

End-of-Life Care

Current Awareness Bulletin

February 2021

This Current Awareness Bulletin is produced by the Yeovil Academy Library to provide staff with a range of end-of-life related resources to support practice. It includes recently published guidelines and research articles, as well as news and policy items.



In order to get the most from this bulletin, you will need an OpenAthens username and password. This will grant full text access to many of the listed resources. To register for an OpenAthens account go to: openathens.nice.org.uk.

Secondary Evidence



[1. Integrating Palliative Care in Ambulatory Care of Noncancer Serious Chronic Illness: A Systematic Review](#)

For integrating palliative care into ambulatory care for serious illness and conditions other than cancer, advance care planning shared decision-making tools and palliative care models were the most widely evaluated interventions and may be effective for improving only a few outcomes.

2021 [Effective Health Care Program \(AHRQ\)](#)

[2. Management of palliative care in hospital \(Covid-19\)](#)

As clinicians, we all have responsibilities in relation to coronavirus and we should seek and act on national and local guidelines. We have a specific responsibility to institute best practice palliative care for all patients who require this, either with pre-existing palliative care needs or because of coronavirus infection.

2021 [NHS England](#)

[3. Management of paediatric critical care patients \(Covid-19\)](#)

As doctors we all have general responsibilities in relation to coronavirus and for these we should seek and act upon national and local guidelines. We also have a specific responsibility to ensure that essential care paediatric critical care continues with the minimum burden on the NHS.

2021 [NHS England](#)

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[Palliative care: Overview of mouth care at the end of life](#)

Literature review current through: Jan 2021. | This topic last updated: Dec 01, 2020.

This topic provides an overview of the importance of oral health in patients at the end of life, and the diagnosis and management of common oral complications.

[Overview of managing common non-pain symptoms in palliative care](#)

Literature review current through: Jan 2021. | This topic last updated: Feb 23, 2021.

Most patients in the terminal phase of a serious and/or life-threatening illness, such as cancer, develop potentially devastating physical and psychosocial symptoms in the weeks to months before death. Patients admitted to tertiary palliative care units are likely to present with more frequent and severe symptoms compared with those admitted to community hospices or acute care hospital beds, although the frequency of symptoms is high in all groups.

[Pediatric palliative care](#)

Literature review current through: Jan 2021. | This topic last updated: Aug 19, 2019.

Pediatric palliative care is an interdisciplinary collaboration that seeks to improve the quality of life of all children with life-threatening conditions, as well as their families. It focuses on prevention and relief of suffering, regardless of the stage of disease, and comprehensively addresses the physical, psychosocial, or spiritual needs of the child and family.

BMJ Best Practice

[Palliative care](#)

Last reviewed: 26 Jan 2021. Last updated: 11 Aug 2020.

Palliative care is specialised medical care for people with serious illness that focuses on the best quality of life for both the patient and his or her family. The primary goal of palliative care is to provide quality of life for the patient and family, achieved through an interdisciplinary approach that includes symptom control and support for the patient and family.

If you would like help obtaining any of the articles, please contact the Library.

NICE Healthcare Databases

[1. End of life care for long-term neurological conditions: A meta-ethnographic review of the experiences of informal carers](#)

Author(s) Toze, Michael; Mo, Ray; Thomas, George; Sisson, Kelly; Nelson, David

Source Palliative Medicine; Feb 2021; vol. 35 (no. 2); p. 335

Publication Date Feb 2021

DOI [10.1177/0269216320974262](#)

ISSN 0269-2163

Database BNI

Given the broad agreement on the challenges faced by carers of people living with long-term neurological conditions, future research should consider opportunities to improve information and support for this group, and the development and evaluation of practical models of service delivery.

