

Using Palliative Care Needs Rounds in the UK for care home staff and residents: an implementation science study

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Plain language summary

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Plain language summary

Care home residents often lack access to end-of-life care from hospice teams and so may experience distressing symptoms at end of life if care home staff cannot fully meet their needs.

We examined how an approach which worked well in Australia called 'Palliative Care Needs Rounds' (or 'Needs Rounds') could be used in the United Kingdom. We interviewed 28 people (care home staff, hospice staff and other National Health Service/social care professionals in the community) about their understanding of the United Kingdom setting, what might help trigger change and what results they would want. We discussed these interviews at online workshops with 43 people, where we started to develop a theory of 'what would work, for whom, under what circumstances' and determine what United Kingdom Needs Rounds would look like.

Six specialist palliative care services, each partnered with three to six local care homes, used Needs Rounds for a year. We collected information on care home residents, staff experiences of using Needs Rounds, relatives' perceptions of care quality, staff views of residents' quality of death, and on their ability to provide a palliative approach to residents.

We found that Needs Rounds can provide care home staff and specialist palliative care staff the opportunity to work together during a protected time, to plan for residents' last months of life. Needs Rounds build care home staff confidence and can strengthen relationships and trust, while using each services' expertise. Needs Rounds strengthen understandings of dying, symptom management, advance/anticipatory care planning and communication between care home staff, families, specialist palliative care staff and primary care. This improves the quality of resident care, enabling residents to be cared for and die in their preferred place, and also benefits relatives by increasing their confidence in care quality.

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