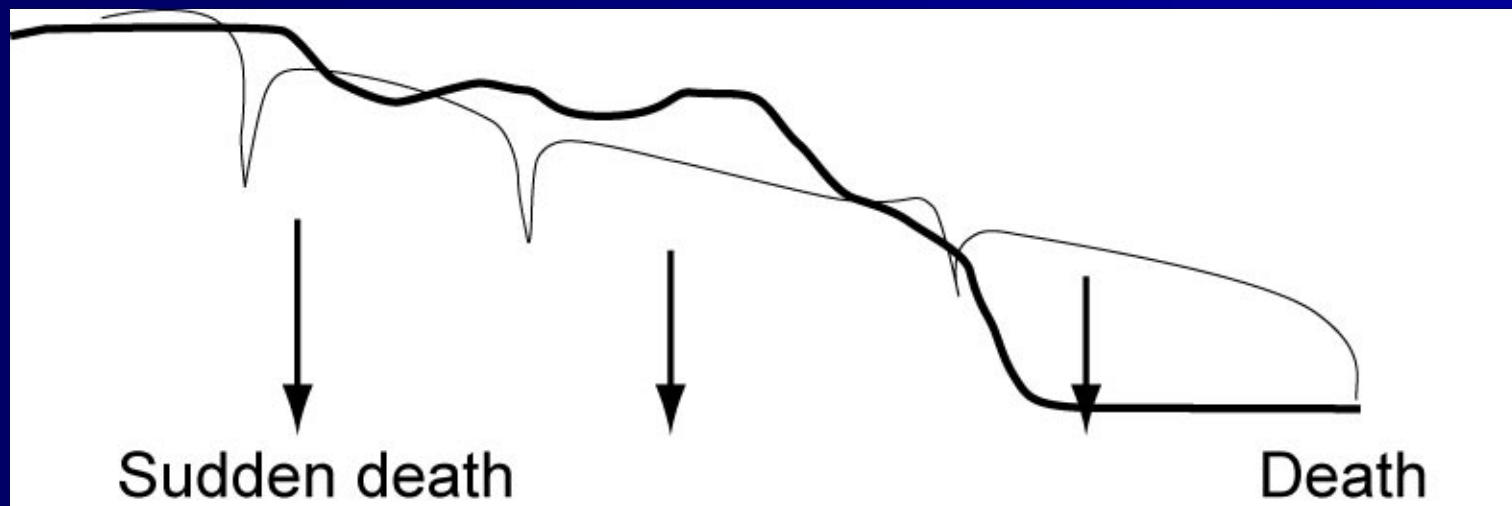
Preferred and Actual Place of Death

Place of Death	Home	Hospital	Hospice	Care Home
Preferred (all patients)	56	11	24	4
Actual P o D (cancer)	25	47	16	12
Actual P o D (all pts)	20	56	4	20

Higginson I (2003) Priorities for end of life care in England, Wales and Scotland
National Council for Palliative Care Services

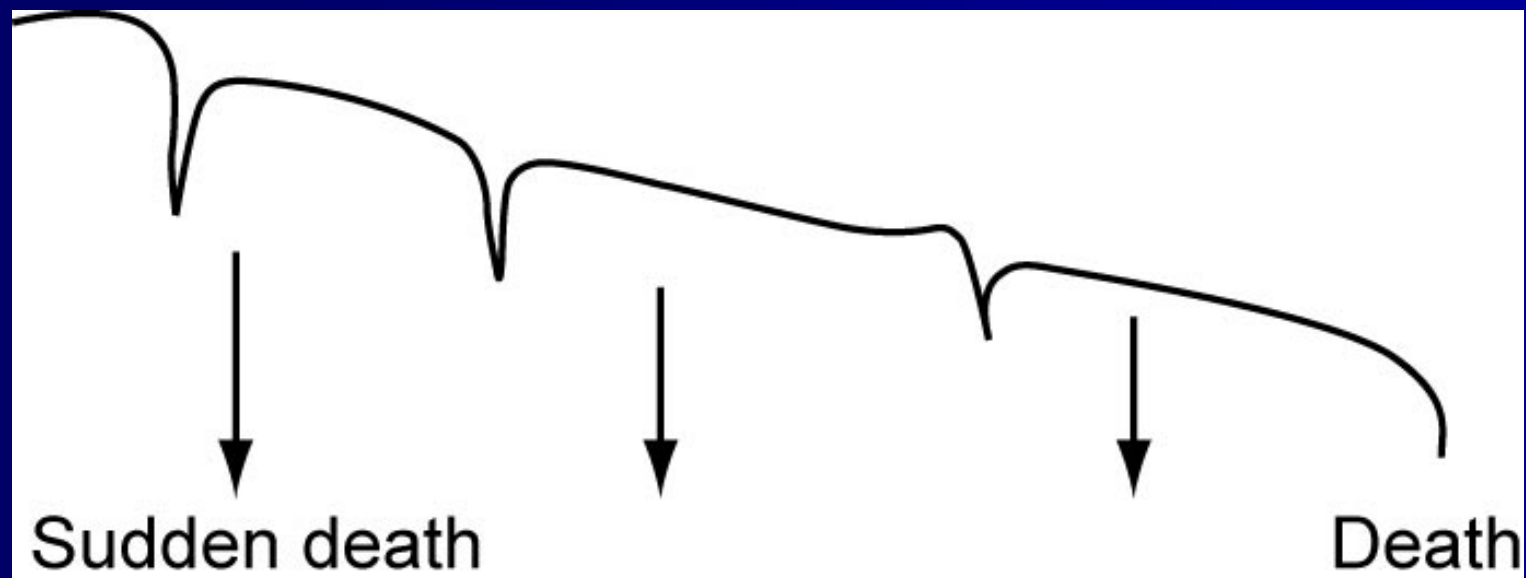
- We still find it increasingly hard to predict the life expectancy of heart failure patients.
- Heart failure as a disease can be very different. The disease progression means that there maybe continuing benefits from interventions and treatments.

