



Improving End of Life Care in Somerset Care Homes

Comparative study of hospitalisation rates between GSF trained care homes and non-GSF homes in Somerset



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GSF enables a systematic way to deliver the right care for the right people, in the right place, at the right time, every time.

Quality Improvement

Quality Assurance

Quality Recognition

Aims:

The Somerset GSF Care Homes Project study compared the experience of those homes that completed the GSF training programme from 2009-11 with other Somerset care homes that did not undertake the training. Fifty one of the county's 67 nursing homes took part in the programme plus 13 residential homes.

Dr Chris Absolon, GP Palliative Care Lead for Somerset, and his colleagues, including GSF Facilitator Jenny Coles, had a number of planned outcomes for the project and the study assesses the impact of running the GSF CH Training over 2 years against the control of other non-GSF care homes.

The main aims were to improve the quality of care for all residents during their stay and reduce avoidable hospital admissions, enabling more people to die with dignity in their care home, thereby improving cost effectiveness. In addition to the quantitative data gathered, there are also qualitative reports of improved collaboration between the care homes, their GPs and specialists. The satisfaction surveys conducted also indicated an improvement in the quality of end of life care.

Methods:

Data was obtained from Secondary Uses Service (SUS), the Exeter system, and the Office for National Statistics. Data on admissions from all 224 Somerset care homes was analysed for 2 years before the project to 6 months afterwards.

Dr Irena Holland, Public Health Information, produced a report in January 2011 'GSFCH in Somerset' in which she detailed the aims and methodology. Further details are available.

Key Messages

- The GSF care homes programme led to improved quality of care, cost effectiveness and reduced hospitalisation compared with non-GSF care homes in Somerset over a 2 year period.
- Controlled independent comparison by Somerset Public Health Department provides evidence that the care homes that were GSF trained showed a reduction in hospital admissions, deaths and emergency calls and improved satisfaction of care, compared with homes that have not yet received GSF training.
- All care homes have shown some areas of improved care, but the GSF homes had significantly fewer residents dying in hospitals and more dying in the care homes.
- GSF training is cost effective— there were 116 fewer admissions/ year in the GSF trained homes, saving approximately £500,000 (at approx. £225 / day av. 10 day stay using NAO figures) and enabling more to die at home.

Background:

GSF is extensively used across the UK (in over 2500 GSF-trained care homes). In 2009 Somerset Primary Care Trust and Wyvern Health funded the Gold Standards Framework Programme for 64 Residential and Nursing Care Homes- the first 33 homes started the programme in 2009.

