

106

**IMPLEMENTATION OF THE LIVERPOOL CARE  
PATHWAY IN THE ACUTE SETTING IMPROVED END  
OF LIFE CARE**S Fullerton,<sup>1</sup> Sandeep Bhagat<sup>1</sup> <sup>1</sup>*Eastern Health, Victoria, Australia*

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**Background** The care of dying patients and families represents an important aspect of health service provision. 1500 patients a year die in Eastern Health beds, only 40% of whom are seen by the hospital based palliative care consultation team (HBPCCT). There is room to improve the quality of care offered to dying patients and families outside a specialist palliative care setting. The Liverpool Care Pathway (LCP) is an integrated, evidence-based, multidisciplinary document representing the 'Gold Standard' in quality end-of-life-care provision.

**Aim** To implement and evaluate the LCP in acute wards in EH.

**Methods** Wards with the highest numbers of deaths were identified. After consultation, the LCP was implemented. Surveys of staff were carried out before and after implementation.

**Results** More than 200 patients and families have been cared for on the LCP. Some patients were discharged back to residential care and some to palliative care beds. Only 9% of the 88 surveyed staff who had used the LCP felt that it had not helped improve the care of dying patients and families in EH, and 6% of staff felt that the LCP had not helped staff in caring for dying patients.

**Conclusions** Staff feel that the introduction of the LCP improved end of life care at EH. Use of LCP did not prevent transfer from acute beds to specialist palliative care beds.