

LEICESTERSHIRE
together

LEICESTERSHIRE JOINT STRATEGIC NEEDS ASSESSMENT



END OF LIFE CARE

SEPTEMBER 2009

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9.1 INTRODUCTION

At present most deaths in England occur in NHS hospitals (58%), with deaths at home (18%) and in care homes (17%) collectively accounting for around 35% of all deaths (based on ONS figures for 2004). Hospices account for around 4% of deaths, with around 3% occurring in other locations.

When people were asked about their preferences, the main findings were that:

- Most people would prefer to be cared for at home, as long as high quality care can be assured and that they do not place too great a burden on their families and carers;
- Some people, (particularly older people) who live alone, wish to live at home for as long as possible, although they wish to die elsewhere where they can be certain not to be alone;
- Some people however, would not wish to be cared for at home, and would prefer to be cared for in a hospice;
- Most, but not all, people would prefer not to die in a hospital – although this is where most people do die.

9.2 KEY FINDINGS

- 58% of deaths in England occur in NHS hospitals, 18% occur at home and 17% in care homes.
- Most people would prefer to be cared for at home, as long as high quality care can be assured and as long as they do not place too great a burden on their families and carers.
- In Leicestershire County and Rutland in 2007/08 there were 706 people on GP registers of palliative care.
- In Leicestershire County and Rutland, between 2005 and 2007 approximately 19% of deaths occurred at home.
- Local data for 2007 shows us that 20% of patients died in a residential address, with a further 10% dying in residential homes, 8% in nursing homes and 4% in a hospice.
- Leicestershire County and Rutland Primary Care Trust has plans through world class commissioning (WCC) to increase the support for patients to enable them to die in the place of their choosing.

9.3 END OF LIFE CARE IN LEICESTERSHIRE COUNTY AND RUTLAND

9.3.1 Palliative care registers in general practice

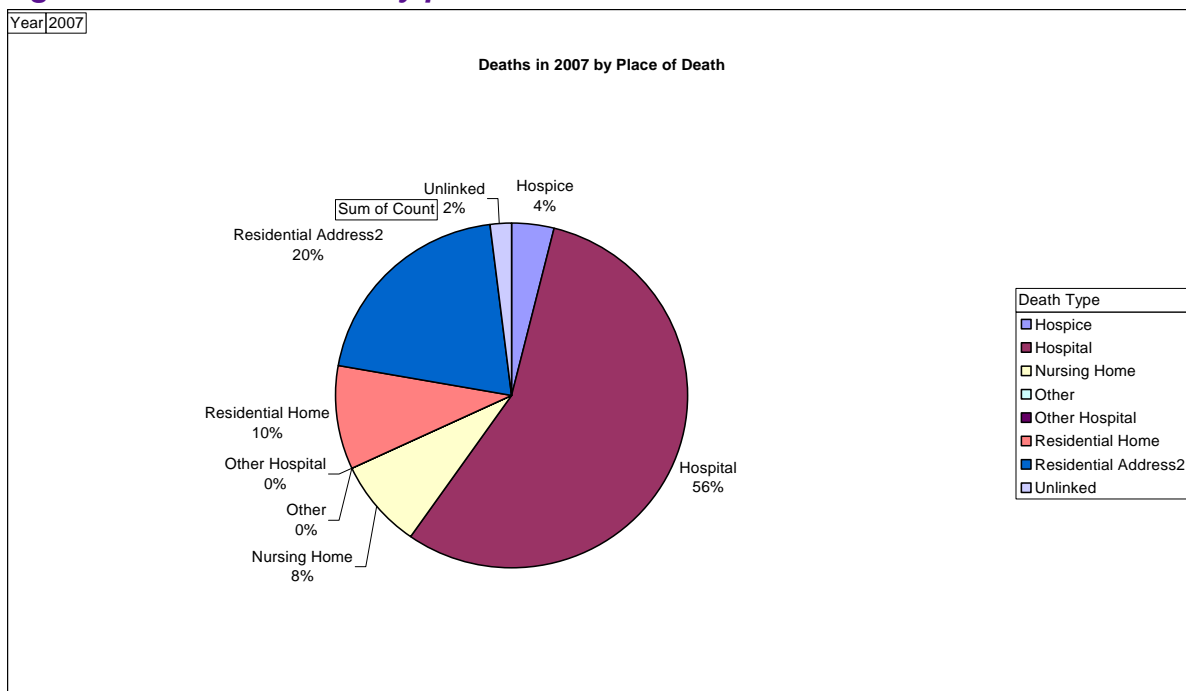
Palliative care by multi-professional teams enables people to achieve the best possible quality of life during the final stages of their illness. The care may be provided in a number of settings; at home (with support from specially trained staff), in a hospice or palliative care unit, at hospital or at a hospice day centre.

