

Key findings

National Audit for Care at the End of Life
Northern Ireland 2024/25



Quality Improvement Plans

Of hospital/sites with quality improvement plans relating to end of life care in place, **100%** had shared these with the Senior Management Team or Trust Board.

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Access to Specialist Palliative Care advice

100% of hospital providers have access to specialist palliative care services. Yet, of those providers, **0%** have access to a face to face specialist palliative care service (doctor and/or nurse) 8 hours a day, 7 days a week. **82%** of hospital/sites now have access to a telephone Specialist Palliative Care service 24 hours a day, 7 days a week.

2



Recognition of dying

Of the patients audited by the Case Note Review, **78%** were expected to die during their final hospital admission. For these patients, the median time between first recognition that the patient might die (within days or hours) and death was **71 hours** (3 days).

3



Hydration Options

In **59%** of Case Note Reviews, there was documented evidence of communication about hydration with those important to the dying person or, where this was not possible, a reason was recorded why not.

4



Pain relief

According to the Bereavement Survey, **85%** of friends, families and others strongly agreed or agreed that the dying person received enough pain relief during their final hospital admission, while **8%** disagreed or strongly disagreed with this.

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Spiritual, religious, and cultural needs assessments

Spiritual, religious and cultural needs were least assessed when compared to other needs (communication, emotional/psychological and social/practical needs). An assessment of those important to the dying person's spiritual, religious and cultural needs was documented in **36%** of cases (or where not possible, a reason was recorded).

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Overall rating of care

The care and support provided to the dying person was rated as excellent or good by **85%** of bereaved respondents, whilst **79%** of bereaved respondents rated the care and support given to themselves and others as excellent or good.

7



Participation in personalised care and support planning

29% of Case Note Reviews had documented evidence that the patient participated in personalised care and support (advance care) planning conversations. **42%** of Bereavement Survey respondents said that the person had an advance care plan in place.

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Individualised Plan of Care

Of the people expected to die during the hospital admission, **72%** had an individualised plan of care addressing their needs at the end of life. Of these, **1%** were documented on a standalone template and **99%** within the general clinical notes.

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Equitable care

When reviewing patient ethnicity, **61%** of the clinical case notes included documentation of the patient's ethnicity while **39%** reported patient ethnicity as either not stated or unknown.

10



End of life care training

44% of Staff Reported Measure respondents strongly agreed or agreed that they have completed training specific to end of life care within the last three years. **47%** of staff disagreed or strongly disagreed with this.

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Anticipatory medication

96% of patients who were expected to die were prescribed anticipatory medication. Of the anticipatory medications that were prescribed, **94%** were administered.

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