UNDERSTANDING THE NEED FOR RESPITE CARE AT DOVE HOUSE HOSPICE: A RETROSPECTIVE AUDIT

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Background UK policy frequently refers to respite care as a key factor in supporting carers. (NICE, 2004; Department of Health, 2005) However, little is known about respite care in palliative and end of life care and the role of hospices in providing respite care. (Wolkowski & Carr, 2017; Vandepitte et al., 2016; Wolkowski et al., 2010). Dove House Hospice (DHH) in Hull provides respite care. Our observation is that the needs of both the patient and carer are frequently complex and patients are often highly dependent, with a high level of nursing and sometimes medical needs.

Aims To increase our understanding of the characteristics of respite care patients and carers with a view to articulating the need for hospice respite care, its benefits and potential benefits.

Methods A retrospective audit of records of respite care patients (2015–2016) was carried out. A simple data collection tool, organised on a Microsoft Excel spread sheet was used to extract and analyse data. Data collected included demographic and patient characteristics, diagnosis and condition background, referral/admission details, living arrangements and outcome of admission.

Results The majority of the 90 patients admitted for respite care were male (58%). Complex neurological disorders were the leading background diagnosis (28%) among the 16 diagnostic groups identified. Most referrals were from the community services or from patients and their families. Although most patients, 80%, were discharged home after respite, about 12% died during the course of the respite. As this was a retrospective audit, we could not examine quality of care or impact of the intervention on patients or carers because the information was not available.

Conclusion The audit has enhanced our understanding of respite care patients and their carers. Results from this audit will provide a platform for further enquiry helping to guide and improve service provision.

THE INSIDE OUT HOSPICE PROJECT – ARDGOWAN HOSPICE


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Introduction Ardgowan Hospice has delivered specialist palliative care services to the people of Inverclyde for the past 35 years. Potential recipients of the services have had to travel to our hospice buildings, this coupled with the need for professional referral has limited the range of people who could benefit from much needed support. Traditionally we have offered support through in-patient stays, day services including therapy, bereavement, family and child support along with home care services. This model has been unchanged since the hospice opened.

Aims With the support of the Big Lottery we will transform the services that are offered to the people of Inverclyde. To make them more accessible, more inclusive and reaching deeper and wider into communities, in essence being able to offer our support where, when and how they want, services delivered.

Method Through a consultation across communities and in collaboration with partners we have an understanding of the current view of what the hospice provides and the view of how care should be delivered in the future. This engagement was via online survey and hardcopy format distributed across Inverclyde, 21 focus groups and six open groups were held where participants were guided by the questionnaire in an open discussion.

Results Response to the survey was 41%. Over 500 comments were received over the course of the consultation from both individual responses and group settings. The analysis of the needs and wishes is now being carried out, this will determine how we will transform the services to meet the needs.

Conclusion On completion of the analysis Ardgowan Hospice will work collaboratively with communities and partners to develop appropriate responses and implement the necessary changes to achieve the project goals, reviewing delivery across the four year term to ensure that services continue to meet needs.