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Special Edition

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Evaluating of a new model of end-of-life care delivery within the primary care network community nursing team.

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Background

There has been a recent increase in the number of people wanting to die at home (Nuffield Trust, 2022). A study by Tiratelli (2023) identified inequalities in end-of-life care at home and highlighted the need for commissioners to measure and assure quality of end-of-life care in local areas, including better information and analysis on the patient experience.

In Cornwall, a stand-alone service has existed, providing personalised end-of-life care for patients in the last few weeks of life. Small care teams worked across large geographical areas that saw care provision stretched and risked situations of carer breakdown and unwanted hospital admission. A new service change has been introduced to see end-of-life care delivered through community nursing teams within local Primary Care Networks (PCNs). A timely evaluation presents itself.

Review of the evidence

A literature search was completed using CINHAL (EBSCO), EMCARE (OVID) databases and Cochrane library, from 2013. The search terms included “community nursing”, “end-of-life care” and “palliative care needs in home”. Of the 395 papers identified, abstracts and titles were screened to identify the most relevant full-text articles. The final review included fifteen studies.

Evidence suggests a significant increase in the number of patients wishing to receive end-of-life care at home (Mitchell *et al.*, 2021, Nuffield Trust 2022). With their enhanced skills and knowledge in the provision of person-centred care, community nurses are best placed to meet the needs of patients at the end of-of-life (Mitchell *et al.*, 2021, Smith *et al.*, 2023). The concept of personalisation was highlighted in the NHS Long Term Plan (NHS England, 2019), as a means of improving the quality of end-of-life care. When considering symptom management, a study by Bowers & Wilson (2023) identified that when family carers were well supported and informed regarding medication, this reduced their feelings

of powerlessness and gave them a sense of control. These factors are essential for successful end-of-life care at home and will inform the evaluation.

Project plan

Evidence identifies no consensus on the best model of care to deliver end-of-life care in the community. Using the JBI Evidence Implementation Model (Porritt, et al.2020), a service evaluation of the new model of care delivery will be conducted. An initial community nursing team survey will determine views on this model of care delivery and its perceived impact for service users. Plans to establish a Patient and Public Involvement group further shape an evaluation framework and will help inform potential of scaling-up the new model.

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