

Bringing End of Life Care to the patient through Hospice Outpatient Clinics

Angie Redpath, Nurse Consultant, Princess Alice Hospice, **Jude Richardson**, Palliative Care Specialist Nurse, Princess Alice Hospice

Background

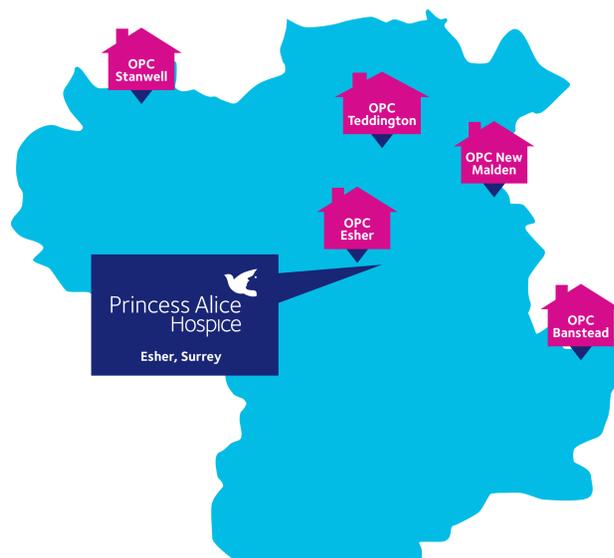
The End of Life Care Strategy (DOH, 2008)¹ recommended that all patients with palliative care needs should have access to specialist advice and clinical assessment. Increasing demand on the service prompted us to explore different ways of meeting the changing needs of palliative care patients. Feedback from patients and families told us they were interested in attending local Outpatient clinics (OPC).

Aim

- Optimise patient and carer choice
- Enable patients and carers to be seen closer to home to reduce anxiety often associated with hospice referrals
- Reduce the need for home visits
- Reduce travel time and cost for Clinical Nurse Specialists (CNS)
- Improve patient and carer experience
- Improve efficiency and coordination of services in our community

Method

- Approached Commissioners and local GP surgeries, good working relationships allowed for the provision of clinic space
- Well placed locations with good access, parking and facilities
- Five OPCs established across the Hospice's catchment area
- Referrals triaged through Single Point of Response, patients assessed for suitability based on urgency of referral, performance status, travel difficulties, patient and carer preference.

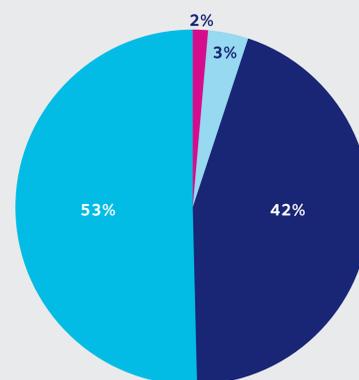


Role of the OPC Nurse Consultant/CNS

- Undertake initial in-depth clinical assessment of patients
- Review of patients known to the hospice for symptom management and on-going Advance Care Planning
- Provide Nurse Independent Prescribing as appropriate
- Joint reviews with other members of the multi-professional team
- Increase autonomy and scope for decision making for the CNS team

Results

- Increased choice for patients, improved multi-professional working with primary healthcare professionals, and reduced the Hospice at Home workload
- 7% had a non-cancer diagnosis, this may reflect the lateness of referrals and patients being too unwell to attend OPC by the time of referral
- 9% of all new referrals to Hospice seen in OPC
- Approx. 60% of patients seen were unstable or deteriorating
- Advance Care Planning was initiated in 93% of consultations, medication changes were recommended for 60% of patients and liaison between hospice and acute services for 60% of patients



- Remained on OPC caseload
- Referred to Hospice at Home team
- Attended Day Services
- Discharged

“ I would like to thank you for seeing me yesterday and to tell you how much better, freer and more settled I feel – thank you so much. ”

An OPC patient following first appointment

Challenges

- Availability of clinic space
- Shift in culture
- Healthcare professionals' perception of the Hospice role

Successes

- Flexibility for patients where and when they are seen
- Patients choose to continue to attend OPC
- Continuity of care
- Expedite acute care support when needed
- Liaison with other healthcare professionals; GPs, DNs, acute services
- Direct referrals to OPC
- Reduced travel time for CNS
- Reduced Hospice at Home caseloads
- Reduced hospital admissions

Implications for practice

- OPC has alleviated pressure on the CNS team, set the direction of travel for patients as well as proactively managed patient's concerns, symptoms and future plans
- Challenged traditional ways of working and standard community CNS role
- Establishing OPC took time but allowed patients flexibility and continuity of care
- Increased autonomy and extension of clinical skills for CNS team
- Offered another dimension of the service for patients
- On-going evaluation demonstrates that OPCs enable smarter working, an improved experience and make the most of the limited resources available.

1. Department of Health. (2008) End of life care strategy: Promoting high quality care for all adults at the end of life [ONLINE]. London: Department of Health. <https://www.gov.uk/government/publications/end-of-life-care-strategy-promoting-high-quality-care-for-adults-at-the-end-of-their-life> [Accessed 31-Oct-19].

