



# Going for Gold – End of Life Care in Primary care

## Achieving a gold standard of end of life care in GP Practices



-findings from the first round of GSF Accreditation.

Professor Keri Thomas, Julie Armstrong Wilson  
The GSF Centre in End of Life Care, West Midlands, UK

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

### Context and Aim:

- Over 95% of GP practices in the UK use principles of Foundation Level GSF i.e. they have a GSF/Palliative Care Register and a meeting to discuss these patients
- In 2009/10, the National Primary Care Audit confirmed that only 25% of people who died were included on the register, most were cancer patients, but importantly, all of the people included on the register received better coordinated care.
- Next Stage GSF Going for Gold Training was developed as a distance learning practice based training programme with 6 modules, homework and independent assessment.
- The first practices undertook GSF Accreditation in 2012, endorsed by RCGP

### Method:

- Seven practices progressed to GSFC Accreditation,
- It includes 10 key ratio metrics (see table)
- A portfolio with examples from 5 areas i.e.
  - right patient,
  - right care,
  - Right place
  - right time,
  - every time,
- After Death Analysis Audit of 10 patients
- follow up phone call interview
- Reports to an independent panel
- Presentation of Awards

### Key Messages

Practices have shown tangible improvements in their care for people nearing the end of life (final year of life) with any condition following the GSF Primary Care Going for Gold Programme and Accreditation.

They developed sustained systematic improvements in care for their whole population, improved staff confidence and morale and enabled more to live and die in their preferred place of care, in line with national policy, NICE Standards and End of Life Care Strategy

### Key successes were :-

- early recognition of patients near the end of life for inclusion on the GSF/Pall. Care Register (32%-69%),
- increased numbers of patients with non-cancer conditions (13-44%) and from care homes (15%-44%)
- more recording advance care planning discussions (15-62%), and DNAR (14-60%)
- improved carers assessment (3%-60%), and bereavement care (23%-82%)
- development of practice protocols to enable sustained long term quality improvement in all
- national recognition in the medical press and media

### Results:

GSF aims to improve the :-

- quality of care
- coordination and communication
- outcome measures for patients

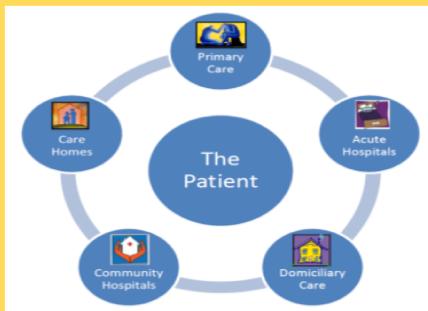
The results showed

- qualitative improvement** in confidence of staff and quality of care of patients and their families
- improved collaboration and coordination** of care with care homes, hospitals, hospices, specialist palliative care and other non-clinical staff and leading to better integrated cross boundary care
- specific outcome measures** that improve the early recognition and care for all patients in their practice population—not just those with cancer (see graphs below)

### Conclusion:

Significant improvement was seen in all and outstanding results were obtained from several practices. Particular improvements included earlier identification and inclusion on the GPs' GSF/Palliative Care Register leading to better systematic care of patients. Additional benefits were improved confidence of staff, pride in this area of work and development of a sustainable plan. This demonstrates that real progress can be made by primary care teams, encouraging further practices to build on Foundation Level to such Quality Recognition.

### Integrated Cross Boundary Care



Neil Hunt, CEO RCGP, presenting Quality Hallmark Awards to GSF Accredited practices at the GSF Conference, 28th November 12, London

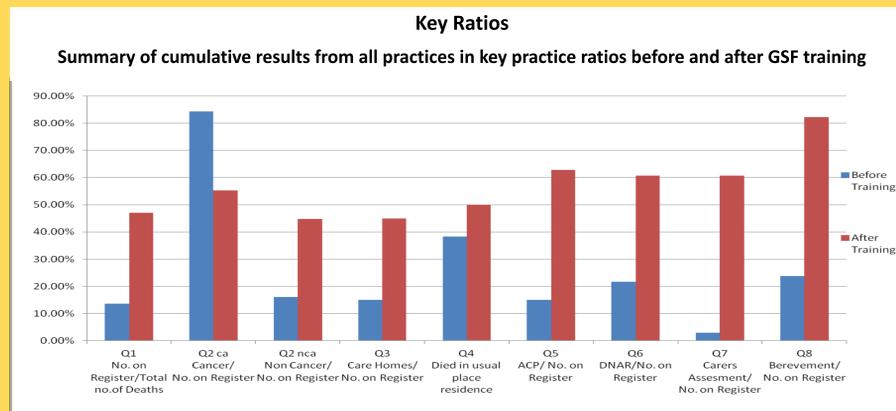
"This has helped us improve cross boundary care in the community and with hospitals"  
Practice Manager

"GSF Going for Gold has given us a vision of where we want to go and the tools to get there. The impact has been enormous"  
Pete Nightingale, GP Facilitator, 13 practices doing Going for Gold in Lancaster and CCG

"GSF has been transformational for us as a practice and for our patients. As GPs we should care for people from the cradle to grave and indeed beyond, looking after their families. GSF has helped us put the systems in place to provide that continuity of care."  
Dr Gillian Au, GP Queensway Medical Centre

"This was one of the most worthwhile projects we have ever done as a practice."  
Practice Manager

"The GSF training has enabled us to provide the patients with proper continuation of care. Being on the register, they might not die for a long time, but will get the best care until the time comes. It means all 14 GPs know what to do and when to do it, and if they are not sure then the information is available or they can speak to a colleague. I believe all practices are going to have to do this."  
Lynn Jones Practice Manager at King St Practice, Lancaster



## The National GSF Centre in End of Life Care

### GSF Quality Improvement Programmes

for generalist frontline staff - enabling a gold standard of care for all people nearing the end of life.

www.goldstandardsframework.org.uk info@gsfcentre.co.uk +441743 291 891 / 367 066