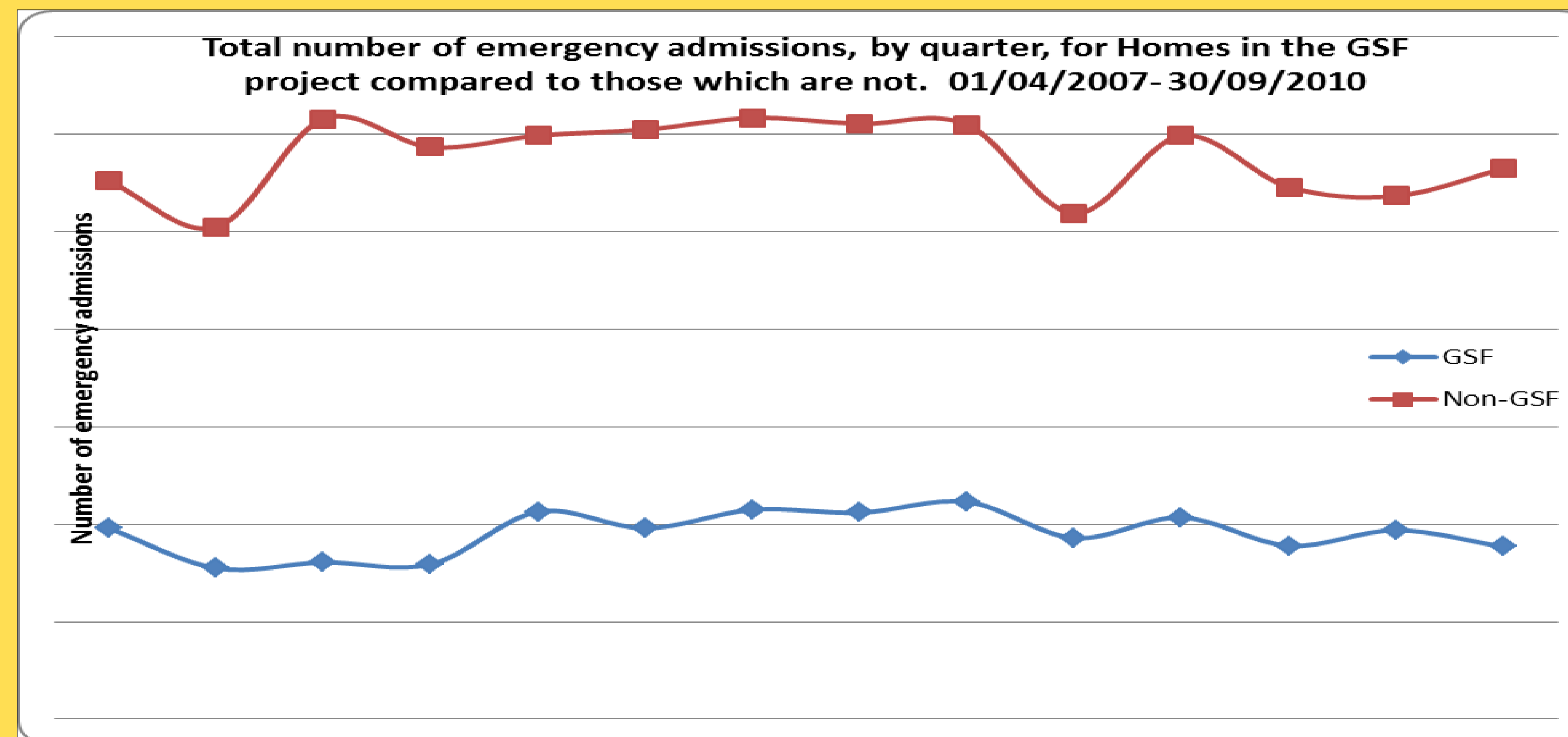
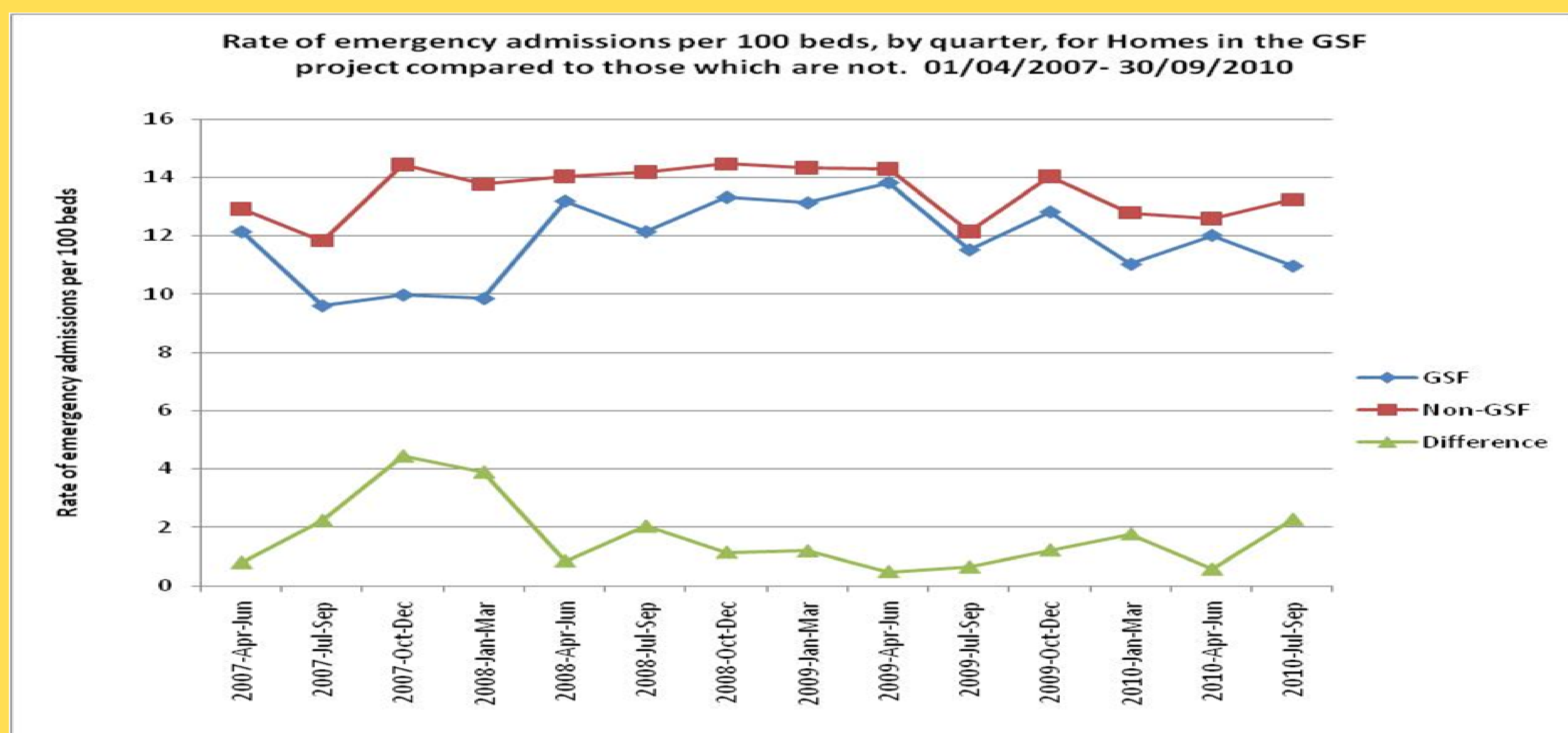
Summary of Findings:

- Deaths in acute hospitals for residents of GSF homes and emergency admissions fell significantly compared with non-GSF homes.
- Following the GSF programme 15% more residents were dying in the care home (87% compared with 72% non GSF homes' residents).
- Hospital deaths in GSF homes in the last quarter were 13% compared to 28.1% in the non-GSF homes.

