

Impact of Gold Standards Framework on Emergency admissions in the last 3 months of life



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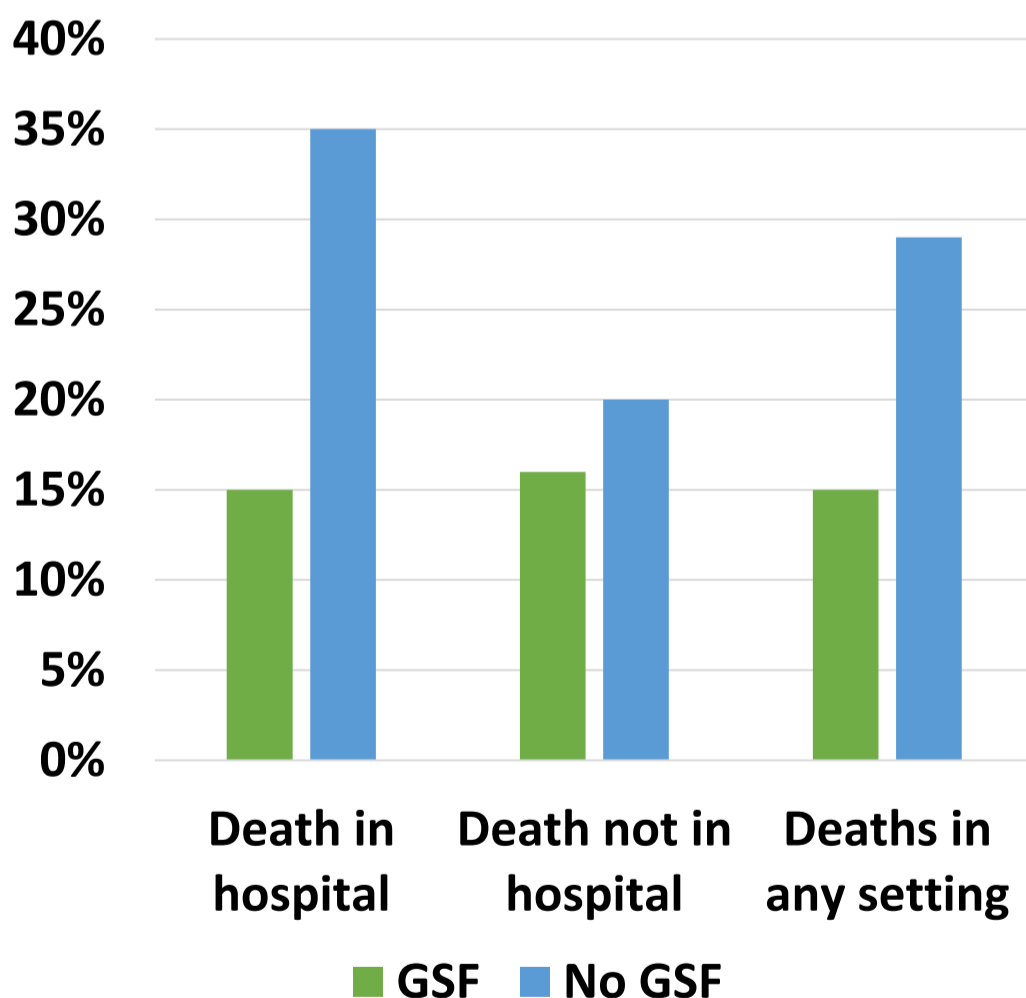
Introduction

The NHS has adopted the key performance indicator 'The percentage of deaths with 3 or more emergency admissions in the last 3 months of life' as a marker of quality in end of life care. The Gold Standards Framework (GSF) supports clinicians in identifying patients in their last year of life to aid in the development of proactive and personalised plans for care. At Dudley Group NHS Foundation Trust (DGFT) the GSF has been implemented trust-wide, and this review was aimed at evaluating the impact on the frequency of emergency admissions at the end of life.

Method

All adult inpatients admitted on 01/09/2023 at DGFT who died in the following 12 months were retrospectively reviewed to identify if, on 01/09/23, each patient had a recorded GSF Code, date of death in any setting and the number of emergency admissions in the last 3 months of life.

Percentage of inpatients who had 3 or more admissions in the last 3 months of life; based on presence of coded GSF status on 01/09/23



Results

There were 647 adult inpatients on the 01/09/2023 and of these 216 patients died within the following 12 months in any setting (33%); with 117 deaths in hospital (54%) and 99 not in hospital (46%). Furthermore, 104/216 patients that died had been GSF identified during their admission on 01/09/2024.

Comparing deaths in any setting; the incidence of ≥ 3 emergency admissions to hospital in the last 3 months of life was 15% for those who had a coded GSF on 01/09/23, and 29% for those who did not.

For patients who died in hospital; the rate of ≥ 3 admissions was 15% for those with a recorded GSF on 01/09/2023 compared to 35% who did not have a recorded GSF status on the same date.

For patients who did not die in hospital, the incidence of ≥ 3 admissions was 16% for those with a GSF on 01/09/23 and 20% for those without.

Implications of work on practice

Having a recorded GSF status in the last 12 months of life locally reduces the incidence of emergency admissions in the last 3 months of life

Conclusion

GSF implementation has supported in reducing the number of unplanned emergency admissions in the last 3 months of life. This will have a positive impact on quality of care for patients and for capacity within the Trust. The impact was greatest for those who died in hospital.