

Professor Keri Thomas, Julie Armstrong Wilson, The GSF Centre in End of Life Care, West Midlands, UK GSF Quality Improvement Programmes for generalist frontline staff enabling a gold standard of care for all people nearing the end of life.

### **Key Messages**

The first GSF accredited GP practices showed significant improvements in end of life care including :-

1. Early recognition of patients near the end of life for inclusion on the GSF/ Palliative Care Register (14%-52%).

2. Increased numbers of patients with non-cancer conditions (18%-47%) and from care homes (22%-40%).

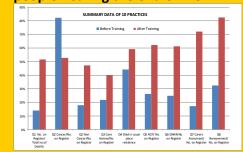
3. Improved carers assessment (17%-72%), and bereavement care (33%-83%).

4. National recognition in the medical press and media.



"GSF has brought about a culture change in the way we practice .... and now that way of working seems quite old fashioned - we could not go back" Dr Karen Chumley

"GSF Going for Gold has had a profound effect on our care for patients... with a shift in the focus of palliative care to one of earlier identification, forward planning and anticipatory care. We are dealing with more and more people at home satisfactorily, with better cross team working, with district and Macmillan nurse teams." Dr Andrew Foster



Key Outcome Ratios - pre and post introduction of GSF Gold programme

#### **Background:**

Most UK GP practices use Foundation Level GSF (bronze) i.e. hold a GSF/Palliative Care Register and a meeting to discuss patients on the register. The 2010 National Primary Care Audit confirmed that only 25% of people who died were included on the register, most were cancer patients but importantly, those on the register received better coordinated care. Therefore, Next Stage GSF was developed with Silver' and 'Gold' quality improvement programmes, plus Accreditation and the RCGP endorsed Quality Hallmark Award.

## Aim:

This describes the achievements of the first 10 GSF Accredited practices. GSF aims to improve the early identification of patients to improve assessment, both clinical and personal through Advance Care Planning discussions and improve coordination of care reducing unnecessary hospital admissions.

## Method:

Ten practices progressed to GSFPC Accreditation evaluation includes 1.Key outcome ratios—before and after intervention. (see chart)

Audit—After Death Analyses
Portfolio of evidence

4. Assessment visit / phone call **Results:** 

The first 10 accredited practices showed significant improvements including more

- identified early and included on the register, from care homes and with non-cancer
- having advance care planning and DNACPR discussions
- carer assessment and support
- reducing hospitalization

#### Conclusion:

Significant improvement was seen in all accredited practices. Particular improvements included earlier identification of patients for the register leading to better systematic care and a 'cultural 'change in care especially for the frail elderly.



And this is sustainable - Sustained best practice, one year post introduction of GSF Gold programme showing sustained key outcomes of 9 practices.



# The National GSF Centre in End of Life Care

GSF gives outstanding training to professionals providing end of life care to ensure better lives for people and recognised standards of care .

For further information on the work of the National Gold Standards Framework Centre please :

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