



AN AUDIT OF ANTICIPATORY PRESCRIBING

1

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STANDARD SET

If death is anticipated then there should be drugs in the home available for treatment of common symptoms at the end of life.

AUDIT OVERVIEW

- Review current practice in anticipatory prescribing
- Measure against standard
- Identify areas where practice can be improved
- Formulate a strategy to address wider implications of audit, dealing with multidisciplinary approaches to anticipatory prescribing.

METHOD

Nursing notes reviewed of last 30 deaths at home, for patients on the current caseload of Weston Hospice community team.

POINTS REVIEWED:

- Was the death expected?
- Were anticipatory drugs prescribed? If so, what?
- Was the patient already receiving medications via a syringe driver?

RESULTS

Of the 30 patients who died:

- 57% of deaths were anticipated (ie it was possible to tell from the notes that the patient was considered likely to die soon)

Of the 17 anticipated deaths:

- 10 had a syringe driver
- Anticipatory drugs were prescribed in 88%

CONCLUSION

- Perhaps more of the deaths could have been anticipated and therefore medications made available
- For those deaths which were definitely anticipated there was high availability of end of life medications

PLAN

- Encourage team to be proactive in planning ahead, with drugs prescribed in anticipation of deterioration to be made available earlier.
- Look to working more broadly with district nurses, GPs and PCT to promote earlier anticipatory prescribing.
- ‘Just in Case Boxes’ could be adopted as one method of formalising this working.