In the 2007/08 there were 706 people (0.11% of the Leicestershire County and Rutland population) on GP registers of palliative care (data is included in long-term conditions chapter), similar prevalence to the national average of 0.12%.

9.3.2 Supporting patients to die in a place of their choosing

Patients in NHS Leicestershire County and Rutland are supported to die in places that are likely to be of their choosing. Local data for 2007 (**Figure 1**) shows us that 20% of patients died in a residential address, with a further 10% dying in residential homes, 8% in nursing homes and 4% in a hospice. However, the PCT recognises the need to reduce the proportion of deaths that occur in hospital, which currently stands at 56%.

Figure 1: Deaths in 2007 by place of death

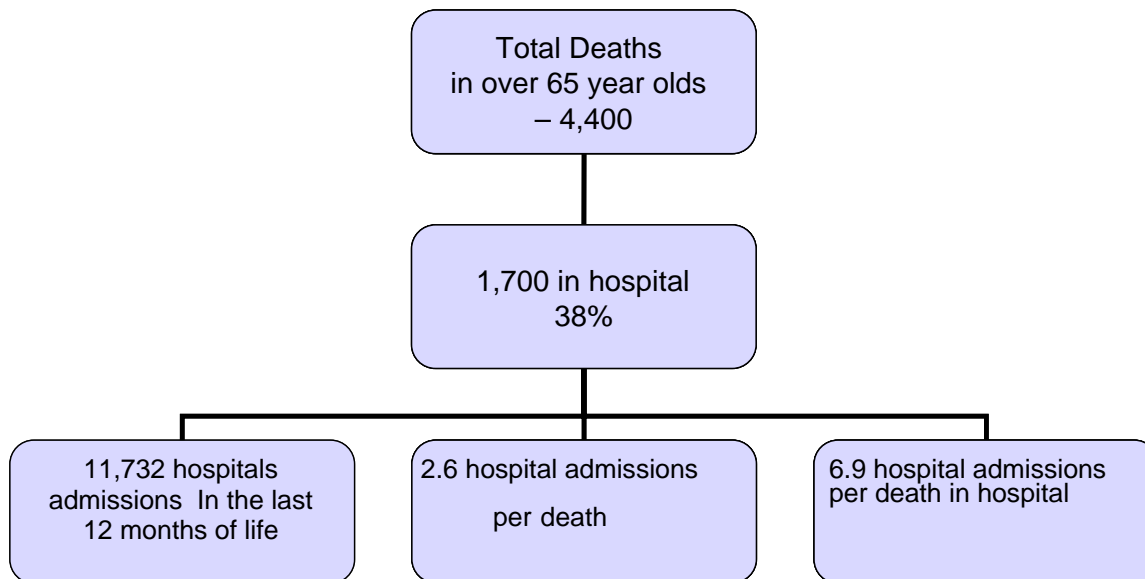


Source: Office of national statistics public health mortality file, warehoused by Leicestershire Health Informatics Service, analysed by PCT Public Health Directorate

