contrast to non-cancer patients. Only a quarter of all patients who died were on the register, suggesting a need for earlier recognition and better coordination of care, particularly for non-cancer patients.

11 NATIONAL SNAPSHOT STUDY OF END OF LIFE CARE IN THE COMMUNITY FOR CANCER AND NON-CANCER PATIENTS

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ABSTRACT

Introduction Primary care provision of end-of-life care is crucial in achieving high quality care and reducing hospitalisation. The 2009 National Primary Care Snapshot Audit in End-of-Life Care provided the largest assessment of community provision, revealing key areas for further improvement.

Aims To realistically assess current provision and explore differences between cancer and non-cancer patients, those on the palliative care register, and other factors leading to quality end-of-life care.

Methods 502 General Practitioner practices in 15 PCTs (60% uptake) submitted data from 4500 patients for every death over a 2 month period. The GSF After Death Analysis Audit Tool providing outcome data for individual patients, and compared with recommended best practice standards.

Results Only 27% of patients who died were included on the palliative care register, of these 23% were non-cancer, 17% unknown and 69% cancer, compared with 26% patient deaths from cancer. Those on the register were more likely to receive well coordinated care but 42% were considered unpredictable.

Conclusion This snapshot provides an objective overview of current community end-of-life care, demonstrating key areas for further improvement. Patients on the register received more proactive, better coordinated care than those not on the register, and cancer patients were well represented on the registers and more likely to receive good end-of-life care, in