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GEOGRAPHICAL VARIATION IN HOSPITAL MORTALITY – DOES WHERE YOU LIVE DETERMINE HOW YOU DIE?

10.1136/bmjspcare-2011-000053.141

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This study investigates geographical variation in underlying causes of death (CoD) for people that die in hospital. Our cohort includes deaths in England 2004–2008 where death occurred during an admission of \leq 30 days. Approximately 60% of all deaths occur in hospital, 45% die in hospital during an admission of \leq 30 days. We analysed variation by CoD and Local Authority (LA) of residence.

Previous studies 1 & 2 indicate that individuals near the end of their life have increasing need of hospital services. Our study links Office of National Statistics (ONS) mortality data to Hospital Episode Statistics (HES) admission data. The ONS and HES linkage provides a longitudinal view of the hospital services received in the month before death and provides accurate CoD information not available in HES.

Examples of the LA variation in proportions of deaths occurring in hospital in the last month of life include; Cancer (18–68%), Cardiovascular (20–47%), Stroke (25–67%) and Respiratory (26–67%). By identifying and investigating variation in; Cancer, Stroke, Cardiovascular and Respiratory deaths, this study will inform policy and planning decisions concerning the nature of patients needs in their final month of life.