Dying from cancer



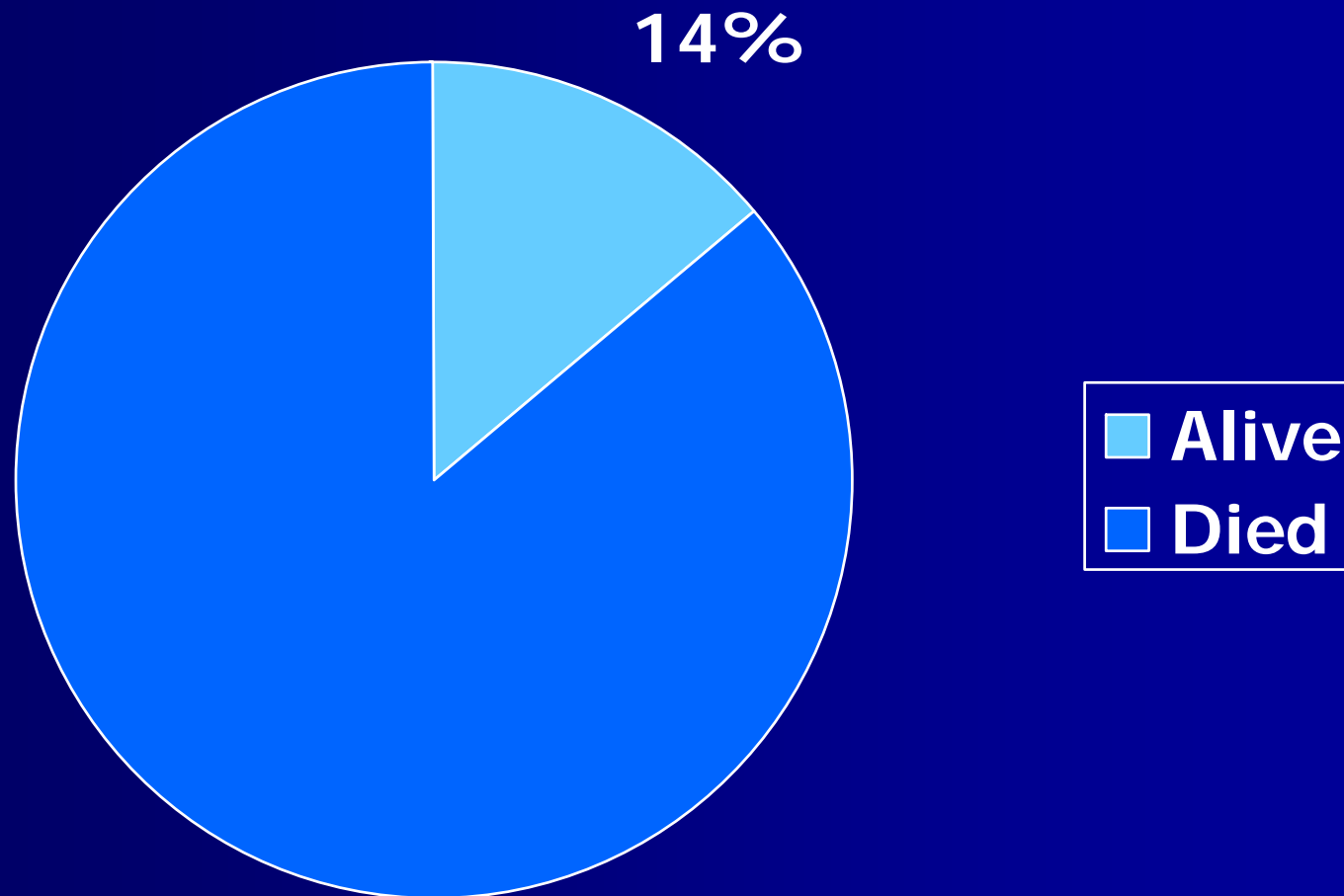
Exhibits precipitous decline approx 5 months prior to death

