

Marie Curie Cancer Care Research Programme - Project Grant

Project details
<p>Dr Maureen Coombs and Professor Alison Richardson (Joint PIs), University of Southampton</p> <p>An investigation about transferring patients in critical care home to die: experiences, attitudes, population characteristics and practice</p> <p>Duration of project: 24 months Proposed start date: 1 October 2011 (TBC) Budget: £166,825</p>

Abstract
<p>Background Policy in end of life care aims to increase the number of people dying in their preferred place of care, generally at home. Each year 23,000 people die in Intensive Care in the United Kingdom (UK). Transferring critically ill patients home to die is unexplored. Research is needed to develop evidence to inform care in the last hours/days of a critically ill person's life.</p> <p>Aims and objectives This three phase mixed methods study will occur over 24 months and explore the desirability and feasibility of transferring critical care patients home to die. Specific objectives are to:</p> <ul style="list-style-type: none"> - Investigate current practice, likely demand for, and views about this option. - Establish the size and characteristics of the potential population who might be offered this option. - Identify the resources and infrastructure required to facilitate this option. <p>Methods Phase I will investigate the desirability of transferring patients home to die from critical care areas. Using review of international literature and case studies from previous work, a focus group guide will be developed and used with five groups and include community, critical care and user stakeholders. Findings will be used to develop an email questionnaire surveying national practices of, demands for, and views towards taking patients home to die in senior clinicians across all 536 critical care units in the UK. Follow-up telephone interviews will occur with 30 participants with experience of taking patients home to die.</p> <p>Phase II will establish the size and characteristics of the critical care patient population who could be transferred home to die. Retrospective (12 month) case note review from five adult critical care units will be undertaken. To enable the audit a proforma will be developed with input from an Expert Panel and review of Phase 1 findings. Accessing unit databases and working with local clinicians, cases matching key criteria indicating potential suitability for transfer will be identified and reviewed.</p> <p>Phase III will explore feasibility of transferring patients home to die through identifying structural and process requirements with reference to patient vignettes. A national workshop will be held for key stakeholders and involve participants who represent community, critical care and user perspectives. This will result in the identification of key service characteristics necessary to achieve effective transfer.</p> <p>Utilisation of results This study will produce a decision making framework to guide this area of end of life care. These results will be widely disseminated through national workshop, a report arrangements, publication and conference presentation.</p>