9.3.3 Deaths to people aged 65 and over

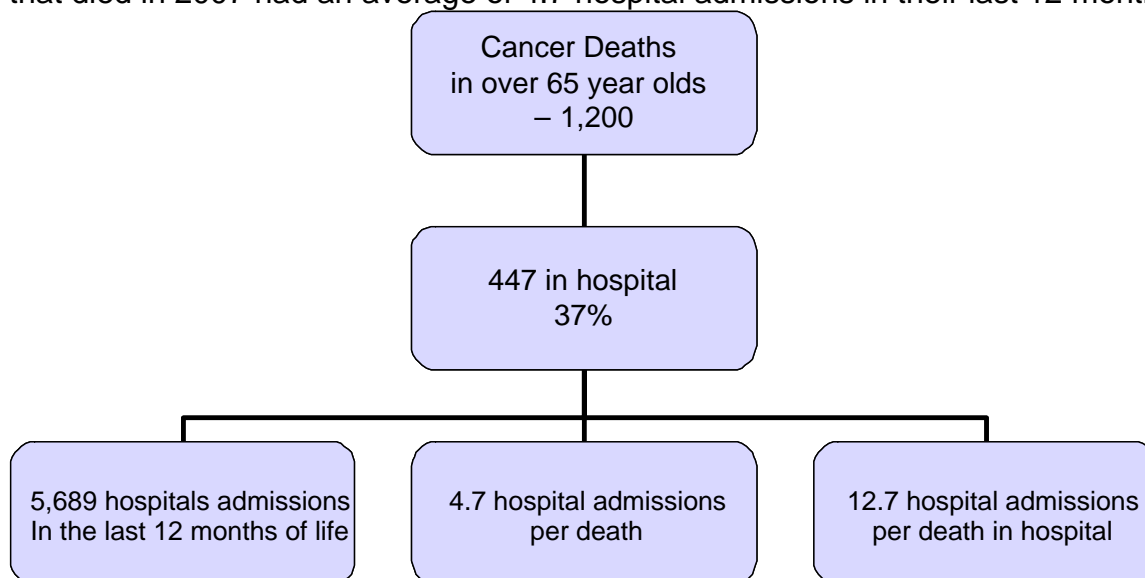
In 2007 4,400 people aged 65 and over died in Leicestershire County and Rutland. 1,700 of these deaths took place in hospital (38%). The patients that died in 2007 had 11,732

hospital admissions in the last 12 months of life. This means that each person that died in 2007 had an average of 2.6 hospital admissions in their last 12 months of life.



9.3.4 Deaths from cancer on people aged 65 and over

In 2007 1,200 people aged 65 and over died from cancer in Leicestershire County and Rutland. 447 of these deaths took place in hospital (37%). The patients that died in 2007 had 5,689 hospital admissions in the last 12 months of life. This means that each person that died in 2007 had an average of 4.7 hospital admissions in their last 12 months of life.



9.4 BENCHMARKING OF END OF LIFE CARE

The PCT has plans through World Class Commissioning to increase the support for patients to enable them to die in the place of their choosing. This will see the proportion of

people supported to die in their own homes rising from the current rate of 19% to 23.5% by 2013.

Table 1: World Class Commissioning Trajectory for Deaths at Home

		2009	2010	2011	2012	2013
VSC15_01	Number of deaths at home registered in the respective calendar year.	1,260	1,290	1,320	1,380	1,410
VSC15_02	Number of total deaths registered in the respective calendar year.	6,000	6,000	6,000	6000	6000
VSC15_03	Proportion of deaths at home registered in the respective calendar year.	21.0%	21.5%	22.0%	23.0%	23.5%

Source: PCT World Class Commissioning Trajectories, performance directorate

9.5 KEY ISSUES FACING LEICESTERSHIRE COUNTY AND RUTLAND FOR END-OF-LIFE CARE

Most people supported at home wish to die in their home with appropriate help from services. The high proportion of deaths that occur in hospital, which currently stands at 56%, needs to be reduced to reflect these views. Between 2005 and 2007 approximately 19% of deaths occurred at home. The Primary Care Trust has plans to increase this to 23.5% by 2013. Although some events in the year prior to death are unanticipated and would be expected to lead to unscheduled hospital admissions, patients with cancer have a diagnosis that is already known and could have a care plan based on their likely prognosis. With prior planning, it would be expected that patients with cancer would have fewer hospital admissions in the year prior to their death than other patients. The fact that older people with cancer had higher rates of hospital admissions during the year prior to their death than all older people raises questions regarding the planning and support of cancer patients in the community.