- [Available in full text at Palliative medicine from Unpaywall](#)

[2. Family and Friend Perceptions of Quality of End-of-Life Care in Medicare Advantage vs Traditional Medicare](#)

Author(s) Azhar, Ahsan, MD FACP

Source Journal of Pain and Symptom Management; Feb 2021; vol. 61 (no. 2); p. 428

Publication Date Feb 2021

DOI [10.1016/j.jpainsymman.2020.12.002](#)

ISSN 0885-3924

Database BNI

[3. Racial Disparities in End-of-Life Care Between Black and White Adults With Metastatic Cancer](#)

Author(s) Perry, Laura M, MS; Walsh, Leah E, MS; Horswell, Ronald, PhD; Miele, Lucio, MD, PhD; Chu, San, MS [et al.](#)

Source Journal of Pain and Symptom Management; Feb 2021; vol. 61 (no. 2); p. 342

Publication Date Feb 2021

DOI [10.1016/j.jpainsymman.2020.09.017](#)

ISSN 0885-3924

Database BNI

Findings have implications for informing health care decision making near the EOL for patients, families, and clinicians, especially in regions with a history of racial discrimination and disparities.

[4. Association of Hospice Care Services With the Utilization of Life-Sustaining Treatments During End-of-Life Care Among Patients With Cancer: A Nationwide 11-Year Cohort Study](#)

Author(s) Yen, Yung-Feng, MD, MPH, PhD; Lai, Yun-Ju, MD, PhD; MD, Ming-Chung Ko, PhD; Chen, Yu-Yen, MD, PhD; Chen, Yi-Tui, PhD [et al.](#)

Source Journal of Pain and Symptom Management; Feb 2021; vol. 61 (no. 2); p. 323

Publication Date Feb 2021

DOI [10.1016/j.jpainsymman.2020.07.028](#)

ISSN 0885-3924

Database BNI

Hospice care services were associated with a lower likelihood of receiving life-sustaining treatments during the last three months of life in patients with cancer.

[5. Palliative and end-of-life care for military veterans: the forgotten few?](#)

Author(s) Petrova, Mila; Caddick, Nick; Almond, Michael Kevin

Source The British Journal of General Practice : The Journal of the Royal College of General Practitioners; Feb 2021; vol. 71 (no. 703); p. 86

Publication Date Feb 2021

DOI [10.3399/bjgp21X714869](#)

ISSN 0960-1643

Database BNI

Hide Abstract

Petrova et al talk about palliative and end-of-life care for military veterans. There is a growing number of resources aiming to support GP practices in looking after their military veteran patients. Examples include the Royal College of General Practitioners' (RCGP) "veteran-friendly GP practices" initiative, the Veterans' Healthcare Toolkit, the Military Veterans e-learning course, and the Veterans Health Days of Health Education England.

- [Available in full text at The British journal of general practice : the journal of the Royal College of General Practitioners from Unpaywall](#)

[6. Education needed to improve antimicrobial use during end-of-life care of older adults with advanced cancer: A cross-sectional survey](#)

Author(s) Datta Rupak; Topal, Jeffrey; McManus, Dayna; Sanft Tara; Dembry, Louise Marie [et al.](#)

Source Palliative Medicine; Jan 2021; vol. 35 (no. 1); p. 236

Publication Date Jan 2021

DOI [10.1177/0269216320956811](#)

ISSN 0269-2163

Database BNI

Although the initiation of additional intravenous antimicrobials was viewed as escalation of care, antimicrobials were not routinely discussed during advance care planning. Educational interventions that promote recognition of antimicrobial-associated adverse events, incorporate antimicrobial use into advance care plans, and offer communication simulation training around the role of antimicrobials during end-of-life care are warranted.

[7. Home or hospital as the place of end-of-life care and death: A grounded theory study of parents' decision-making](#)

Author(s) Papadatou Danai; Kalliani Vasiliki; Karakosta Eleni; Liakopoulou Panagiota; Bluebond-Langner Myra

Source Palliative Medicine; Jan 2021; vol. 35 (no. 1); p. 219

Publication Date Jan 2021

DOI [10.1177/0269216320967547](#)

ISSN 0269-2163

Database BNI

Parents' decisions about place of end-of-life care and death are affected by personal, interpersonal, timing and disease-related factors. Parents are best supported in decision-making when information is presented clearly and honestly with recognition of what acting as 'good parents' means to them, and opportunities to enhance their caregiving competence to care for their child at home, if they choose so.

