

Views of Care

Delivering End of Life Care now and improving for the future

Patricia O’Gorman, Elaine O’Donnell, Jackie Wright, Claire O’Neill, Bridget Johnston*
Palliative Care Practice Development Team, NHS Greater Glasgow and Clyde*



Introduction

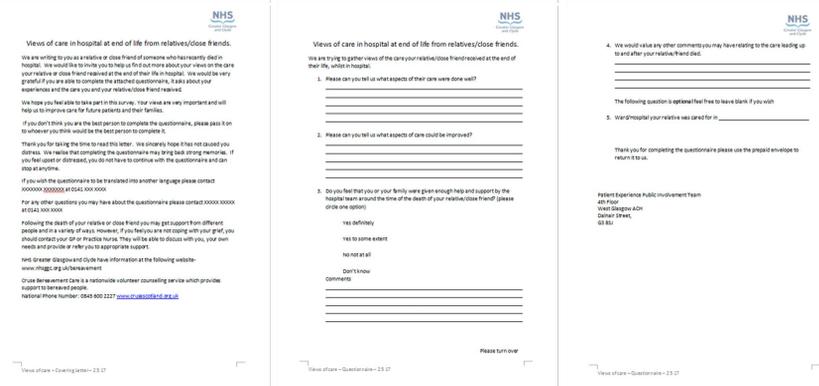
Improving the quality of care for dying patients and the bereavement outcomes for their families, carers and friends is a national priority, but obtaining feedback on end of life care from dying people and their relatives is difficult. This ‘Views of Care’ service improvement project was developed to retrospectively collect the views of how well *End of Life Care* was being delivered within four areas of the acute hospitals in Greater Glasgow and Clyde.

Method

This one year project developed a sensitive questionnaire and issued it to relatives/close friends at the time of collection of the death certificate. Four Acute areas with higher numbers of deaths were selected as pilot sites. Staff in pilot sites received support and information about the project. After 6 months staff questionnaires were issued to gather their views of the project and suggestions and improvements were incorporated. Further staff questionnaires were issued on completion of the project.

Aim

- To test the feasibility of collecting feedback using a questionnaire
- Capture qualitative Views of Care
- To identify areas of good practice and areas for improvement.
- To develop an action plan and target education/guidance for staff



Views of Care Questionnaire for relatives/close friends

Results

The feedback, detail an overwhelming view that *End of Life Care* is being delivered to a high quality and that this matters a great deal to relatives and matters to staff. In total 32 ‘Views of Care’ questionnaires from the bereaved family and friends were received. Narrative data from the questionnaires were themed and prominent words and phrases were identified. Narrative data from the staff questionnaires also underwent thematic content analysis. Themes captured valuable feedback and both benefits and concerns were identified. Areas of improvement were also identified. This shows that there is a continuing need to support and educate staff around end of life care especially around communication/bereavement.

Compassion
Communication
Care
Staffing
Dignity/Respect
Gratitude
Person - centred

Themed feedback from bereaved family and friends

Feedback improves practice
Feedback is good
Questionnaire
Inappropriate/Cause distress
Give with bereavement booklets
Timing /too soon
Staff find it difficult

Themed feedback from staff

Conclusion

This project has been effective in obtaining valuable feedback from bereaved relatives and close friends. The results identify good practice but also highlight areas for improvement. More research is required to identify the optimal timing and method, such as using technology, for obtaining views of care at end of life. These results will inform an action plan; and help target the development of education and guidance for NHSGCC staff on aspects of end of life care.

Examples of Relative/friend feedback

“My mother was consistently treated with dignity, respect, kindness and exceptional medical care”

“The registrar was unable to fully read the doctors handwriting on the notification of death”

compassionate
fantastic
wonderful
friendly
supportive
excellent
amazing
helpful
understanding
exceptional

Adjectives used to describe staff in feedback from questionnaires

Examples of Staff feedback

“Promotes discussion between staff. Makes you more aware of what can be done for the patient and family. Prompts you to ask the family if would like anything special for their loved one”

“I am apprehensive as it feels it seems tactless giving relatives a questionnaire at such a difficult time”