Dying from heart failure



- Difficulty in diagnosing dying
- Pattern of functional decline slow compared with cancer patient

Predictions of Death in Lung Cancer at 2 Months



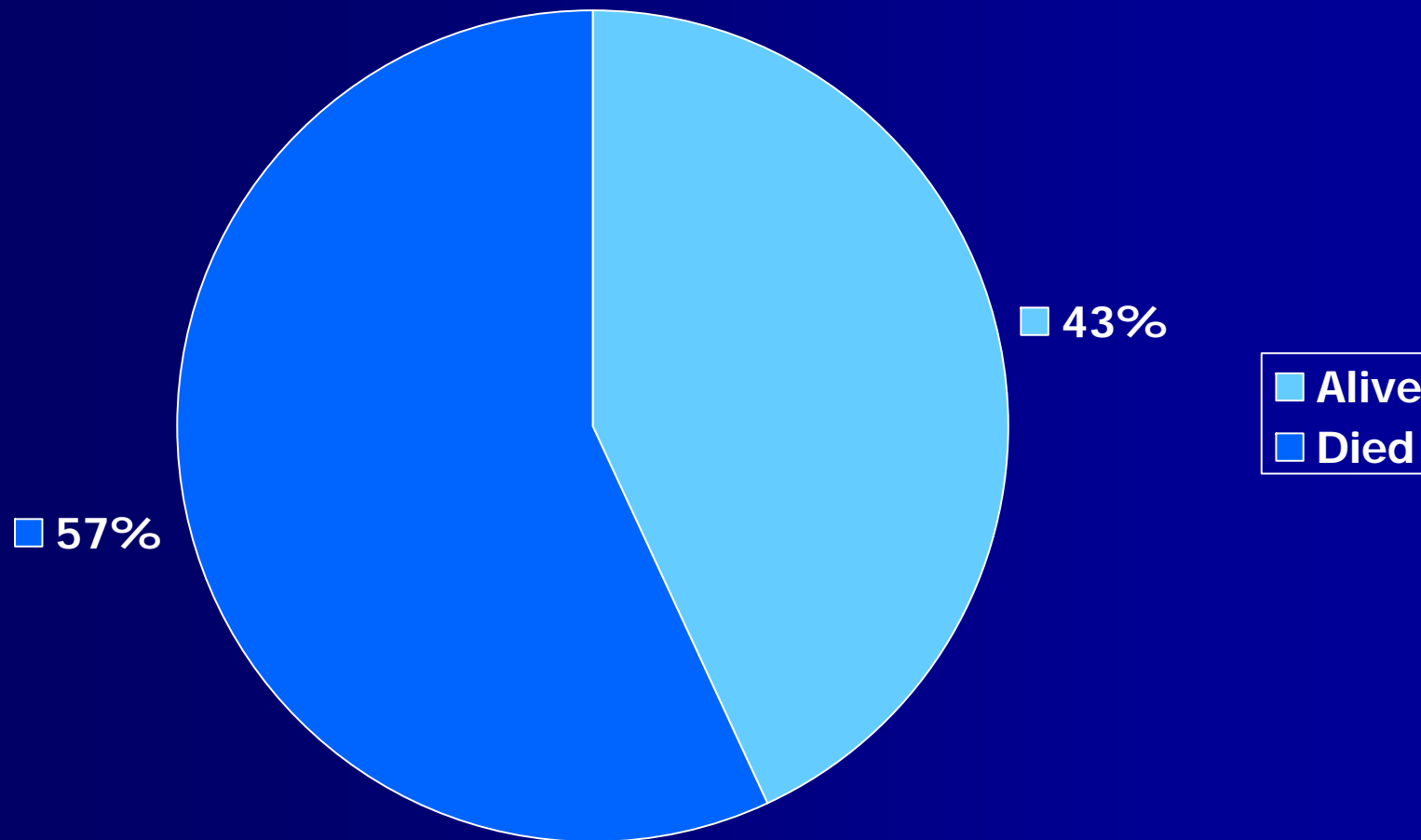
86%

14%

■ Alive
■ Died

■ SUPPORT Investigators Study 1995

Predictions of Death in Heart Failure at 2 Months



■ SUPPORT Investigators Study 1995

Identifying End-Stage CHF Patients For Supportive Care

1: The 'Surprise Question' *

"Would you be surprised if this patient died within 6 months / 1 year ?"

