INTRODUCTION
Background: The proportion of deaths which occur in hospital in England has dropped from 57.9% in 2004 to 46.7% in 2015. However, hospital still remains an important place of death for almost half of all patients and of care in the last 90 days of life (L90D) for approximately 70%.

Aim: To examine the extent of geographical variation in patterns of hospitalisation between health administrative areas across England in L90D.

METHODS
Methods: Information on all deaths in England (2015) were extracted from a national linked Hospital Episode Statistics (HES) – Office for National Statistics (ONS) Mortality database with their admission data. Four indicators for hospital admission were selected for the forthcoming England Atlas of Variation in End of Life Care. Summery statistics were calculated for each indicator for England and the 209 Clinical Commissioning Groups (CCG) – local health administrations. These were: 1) % deaths with a hospital admission in L90D; 2) % of hospital admissions ending in death in duration ≤48 days; 3) mean number of days (nights) spent in hospital during L90D; and 4) % of deaths with ≥3 emergency admissions in L90D.

In addition trends in the median value for England and the degree of variation between CCG’s were tested statistically for each of the four indicators for the time period 2007 – 2015.

RESULTS

Figure 1a: Proportion of deaths with a hospital admission in final 90 days of life 2015 by CCG

On average 67.9% of decedents in England had a hospital admission in L90D, the CCG values varied from 56.1 to 74.9%

Figure 2a: Proportion of hospital admissions ending in death duration ≤48 days 2015 by CCG

England average for % final hospital admissions ≤48 days ending in death was 50.4%, variation in CCG values 36.0 to 62.7%

Figure 3a: Mean number of days (nights) spent in hospital during L90D of life 2015 by CCG

The average number of days spent in hospital in L90D in England was 17.8 with variation in CCG values of 13.4 to 22.3 days

Figure 4a: Proportion of deaths 3 or more emergency admissions in L90D of life 2015 by CCG

The England average proportion of deaths with three or more emergency admissions in final ninety days of life was 7.1 with a variation in CCG values of 2.9 to 12.6%

DISCUSSION
Providing care at the end of life often involves the interaction of many different care agencies. These indicators will help commissioners and providers to get a clearer picture of the end of life care needs of their local populations in particular hospital usage. There is wide variation this will support the planning and delivery of services and will support local drives towards improving end of life care.

CONCLUSIONS

• Most patients would prefer to spend less time in hospital and there may also be opportunities for cost savings.
• Large geographical differences in hospital use in the last days of life are found and may reflect demographics and/or quality and level of community end of life care provision.
• Comparisons of services and funding in ‘outlier’ areas could reveal models of high quality care.

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REFERENCES


CONFLICTS OF INTEREST

None