

# Responding 24/7: an evaluation of urgent admission requests to the hospice

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Care and support through terminal illness

## Introduction

- Provision of 24/7 palliative care is a national priority
- Hospices endeavour to respond to the palliative care needs of patients and families timeously, though resources are limited
- There is a perception that hospice beds are difficult to access in an urgent situation, and this may impact on decisions to refer.

## Aim

This study aimed to evaluate urgent admission requests to Marie Curie Hospice Glasgow (30 inpatient beds), via the on-call doctor.

## Methods

We recorded data prospectively over three months (Feb – May 2016):

- patient demographics
- time and date of call
- reason for and source of referral
- whether the patient was known to the hospice
- details about the decision to admit.

Appropriate admission requests:

*‘patients with specialist palliative care needs that could not be met elsewhere.’*

## Results

Figure 1: Total admissions over the 3 month period.

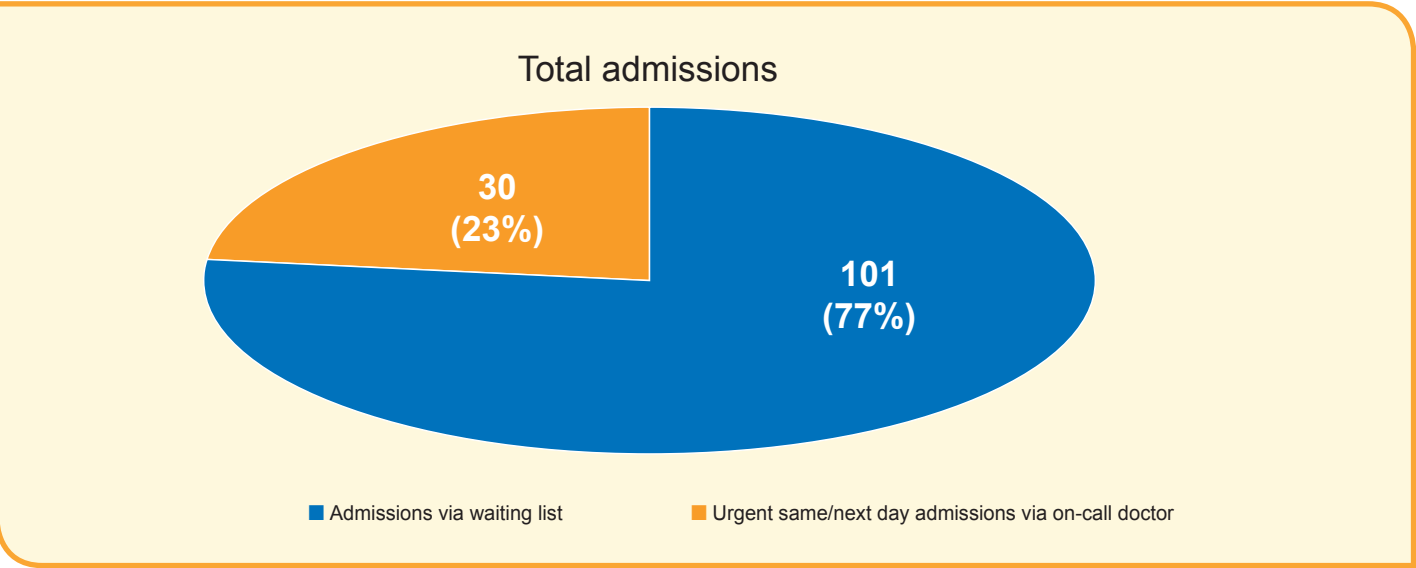


Figure 2: Outcomes of requests for urgent admissions.

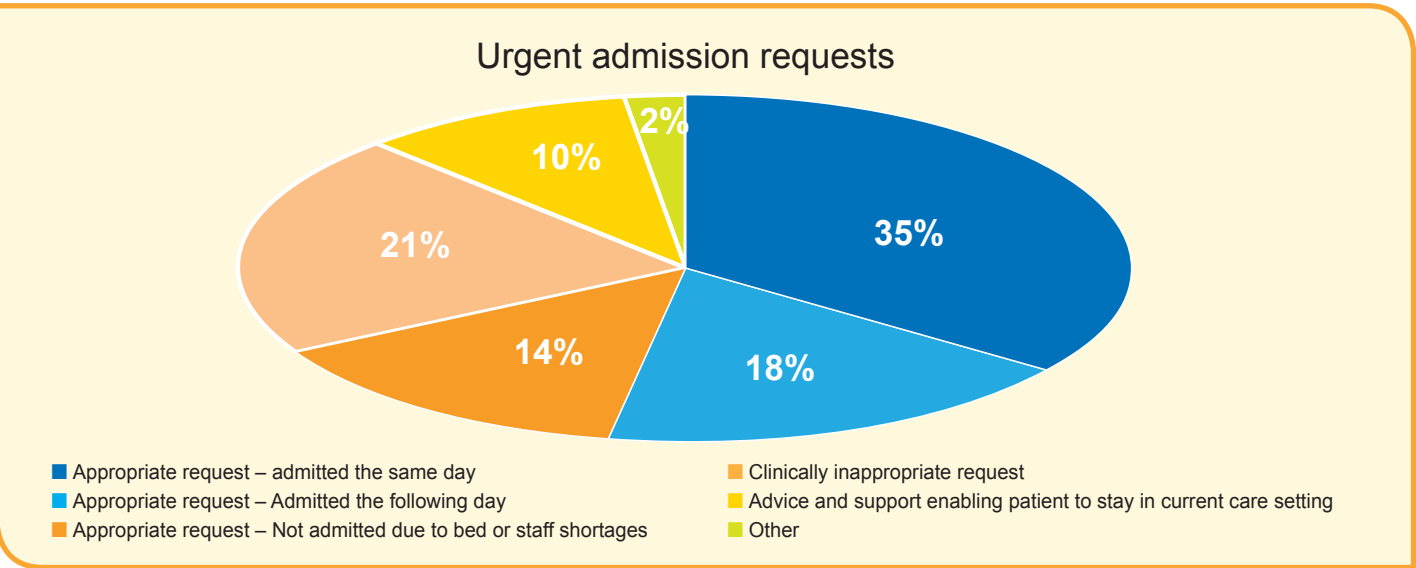


Table 1: Patients known/not known to the hospice.

	Number of requests for urgent admission	Inappropriate requests	Appropriate requests	Admitted
Patient known to hospice	48	17	31	26
Patient not known to hospice	9	2	7	4
Total	57	19	38	30

Table 2: Source of referral.

Source of referral	Number of requests for urgent admission	Inappropriate requests	Appropriate requests	Admitted
GP	27	10	17	12
District nurse	10	5	5	5
Clinical nurse specialist	8	1	7	6
Family/patient	7	1	6	5
Other	5	2	3	2

Details of inappropriate admission requests (19):

- Clinically inappropriate (12):
  - Acute sector admission necessary (6)
  - No clinical indication for urgent admission (5)
  - Respite care requested (1)
- Advice and support offered enabling patient to stay in current setting (6)
- Other – more appropriate to care for patient in alternative geographical area (1)

## Conclusions

- There is a need for direct access to a specialist palliative care doctor as this service is frequently used
- Over three quarters of appropriate requests for urgent admission were admitted within one day, and requests were accepted from a range of referrers, suggesting a responsive service
- Inappropriate admission requests for patients known to the hospice may be explained by increased likelihood for referrers to contact services previously accessed by the patient
- Education for healthcare professionals is needed to ensure appropriate hospice referral, enabling patients to achieve their preferred place of care.