Due to the unpredictability of CHF a shorter period than one year should be used,
e.g. 6/12

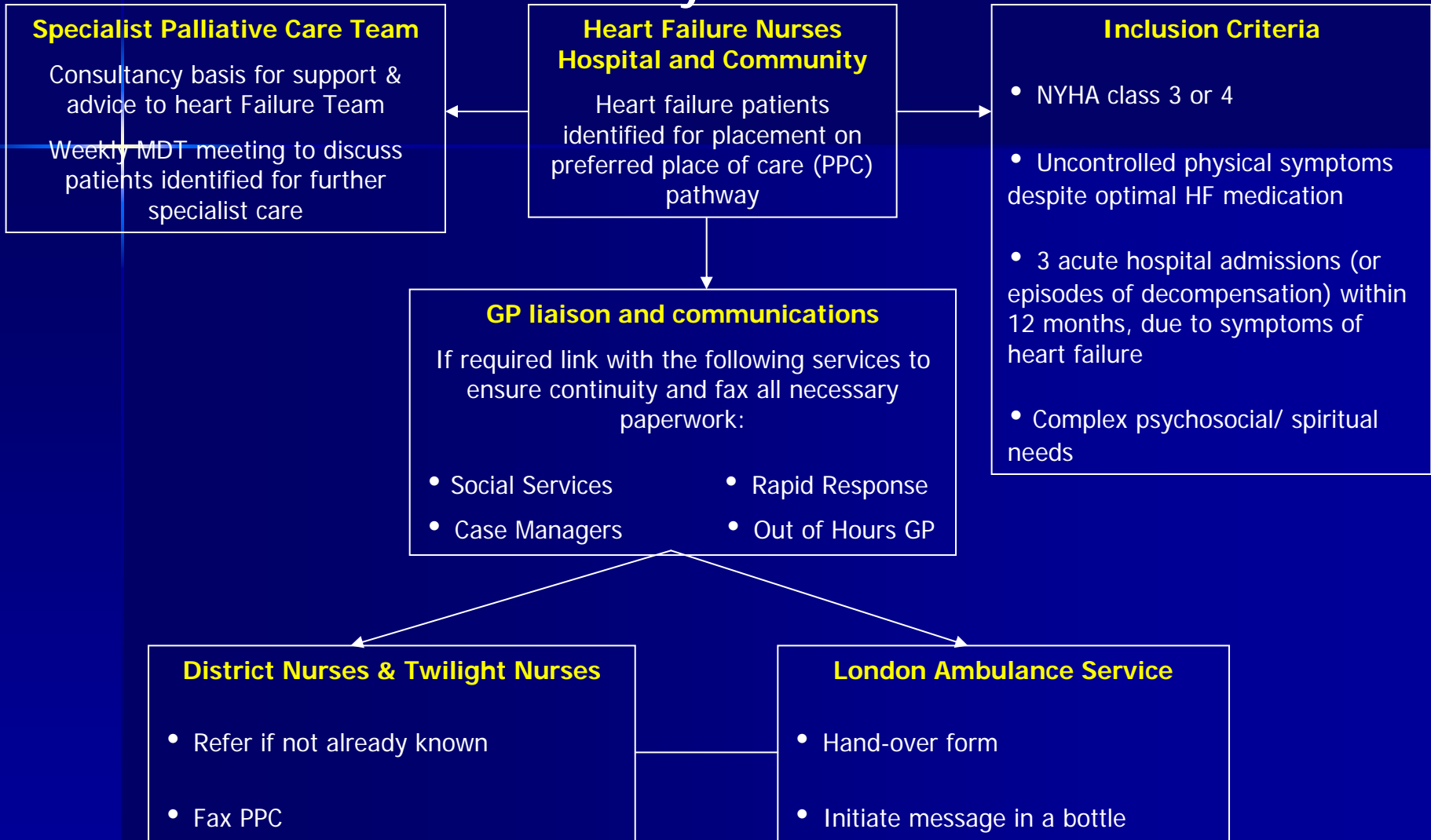
* Thomas, K 2002: Gold Standard Framework

At least Two Clinical Indicators (‘Gold Standard’ Framework)

- CHF NYHA class III or IV
- CHF symptoms despite optimal Tx
- Patient thought to be in the last 6 months of life.
- 2-3 episodes of decompensation or admissions with End-stage CHF in one year

Hillingdon Hospital

End of life Pathway for Heart Failure Patients



What's needed

- Communication
- Training
- Honesty
- Flexibility
- Staff support

What Next ?

- Discussion of ICD'S
- Staff workshop
- G.P. workshop
- Meet with Harmoni Team

Acknowledgements

- Dr Richard Grocott-Mason
- Dr Simon Dubrey
- Dr Elizabeth Horak
- Meliane Raddon
- Juile Phillips
- Deborah O'Hanlan
- Temo Donovan