- [Available in full text at Palliative Medicine from Unpaywall](#)

[8. End-of-life care after the legal introduction of advance directives: A qualitative study involving healthcare professionals and family caregivers of patients with amyotrophic lateral sclerosis](#)

Author(s) Cipolletta Sabrina; Reggiani Margherita

Source Palliative Medicine; Jan 2021; vol. 35 (no. 1); p. 209

Publication Date Jan 2021

DOI [10.1177/0269216320967280](#)

ISSN 0269-2163

Database BNI

The introduction of advance directives by law has not been sufficient to improve end-of-life care. In order to make legal regulation effective, the organization of healthcare services needs to be improved and clearer procedures have to be implemented and shared with patients and families.

[9. Are family carers part of the care team providing end-of-life care? A qualitative interview study on the collaboration between family and professional carers](#)

Author(s) Vermorgen Maarten; Vandenbogaerde Isabel; Van Audenhove Chantal; Hudson, Peter; Deliens Luc [et al.](#)

Source Palliative Medicine; Jan 2021; vol. 35 (no. 1); p. 109

Publication Date Jan 2021

DOI [10.1177/0269216320954342](#)

ISSN 0269-2163

Database BNI

Hide Abstract

This qualitative study about the experiences and perceptions of family carers of people with a chronic life-limiting illness living at home regarding the collaboration with different healthcare providers in the last phase life, showed that family carers experience a lot of possibilities, but perceive missed opportunities as well, for healthcare professionals to effectively collaborate with them for palliative care.

[10. Are You Prepared for End-of-Life Care? A Content Review of Canadian End-of-Life Care Standards and Competencies for Saskatchewan](#)

Author(s) Bunes Michelle; Compton, Roslyn M; Press, Madeline; Peternelj-Taylor, Cindy

Source Journal of Palliative Care; Jan 2021; vol. 36 (no. 1); p. 38

Publication Date Jan 2021

DOI [10.1177/0825859720935231](#)

ISSN 0825-8597

Database BNI

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Health professional associations need to ensure end-of-life care standards and competencies are in place for the provision of appropriate and holistic care. Aligning standards and competencies across professions improves the preparedness of health professionals to provide interprofessional end-of-life care.

[11. End-of-life care for homeless people in shelter-based nursing care settings: A retrospective record study](#)

Author(s) van Dongen Sophie I; Klop, Hanna T; Onwuteaka-Philipsen, Bregje D; de Veer Anke JE; Slockers, Marcel T [et al.](#)

Source Palliative Medicine; Dec 2020; vol. 34 (no. 10); p. 1374

Publication Date Dec 2020

DOI [10.1177/0269216320940559](#)

ISSN 0269-2163

Database BNI

Hide Abstract

End-of-life care for homeless persons residing in shelter-based nursing care settings is characterised and challenged by comorbidities, uncertain prognoses, complicated social circumstances and many transitions to other settings. Multilevel end-of-life care improvements, including increased interdisciplinary collaboration, are needed to reduce transitions and suffering of this vulnerable population at the end of life.

- [Available in full text at Palliative medicine from Unpaywall](#)

[12. The relationship between caregivers' perceptions of end-of-life care in long-term care and a good resident death](#)

Author(s) Lee, Eunyoung; Sussman, Tamara; Kaasalainen, Sharon; Durepos, Pamela; McCleary, Lynn [et al.](#)

Source Palliative & Supportive Care; Dec 2020; vol. 18 (no. 6); p. 683

Publication Date Dec 2020

DOI [10.1017/S1478951520000292](#)

ISSN 1478-9515

Database BNI

The findings of this study suggest that the critical role staff in LTC play in supporting caregivers' perceptions of a good resident death. By keeping caregivers informed about expectations at the very end of life, staff can enhance caregivers' perceptions of a good resident death. Further, by addressing spiritual issues staff may improve caregivers' perceptions that residents were at peace when they died.

