P 236

## AUDIT OF AVERAGE LENGTH OF STAY IN MARIE CURIE HOSPICE BELFAST

Mary-Ann McCann, Joan Regan, Jenny Doherty. Marie Curie Hospice, Belfast, Northern Ireland

10.1136/bmjspcare-2014-000654.277

Background Average Length of stay (ALOS) is a widely used indicator of hospital and hospice performance and commonly viewed as a measure of efficiency. The standard for ALOS of patients in Marie Curie Hospice Belfast is ≤14 days.

Aims of this audit were (1) to assess how often we meet the standard for ALOS in Marie Curie Hospice Belfast, (2) to identify the ALOS of patients admitted in a 6 month period and (3) the reasons why some patients stay is >14 days.

Results 48.3 % of patients had an ALOS ≤14 days. The ALOS between February and July 2012 was 19 days. 59.5% of patients died and 40.5% were discharged. The ALOS of patients who died was 18.9 days and for those who were discharged, it was 19.2 days. Patients with ALOS >14 days were older, more of them lived alone and fewer of them had a package of care in place. Symptom control was the commonest reasons for an ALOS >14 days, with an average symptom control admission lasting 35 days. Patients with brain tumours and prostate carcinoma had the longest ALOS at 47.5 days and 37.1 days respectively.

Conclusions Symptom control was the most common reason for increased stay possibly reflecting the fragility and complexity of these inpatients and the potential for their condition to change. Identifying patients who may have a more complex discharge and beginning the discharge process at an earlier stage

may help reduce the ALOS. The ALOS of patients who eventually died in hospice was 18.9 days. ALOS is a crude measurement of patient stay and occupancy and offers no information on quality of patient outcomes. One area for improvement is the development of a tool which incorporates ALOS, complexity and quality of care for patients.