



Where end-of-life patients die, and whether that place is their choice, reflects how we view and care for chronically ill patients. In particular, deaths in hospital are seen as undesirable in contrast to deaths in the community. The Understanding Admissions Close to the End of Life (ACE) Study explores the decision-making process that leads to end-of-life patients dying in hospital shortly after admission.

Policy context

The End of Life Care Strategy (Dept of Health 2008) suggests that hospital deaths for end-of-life patients are contrary to popular choice, as well as costly for the NHS. Current health policy is to reduce the number of people who die in hospital, particularly the number of patients who die shortly after admission. These admissions are often deemed to be 'avoidable' or 'inappropriate', and may reflect inadequate staff skills, inadequate staff training, a lack of available care in the community, or a combination of these factors.

The decision-making process leading to hospital admission can, however, be complex, particularly if patients are frail and elderly. Researchers at the Cambridgeshire and Peterborough CLAHRC are undertaking a study (ACE) that investigates the assumption that hospital admissions close to the end of life are 'inappropriate', by taking into account a range of perspectives, including that of health care professionals, informal carers and patients.

The research

The ACE study is a 3 phase mixed methods study, focusing on the experience and care of patients with dementia, chronic respiratory disease or cancer. Qualitative data will describe how admissions are understood and viewed, whilst quantitative data will provide a measure of attitudes, perspectives and intentions.



The ACE Study

Phase 1 Retrospective case studies of deceased patients. Interviews with next of kin & 5 staff members involved in the admission, including: hospital staff, ambulance staff, GPs and out-of-hours GPs, care home staff, district nurses and other community healthcare professionals.

Phase 2 Focus groups held with managers, patients, commissioners and carers with experience of dementia, chronic respiratory disease or cancer.

Phase 3 Survey of health care professionals exploring views on admitting patients close to the end of life.

The first phase involves case studies of patients who die within 3 days of admission to hospital, and includes interviews of healthcare professionals involved in the hospital admission. Any admission to hospital involves a series of decisions, therefore both community and hospital staff will be interviewed.

The second phase introduces focus groups with patients and commissioners. The focus groups will discuss vignettes that describe situations involving end-of-life patients, with the aim of arriving at a decision on the most appropriate action for the patient, including possible hospital admission.

A postal questionnaire based on these vignettes will form the final phase, and will be used to quantify and validate findings from the previous two phases.

Implications

The ACE study will improve on the current understanding of how end-of-life care decisions are made in practice, and how health care professionals and next of kin view and experience the patient's admission to hospital. It aims to make policy and practice recommendations for improving end of life care pathways, which will help to ensure that patients are able to die in a place appropriate for their care needs, and according to their chosen preference.