[13. The role of learning disability nurses in providing end-of-life care](#)

Author(s) Graham, Yitka NH; Wilson, Ruth; Hayes, Catherine; Stephenson, Lyndsey; Wanless, Ann [et al.](#)

Source Nursing Times; Dec 2020; vol. 116 (no. 12); p. 18

Publication Date Dec 2020

ISSN 0954-7762

Database BNI

People with learning disabilities experience increased levels of health inequality compared with the general population and, in end-of-life care, many die without having their individual preferences met, despite carers articulating these needs to those providing professional care. In addition, the number of learning disability nurses in the UK is decreasing. This article recommends progressive change through the development of a new role - that of learning disability nurses with a specialism in end-of-life care.

[14. Preferences and Experiences of Muslim Patients and Their Families in Muslim-Majority Countries for End-of-Life Care: A Systematic Review and Thematic Analysis](#)

Author(s) Abdullah, Rafidah, MBChB, MRCP, MSc; Guo, Ping, PhD, MSc, BSc, RN; Harding, Richard, PhD, MSc, BSc, DipSW

Source Journal of Pain and Symptom Management; Dec 2020; vol. 60 (no. 6); p. 1223

Publication Date Dec 2020

DOI [10.1016/j.jpainsymman.2020.06.032](#)

ISSN 0885-3924

Database BNI

Despite the scarce evidence of relatively low quality, the analysis revealed core themes. To achieve palliative care for all in line with the total pain model, beliefs must be identified and understood in relation to decision-making processes and practices. J Pain Symptom Manage 2020;60:1223-1238.

[15. Palliative and End-of-Life Care in a Small Caribbean Country: A Mortality Follow-back Study of Home Deaths](#)

Author(s) Jennings, Nicholas, MPH; Chambaere, Kenneth, PhD; Chamely, Stacey, MD; Macpherson, Cheryl C, PhD; Deliens, Luc, PhD [et al.](#)

Source Journal of Pain and Symptom Management; Dec 2020; vol. 60 (no. 6); p. 1170

Publication Date Dec 2020

DOI [10.1016/j.jpainsymman.2020.06.029](#)

ISSN 0885-3924

Database BNI

Hide Abstract

The largest part of end-of-life care at home in Trinidad and Tobago is provided by family members, whereas professional caregivers feature less prominently. To ensure quality in end-of-life care, better access to analgesics is needed, and adequate support and education for family members as well as general practitioners are highly recommended. J Pain Symptom Manage 2020;60:1170-1180.

[16. Trends of Utilization of Palliative Care and Aggressive End-of-Life Care for Patients Who Died of Cancers and Those Who Died of Noncancer Diseases in Hospitals](#)

Author(s) Ko, Yen-Ting, MD; Ko, Ming-Chung, MD, PhD; Huang, Chao-Ming, MS; Lien, Hsin-Yi, MS; Woung, Lin-Chung, MD, PhD [et al.](#)

Source Journal of Pain and Symptom Management; Dec 2020; vol. 60 (no. 6); p. 1136

Publication Date Dec 2020

DOI [10.1016/j.jpainsymman.2020.06.037](#)

ISSN 0885-3924

Database BNI

Utilization of palliative care is increasing. Patients who died of noncancer diseases received less palliative care but more aggressive end-of-life care than those who died of cancers. J Pain Symptom Manage 2020;60:1136-1143.