Conclusion:

"The GSFCH programme has met all of it's planned outcomes, the most impressive being the reduction in hospital admissions and deaths, demonstrating the effectiveness of the programme." (Dr Chris Absolon)
This was instrumental in obtaining funding from NHS Somerset for a further 20 Care Homes to take part in GSF.

Somerset Care Homes receiving their Award



Somerset GSFCH Team Award



"The NCF is proud to be associated with the GSF which has been developed to ensure that people in care homes receive the best quality of care and support. The professional and rigorous framework that it brings and the commitment to staff training it requires, provides an important level of reassurance about the services being offered"

Des Kelly OBE, Executive Director
National Care Forum

"The fact that there is a Gold Standard for care homes means that there is the possibility that nationwide the quality of care for people who are dying in this country will change"

Baroness Neuberger speaking at GSFCH Award Ceremony Jan '09, London



Primary Care



Care Homes



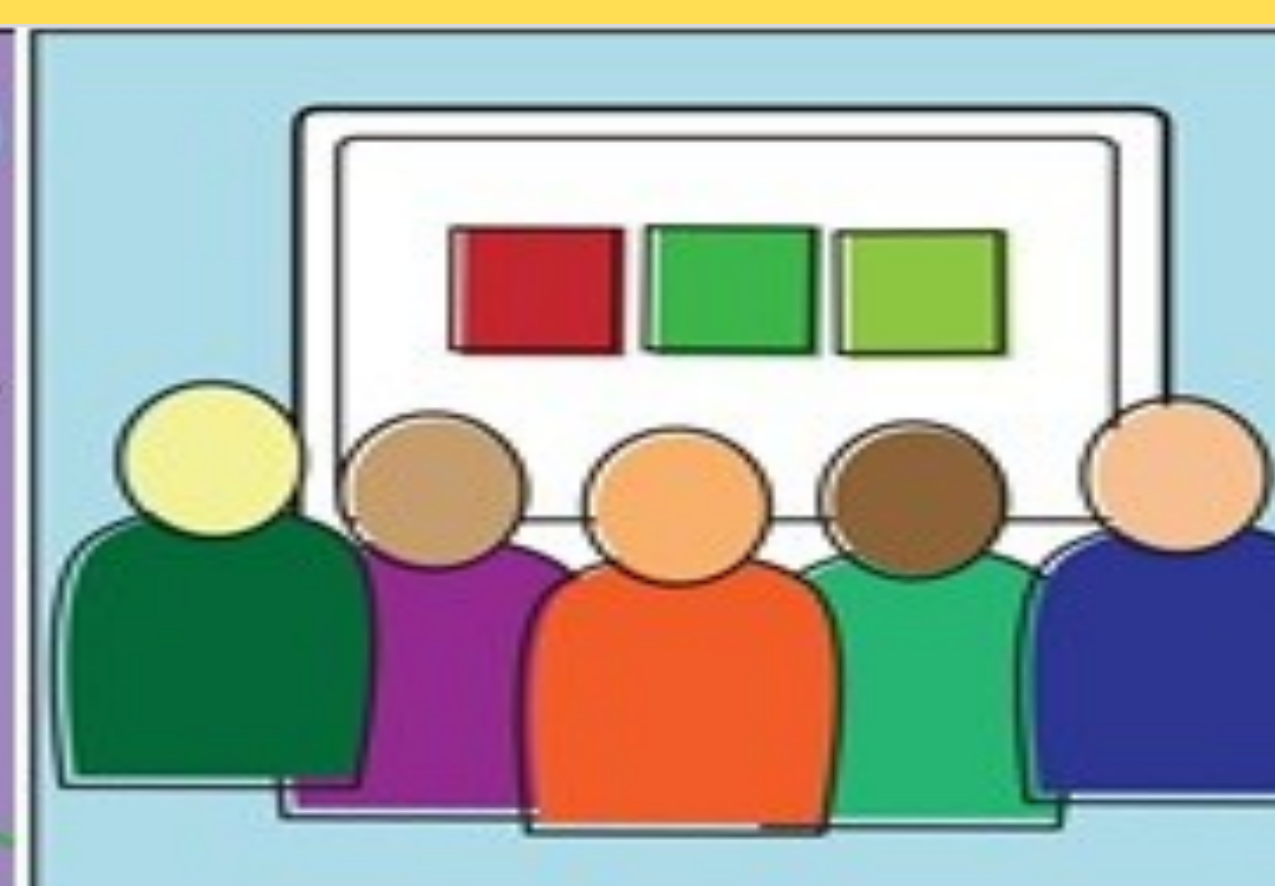
Acute Hospitals



Community Hospitals



Domiciliary Care



Virtual Learning Zone



IT Solutions



Dementia Care

The National GSF Centre in End of Life Care

GSF Quality Improvement Programmes

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