Six Steps to Success Programme: Improving End of Life Care for Care Home Residents

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BACKGROUND

• The Six Steps to Success programme was developed to underpin the organisational change required and support staff development to enhance end-of-life care (EoLC) within care homes.
• The programme aims is to ensure all residents receive high quality EoLC provided by a care home that encompasses the philosophy of palliative care and enables people to die where they choose.

METHODS

• Mixed-method evaluation in 3 phases;
• Examination of audit data (quality markers and measures; post death information; knowledge skills and confidence (KSC) audit);
• Questionnaires and interviews with Six Steps Facilitators;
• Case studies with 6 care homes;
• Quantitative analysis involved descriptive statistical comparisons and frequencies;
• Qualitative data were subject to content analysis to identify themes.

RESULTS (selection)

• Improvements were apparent between pre and post programme KSC scores;
• e.g. 92% improvement for Spirituality skills; 79% improvement for Advance Care Planning (ACP) knowledge.
• Increase in number of residents dying in their preferred place of death from 81.5% to 83.1%
• Increase in residents dying with an ACP in place from 45% to 56%.
• EoLC documentation in care homes improved

CONCLUSION

• The evaluation has shown that this flexible and adaptable model of training for care home staff has undoubtedly improved EoLC in care homes.
• The Six Steps to Success programme has empowered care home staff to deliver better care for their residents ensuring their wishes and preferences at end-of-life are met.
• More confident and better trained care home staff are now empowered to avoid unnecessary hospital admissions and ensure more residents are able to die in their preferred place.
• Clearly the Six Steps to Success programme is helping care home staff to deliver better EoLC for their residents.

I think that’s the biggest benefit really... that we got to give somebody a good death’. (Care Home Manager)

‘...years ago, if a GP... she doesn’t need EoL drugs, you’d have taken their word for that, but now we question that and we’ll argue to make sure that that person is settled, comfortable ... and has a good death’. (CS56, Manager & Champion)

‘The most positive factor for me is empowering the care home Champions to draw up ACPs that result in far better communication and enable residents and families to think about wishes and preferences. Because these are documented everybody is aware and works towards fulfilling these requests’. (Facilitator Q84)

We can now say; ‘hang on a minute we don’t want an ambulance, we have all the paper work in place’,... so it has prevented unnecessary hospital admissions and everyone seems to be more aware now’. (CS5, Matron)

‘It’s built their confidence so much it was unbelievable from when they started, ...they even feel confident enough to challenge GPs’. (Facilitator IS)

I don’t mind doing that (holding ACP conversations) ...at one point I probably would have been very uncomfortable to do that but now I haven’t got a problem with it at all’. (Care Home Manager)

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