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IMPROVING HOME DEATH DOWN UNDERR Molenaar¹ *¹South East Palliative Care*

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Background The rate of home death of palliative care patients in a Melbourne community based palliative care service has decreased over the last few years. As a result, the service has initiated a 6 month Structured Support Programme (SSP) intervention, completed in November 2012, encompassing a three visit platform of support which will be provided by a Nurse Practitioner Candidate (NPC). Preliminary results will be discussed in this presentation.

Aim Overall, this study aimed to determine whether a SSP provided by an advanced practice nurse can improve outcomes for patient and caregivers at home compared to regular support from the nursing team. Specific aims are to: improve symptom relief for patients, enhance psychosocial support for patient and carers, facilitate place of death according to patient and carer wishes and articulate a Nurse Practitioner (NP) model supporting complex End of Life (EOL) care.

Methods The SSP provided by the NPC established both patient and carer needs, from which an anticipatory care plan was developed to provide a platform of future support for the patient and the carer.

Results 47% of patients who had the SSP died at home compared to 33% who did not. 60% of patients who had the SSP died where they wished compared to 33% who did not.

Discussion This intervention was provided by a NPC, it was possible to identify where an endorsed NP would enhance access to medications

Conclusion A SSP provided by an advanced practice nurse can improve outcomes for patient and caregivers at home.