[17. Quality Assessments of End-of-Life Care by Medical Record Review for Patients Dying in Intensive Care Units in Taiwan](#)

Author(s) Lo, Mei-Ling, MSN; Huang, Chung-Chi, MD; Hu, Tsung-Hui, MD; Chou, Wen-Chi, MD; Chuang, Li-Pang, MD [et al.](#)

Source Journal of Pain and Symptom Management; Dec 2020; vol. 60 (no. 6); p. 1092

Publication Date Dec 2020

DOI [10.1016/j.jpainsymman.2020.07.002](#)

ISSN 0885-3924

Database BNI

Taiwanese patients dying in ICUs heavily used LSTs until death despite high prevalences of documented prognostic communication, providing specialty palliative-care consultations, having a do-not-resuscitate order in place, and death without cardiopulmonary resuscitation. Family meetings should be actively promoted to facilitate appropriate end-of-life-care decisions to avoid unnecessary suffering from potentially inappropriate LSTs during the last days of life. J Pain Symptom Manage 2020;60:1092-1099.

[18. End-of-Life Care](#)

Author(s) Cullen, Grace, DNP, FNP-BC, AOCNP®, ACHPN® RN-BC

Source Clinical Journal of Oncology Nursing; Dec 2020; vol. 24 (no. 6); p. 667

Publication Date Dec 2020

DOI [10.1188/20.CJON.667-672](#)

ISSN 1092-1095

Database BNI

All patients in the study (N = 57) received palliative care. Sixteen percent of patients in this study received antineoplastic therapy, 14% received nonessential medications, and 40% were hospitalized or visited the emergency department within 30 days of death.

[19. Experiencing improved assessment and control of pain in end-of-life care when using the Abbey Pain Scale systematically](#)

Author(s) Ludvigsson, Carola; Isaksson, Ulf; Hajdarevic, Senada

Source Nursing Open; Nov 2020; vol. 7 (no. 6); p. 1798

Publication Date Nov 2020

DOI [10.1002/nop2.566](#)

ISSN 2054-1058

Database BNI

Implementation of APS was experienced as improving systematic pain assessment. Efforts to establish clear routines and improve confidence in the care team would be prioritized to optimize pain assessment and pain relief in EoL care.

- [Available in full text at Nursing Open from Europe PubMed Central - Open Access](#)
- [Available in full text at Nursing Open from ProQuest \(Health Research Premium\) - NHS Version](#)
- [More full-text links...](#)

[20. Complexities and Constraints in End-of-Life Care for Hospitalized Prisoner Patients](#)

Author(s) Panozzo, Stacey, PhD; Bryan, Tamsin, MD; Collins, Anna, PhD; Marco, David, PhD; Lethborg, Carrie, PhD [et al.](#)

Source Journal of Pain and Symptom Management; Nov 2020; vol. 60 (no. 5); p. 984

Publication Date Nov 2020

DOI [10.1016/j.jpainsymman.2020.05.024](#)

ISSN 0885-3924

Database BNI

Clarity of correctional service processes, protocols, and aspects of security and related training for health professionals is needed to ensure improved care for prisoners with progressive and life-limiting illness. Further research is required to seek the views of prisoners facing end of life and their families.

[21. Perceptions of optimal end-of-life care in hospitals: A cross-sectional study of nurses in three locations](#)

Author(s) Waller, Amy; Chan, Sally; Chan, Carmen W H; Chow, Meyrick C M; Kim, Miyoung [et al.](#)

Source Journal of Advanced Nursing; Nov 2020; vol. 76 (no. 11); p. 3014

Publication Date Nov 2020

DOI [10.1111/jan.14510](#)

ISSN 0309-2402

Database BNI

Nurses' perceptions of optimal end-of-life care are associated with location, but perhaps not in the direction that stereotypes would suggest. Findings highlight the importance of developing and implementing location-specific approaches to optimize end-of-life care in hospitals. ImpactThe findings may be useful to guide education and policy initiatives in Asian and Western countries that stress that end-of-life care is more than symptom management. Indicators can be used to collect data that help quantify differences between optimal care and the care actually being delivered, thereby determining where improvements might be made.

