

HAS THE LIVERPOOL CARE PATHWAY IMPROVED THE CARE OF THE DYING PATIENT IN NHS LANARKSHIRE?

Claire S. R. Holmes*, Rosemary S. A. Meharry**, Stacey McLauchlan#, Jonathan Campbell#, Julie Graham+, Juliet Clutton^Δ

• CMT1, Infectious Diseases, Monklands Hospital, ** FY1, General Medicine Monklands Hospital, # Clinical Quality Service, NHS Lanarkshire, + Palliative Care CNS/LCP Facilitator, NHS Lanarkshire, ^Δ FY2, Obstetrics and Gynaecology, Wishaw General Hospital.

Correspondence: claire.holmes@doctors.org.uk

INTRODUCTION

The Liverpool Care Pathway ensures a high standard of care for the patient in their last days of life.

AIM

Five years after its introduction in NHS Lanarkshire, this review provides an insight into the standard of use of the Liverpool Care Pathway (LCP).

METHODS

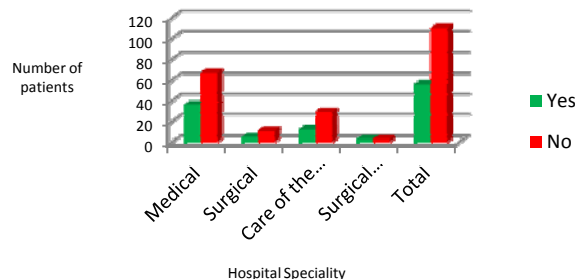
Retrospective analysis of case notes of patients who died in NHS Lanarkshire Hospitals in February 2012. The three hospitals audited were Hairmyres Hospital, Monklands Hospital and Wishaw General Hospital.

RESULTS

166 patients died within the 3 hospitals in February 2012.

56 patients were cared for on the LCP.

Figure 1 – Number of patients cared for on LCP by speciality.



RESULTS

110 patients died not cared for using the LCP.

Table 1 – Documented reasons why the LCP was not used.

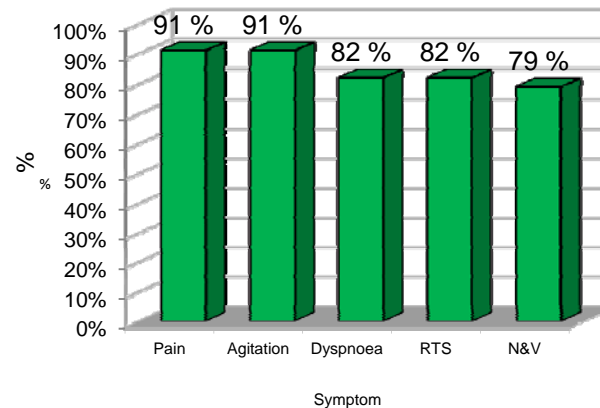
Reason LCP not used	Hairmyres	Monklands	Wishaw	Total
Sudden death	16	5	11	32
Palliative patient rapidly deteriorated	4	7	3	14
LCP agreed but death too rapid	0	3	2	5
Family too distressed	0	0	1	1
No evidence of LCP discussion	24	12	12	48
Medical staff disagreed with LCP	2	0	1	3
Not recorded	4	3	0	7

The LCP was used mainly in patients with malignant disease:

- 45 % of all patients with malignant disease were on the LCP.
- 28 % of all patients with non-malignant disease were cared for on the LCP.

For the 56 patients on the LCP version 11:

Figure 2 – Percentage of patients on the LCP with medication prescribed for symptom relief



RESULTS

For the 56 patients on the LCP version 11:

- 73% of patients had non essential medications discontinued.

CONCLUSION

The LCP was used to care for less than 50% of expected deaths during February 2012.

The LCP is being used mainly for the palliation of patients with known malignant disease.

When the LCP was implemented, it was found to be used to a high standard.

Unfortunately, many patients expected to die are being denied this high-standard, evidence-based care due to non-use of the LCP across NHS Lanarkshire.

PROPOSALS FOR POSITIVE CHANGE

- Results disseminated to the palliative care teams in the 3 hospitals.
- Arrange a refresher lecture for all members of the multidisciplinary team about the LCP.
- Answer concerns team members may have about its using the LCP.
- Re-audit.