

Key findings at a glance

National Audit for Care at the End of Life

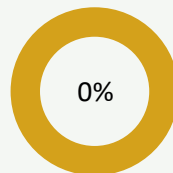
Northern Ireland 2024/25



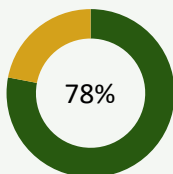
Proportion of hospital/sites who have shared their end of life care quality improvement plan with the Senior Management Team or Trust Board



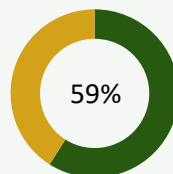
Hospital/sites with a face-to-face specialist palliative care service (doctor and/or nurse) available 8 hours a day, 7 days a week.



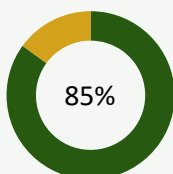
Proportion of deaths expected by clinical staff during the final admission.



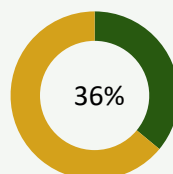
Proportion of clinical notes with evidence of communication about hydration with those important to the dying person, or a reason recorded why not.



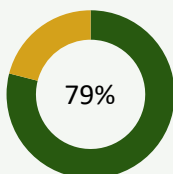
Proportion of bereaved people who agreed that the person received sufficient pain relief during their final hospital admission.



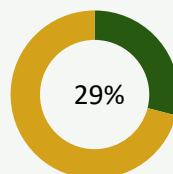
Proportion of clinical notes with an assessment of the spiritual, religious and cultural needs of those important to the dying person, or a reason recorded why not.



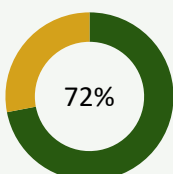
Proportion of bereaved people who rated the care and support they received from the hospital during the person's final admission as excellent or good.



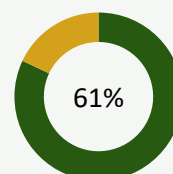
Proportion of clinical notes with evidence the person participated in personalised care and support planning (advance care planning) conversations.



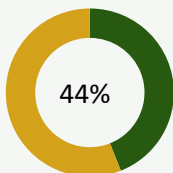
Proportion of people expected to die during the hospital admission with an individualised plan of care addressing their needs at the end of life.



Proportion of people who died with their ethnicity documented in their clinical notes.



Proportion of staff who have completed end of life care training within the last three years.



Proportion of patients expected to die that were prescribed anticipatory medication.

