GSF enables a systematic way to deliver the right care for the right people, in the right place, at the right time, every time.

**Key Messages**

The Phase 2 GSF Acute Hospital report showed:

- **Length of stay** has been reduced by an average of 6 days/patient
- **Better communication with GPs and District nursing teams** and improved information on discharge letters
- **Increased staff knowledge and awareness** on end of life care and use of other tools e.g.
  - advance care planning, LCP etc
- **Improved staff confidence** in recognising such patients, having early discussions with them and caring for them.
- **Improved early identification** and use of electronic registers / EPaCCS
- **Increased number discussing care planning** at MDT meetings
- **Improved advance care planning discussions** with patients in some and increase in recorded DNAR discussions
- **Improved numbers dying** in their preferred place of choice /usual place of residence
- **Increased communication** with carers in those who died or discharged

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**Phase 2 GSF**

GSF has been used in 32 hospitals, ranging from 1-3 wards per hospital. NB: At least five hospitals have undertaken whole hospital GSF AH Programme and several are progressing to GSFAH accreditation due in 2014.

- Comparative evaluation was carried out before and after intervention of the GSFAH training programme.

**Method:** An independent evaluation and analysis from eight hospitals participating
- Phase 2 GSF AH included;
  - Staff Survey
  - Organisational Survey
  - After Death/Discharge Analysis (ADA)
  - Qualitative data from a focus group
  - Foundation Level Questionnaire

**Next Steps:**
- Support hospitals to accreditation
- Develop improved integrated cross boundary care with the community
- Develop whole system improvements in end of life care

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**Cross Boundary Care**

"GSF in Hospitals was the missing link, completing the circle of improved coordination of care in primary care and care homes. Doing GSF has made all the difference."

Dr Karen Groves, Consultant Palliative Care, Southport

"GSF is well established in primary care and care homes so is the obvious tool to give us a shared common language."

Dr Linda Wilson, Palliative Care Consultant, Airedale Hospital

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The National GSF Centre in End of Life Care

GSF Quality Improvement Programmes

for generalist frontline staff - enabling a gold standard of care for all people nearing the end of life.