

Preferred and actual place of death for patients referred to a specialist palliative care service

Jenny Mullin, Liz Arnold, Anne Finucane, David Oxenham
Marie Curie Hospice, Edinburgh

Marie Curie
Cancer Care



Introduction

* The Living and Dying Well action plan promotes high quality care for people approaching the end of life, including supporting patients to die in the place of their choice.

* A study by Gomes *et al.* (2011) suggested that the majority of the general population in England would choose to die at home.

* We present data on preferred place of death (PPD) and actual place of death for patients in contact with specialist palliative care services in Edinburgh over a two year period.

Methods

* Prospective audit of patients' preferred and actual place of death

* Specialist palliative health care professionals asked about preferred place of death as part of standard patient assessment

* Case notes reviewed retrospectively to match preferred place of death with actual place of death

Population

* 1,095 patients referred to Marie Curie Hospice, Edinburgh inpatient and community teams, who died in 2009 and 2010.

Results 1.

Is it possible to ask patients about their preferred place of death?

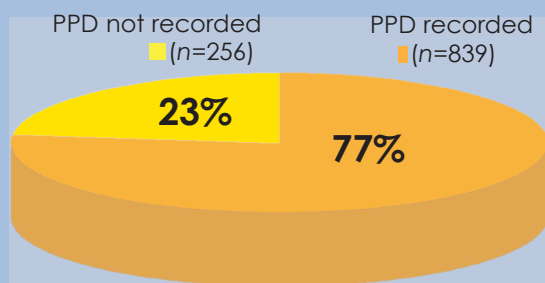


Fig 1. Patients in whom Preferred Place of Death was recorded (%) (N= 1095)

Reasons PPD was not recorded	% of patients (n=256)
I don't feel I've known the patient long enough to have discussion	28%
Patient not sure/place not important	21%
May cause the patient too much distress	20%
Patient not willing / able to discuss future deterioration	12%
Patient unable to communicate due to unconsciousness, cognitive impairment or other	9%
No information	7%
Combination of reasons	2%
Too early in disease to discuss	1%

Results 2.

Does the preferred place of death of patients in touch with palliative care services differ from that of the general population?

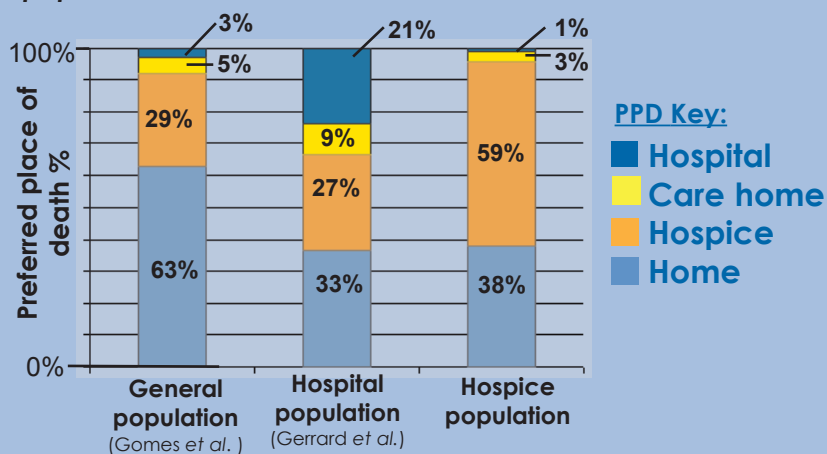


Fig 2. Preferred place of death of hospice patients in comparison with the preferences of the general population and hospital population

Results 3.

Does recording a preferred place of death reduce the number of deaths in an acute hospital setting?

Overall, 85% of patients died in their PPD.

7% of patients without a PPD died in hospital compared to 4% of those with a documented PPD ($p = 0.054$, Odds Ratio 1.75)

Conclusions

1. It is possible to ask the majority of patients about their preferred place of death
2. Preferences of patients receiving specialist palliative care differ from those of the general population.
3. Very few patients wished to die in hospital.
4. Patients without a documented PPD were more likely to die in hospital.