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Background The Cambridgeshire Hospice at Home (H@H) service provides specialist community care for people approaching the end of their lives, enabling them to be cared for and to die at home if that is their wish. An independent evaluation is underway that is both shaping the evolving service and providing commissioners with detailed information needed to ensure continuing NHS funding.

Methods A multifaceted approach has employed:

- a) Detailed case-note review of all 450 patients referred to the service between January 2012 and August 2013, from referral through to post bereavement follow-up. Data includes each patient/family assessment, multidisciplinary visit, telephone call and night care episode, collated to capture the range of holistic care. Analysis is descriptive.
- b) Interviews with individuals clustered around 17 deceased patients, including bereaved carer, H@H staff member most involved in the case, the referring healthcare professional (HCP) and other professionals significantly involved. Carer interviews generate understanding of the patient and carer in their environment, background to the illness, care provided, service related issues and experience since the death. Interviews with H@H staff and HCPs address the experience of being a H@H Nurse, involvement with the patient, communication and service related issues. Analysis uses constant comparative methods.

Results/findings Data collection is still underway and ends in October. Of the 207 deaths analysed to date, 166 (80.1%) died at home, 38 (18.8%) in hospice and 3 (1.4%) in hospital; 196 (94.7%) died in their preferred place. Description of the complete quantitative dataset will be presented, alongside analysis of the qualitative interviews (by group—carer/staff/other HCP and by cluster).

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HOSPICE AT HOME: OPTIMISING CARE AND ENABLING HOME DEATH

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