

**Conclusion** This innovative service achieved the vision of both the EoLC Strategy and the hospice's objective of reaching patients and staff in care homes to reduce hospital deaths and to meet training needs. It empowered the carers in the home by giving them the confidence to comply with residents' wishes knowing that appropriate support was available.

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# REACHING OUT TO CARE HOMES: A NEW SPECIALIST PRACTITIONER SERVICE

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**Introduction** The End of Life Care (EoLC) Strategy (2008) recognises that most people in care homes consider it to be their main residence, and the place where most would choose to die yet deaths in care homes represent 16% of all deaths.

**Aim** To provide:

- ▶ Support for patients and staff in care homes to access medications and expertise in palliative care to prevent hospital admissions
- ▶ An opportunity for patients /families to express their wishes for preferred priorities of care to prevent them dying in unfamiliar surroundings.

**Method** All new referrals for residents in care homes (not known to community palliative care services) were taken by the Specialist Nurse Practitioner and further clinical information obtained from the GP or hospital.

An assessment visit was organised, and the data on referrals and interventions were recorded.

**Results** 64 patients were supported:

- ▶ 81% died in the care home
- ▶ 4% were either still alive or place of death was unknown
- ▶ 4% died in hospital and 1% in the hospice
- ▶ 25 prescriptions were issued for anticipatory drugs
- ▶ 24 prescriptions were amended
- ▶ 7 homes requested, and were provided with, training in EoLC.

**Discussion** Patients were able to receive support at the end of life and to remain in their own environment, without trained nurses on the premises. The need for increased training in EoLC, highlighted by staff, was also met.