

Palliative Care at the Front Door: Improving Anticipatory Care Prescribing

Dr Laura Shoveller, Dr Anastasia Levynska, Dr Sophie Johnston, Dr Abigail Walton



Introduction

- In 2021, it was identified that end of life care (EOLC) could be improved in the Acute Medical Unit (AMU) in the Royal Infirmary of Edinburgh (RIE).
- An audit conducted in 2022 looked a various aspects of EOLC including communication and environment but the stand out area for improvement was prescribing in particular, the prescribing of anticipatory care medications (ACPs).
- Often opiates and benzodiazepines were prescribed but the antisecretory and anti-emetics were frequently missed.
- Protocols within Hospital Electronic Prescribing and Medicines
 Administration (HEPMA) were identified as one path to improve prescribing which we have focused on in this project.

Methods

We collected and annoymised data from one month of deaths in AMU for each of the QI cycles:

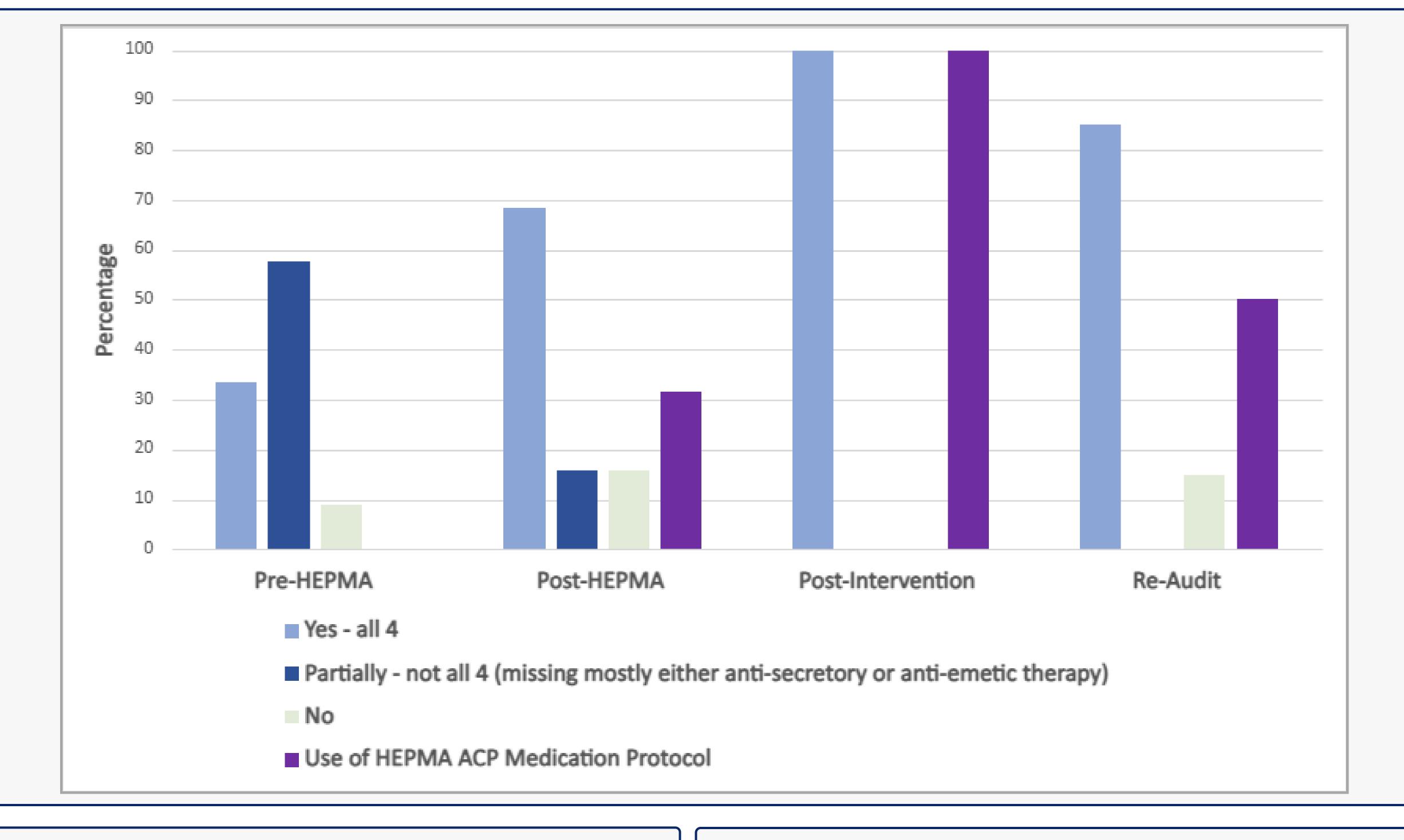
- 1. Baseline data, prior to HEPMA
- 2. Data after HEPMA was introduced
- 3. Following the introduction of regular teaching
- 4. After one year of intervention

Aims

Improve the quality of end of life care in AMU at RIE by ensuring the complete and correct prescribing of anticipatory care medication



Data



Intervention

- Regular palliative care teaching within the general medicine department
 - Highlighting the ACP protocol to doctors working in AMU
- Palliative care teaching was also introduced into the Resident Doctor induction in August
 - Introduces new doctors to the hospital palliative care team and
 - highlights the HEPMA ACP protocol they may use in different areas of the hospital

Conclusion

- The frequency of all four ACPs being prescribed has increased
- With regular teaching, the use of the HEPMA protcol has increased which contributes to all ACPs being prescribed
- There is an ongoing need for regular education as doctors rotate into the department

HEPMA ACP PROTOCOL

Anticipatory medication protocol: adult on regular opioid (Normal Protocol)

Anticipatory Medication Protocol: Adult
Palliative Care
(Normal Protocol)

MIDAZOLAM 10MG/2ML SOLUTION FOR ...
LEVOMEPROMAZINE 25MG/1ML SOLUTI...
HYOSCINE BUTYLBROMIDE 20MG/1ML S...
SP PALLIATIVE CARE

SP PALLIATIVE CARE

MIDAZOLAM 10MG/2ML SOLUTION FOR ...

LEVOMEPROMAZINE 25MG/1ML SOLUTI...

HYOSCINE BUTYLBROMIDE 20MG/1ML S...

Pre-populated set of an **opioid** (selected by the prescriber based on renal function), **midazolam**, **hyoscine butylbromide**, and

levomepromazine

Next Steps

- Continue regular departmental teaching to promote the use of the HEPMA protocol
- Survey the nursing team in AMU to identify areas for improvement from a nursing perspective
- Expand teaching to build confidence with symptom managment out-with pharmacological measures