



Audit of referrals to a specialist palliative care unit – identifying areas for improvement

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Introduction

Improving access to specialist palliative care is one of the main objectives of the HSE National Clinical Programme for Palliative Care.

We studied referrals to a Specialist Palliative Care Unit (SPCU) with the following aims:

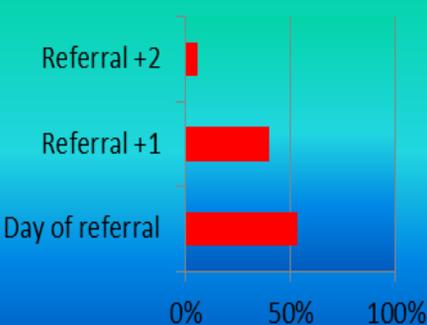
- To document the response to the urgency of referrals made to the SPCU - compare date of referral with date of actual patient admission.**
- To evaluate information flow between referring source, General practitioner (GP), inpatient unit (SPCU) and family of patient.**

Method

A retrospective chart review of 20 patients admitted to the specialist palliative care unit between April and June 2013 was conducted.

Referral forms, admission assessment documentation and correspondence with GPs were reviewed using an audit tool and with reference to available national standards.

Admission day for urgent referrals



Results

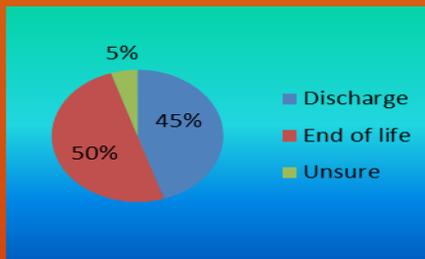
Fifteen out of twenty patients were deemed **urgent** referrals to the SPCU. **(75%)**

100% of these referrals were admitted to the unit within the specified 48 hour timeframe as delineated in the national palliative care referral form.

Eight out of fifteen (53%) of urgent referrals were admitted **on the day** of referral demonstrating a high level of responsiveness by the unit. Further analysis of communication flow was undertaken between referral source, the patient and family and the IPU.

There was evidence that discussion on the likely outcome of the admission occurred at the time of referral with 60 and 65% of patients and families respectively but the outcome of the referral was only discussed with only 25% of GPs.

Expected outcome of admission



Conclusion

This audit of referrals to the SPCU indicates that timely access is facilitated for urgent referrals.

It also demonstrates that more work is required in communicating with the primary care giver and family at time of referral

Discussion

The pathway for urgent referrals to a palliative care unit should be as efficient as possible.

This minimizes stress and worry for both patient and their family.

This audit highlights the success of the admissions process to the SPCU.

It also highlights the extent of communication between the stakeholders in the admission process but clarifies areas for improvement in particular communication with GPs at the time of admission.

Areas for improvement have been demonstrated and will be re-audited in future to ensure continued high standards.

Future Work

This audit will form part of an ongoing audit cycle within the organization.

Acknowledgements

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References

Please contact Dr John Carney for full list of references.

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