[Available in full text at Journal of advanced nursing from Wiley Online Library Medicine and Nursing Collection 2020](#)

[22. Self-compassion mediates the association between conflict about ability to practice end-of-life care and burnout in emergency nurses](#)

Author(s) Satake, Yoko; Arao, Harue

Source International Emergency Nursing; Nov 2020; vol. 53 ; p. 1

Publication Date Nov 2020

DOI [10.1016/j.ienj.2020.100917](#)

ISSN 1755-599X

Database BNI

Negative aspects of self-compassion mediated the relationship between conflict and burnout (excluding reduced personal accomplishment). To prevent burnout, it is necessary to screen for nurses with low self-compassion and to provide opportunities to change their cognitive recognition and disclose their conflicts.

- [Available in full text at International emergency nursing from Unpaywall](#)

[23. End-of-life care in rural and regional Australia: Patients', carers' and general practitioners' expectations of the role of general practice, and the degree to which they were met](#)

Author(s) Johnson, Claire E; Senior, Hugh; McVey, Peta; Team, Victoria; Ives, Angela [et al.](#)

Source Health & Social Care in the Community; Nov 2020; vol. 28 (no. 6); p. 2160

Publication Date Nov 2020

DOI [10.1111/hsc.13027](#)

ISSN 0966-0410

Database BNI

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The study objective was to explore the characteristics of rural general practice which exemplify optimal end-of-life (EOL) care from the perspective of people diagnosed with cancer, their informal carers and general practitioners (GPs); and the extent to which consumers perceived that actual EOL care addressed these characteristics. Most GPs consistently addressed these characteristics. Comprehensive EOL care that meets the needs of people dying with cancer is not beyond the resources of rural and regional GPs and communities.

- [Available in full text at Health & social care in the community from Wiley Online Library Medicine and Nursing Collection 2020](#)

[Indoor visiting to resume in care homes across England and Scotland](#)

23 February, 2021

Changes are being made to visiting restrictions in care homes across England and Scotland to allow some level of indoor visiting from next month, it has been confirmed.

['Daffodil Standards' end-of-life care scheme extended to care homes](#)

01 February, 2021

New guidance has been developed to support staff in general practice and social care to provide high-quality palliative and end-of-life care for older patients living in care homes.

[How best to meet the complex needs of people with interstitial lung disease](#)

16 December, 2020

For UK health professionals only The roundtable discussion and this associated article has been funded, reviewed and approved by Boehringer Ingelheim Limited (BIL).

[Death by Appointment](#)

14 December, 2020

What the reviewers said: 'I found this book highly thought provoking, and would recommend it for all nurses, not just those working in palliative care' Title: Death by Appointment Authors: Ilora Finlay and Robert Preston Publisher: Cambridge Scholars.

[The role of learning disability nurses in providing end-of-life care](#)

09 November, 2020

People with learning disabilities face health inequalities, especially at the end of life. To address this, a new role is being proposed for learning disability nurses with a specialism in end-of-life care

[Advanced nursing practice in mental health: towards parity of esteem](#)

09 November, 2020

The parity of esteem agenda places equal value on physical and mental healthcare. In response to this, a master's degree course has been developed in advanced nursing practice in mental health. This article comes with a handout for a journal club discussion

[Exploring the impact on frontline staff of training in advance care planning](#)

19 October, 2020

Advance care planning is an essential part of end-of-life care, but barriers exist to its timely delivery. A one-day training course increased frontline staff's knowledge, confidence and willingness to implement it. This article comes with a handout for a journal club discussion

[Open letter: Infection prevention and control should never be at the expense of compassionate care](#)

16 October, 2020

An open letter from infection prevention and control experts and concerned others about the restrictions enforced in nursing, care and residential homes Restrictions are being imposed in relation to Covid-19 across too many nursing, care and residential homes in the UK and beyond, in the name of infection prevention.

This current awareness bulletin contains an inexhaustive selection of information that has not been critically appraised by library staff. It is therefore the responsibility of the reader to appraise this information for accuracy and relevance.

For further information or support please contact **Tom Welham, Yeovil Academy Library, Level 4, Yeovil District Hospital, Higher Kingston, Yeovil, BA21 4AT; tel 01935 38(4495) or 01935 38(4697), library@ydh.nhs.uk** or visit the library blog at yeovilacademylibrary.com.