

Dimbleby Marie Curie Cancer Care Research Fund - Project Grant

Project details

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How volunteers may improve end-of-life care: an evidence synthesis of qualitative and quantitative research and survey of current practice

Duration of project: 12 months

Start date: 7 November 2011

Budget: £52,026

Abstract

Volunteers are at the core to organisations such as hospices in providing end-of-life care. It is estimated that volunteers reduce hospice costs by a quarter. The demand for end-of-life care is set to increase because of recognition of the potential value of such care in benefiting the patient and families, and in reducing general health care costs. The ageing UK population will result in an increase in the number of people dying each year. Evaluations of initiatives that involve volunteers directly in end-of-life care have grown in number. Before new initiatives are developed that will be costly and may repeat mistakes already learnt, it is now timely to establish by making best use of research already undertaken what we already know about how volunteers may improve end-of-life care. This proposed 12-month project will be undertaken at the Marie Curie Palliative Care Research Unit based at University College London. To increase the knowledge obtained it will use innovative approaches to systematically review studies that have used a range of research methods to gather information. We shall search for all available evidence that has explored the impact on the patient and their families, and on health service use of initiatives that involve volunteers in end-of-life care. We shall critically examine each evaluation. For evaluations that have compared the benefit of receiving the initiative with not receiving the initiative we shall consider using new statistical approaches to combine the findings from the original studies to provide an overall summary effect. Secondly, we shall search for all available evidence that has explored the perspectives of those receiving end-of-life care that involved the contribution of volunteers. We shall then review and combine this evidence using new methodologies to identify common themes in the studies in relation to what the patient or family felt were important or not in end-of-life care. The pooling of this evidence will provide an understanding of why the evaluations identified provided benefit or not, the evidence will also provide indicators of what other things in end-of-life care may help. To aid the understanding for practice development of the review findings, we shall undertake a national survey of hospices in the UK. This will involve a short questionnaire on what volunteers' currently do in hospices. The overall findings will inform how volunteers may be most usefully deployed and so inform the development of appropriate and potentially more effective end-of-life care that involves volunteers.