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Practices, Issues and Possibilities at the interface between Geriatrics and Palliative Care: An Exploratory Study (InGaP)

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Introduction: With the expansion of palliative care into non-malignant conditions, there is an increasing emphasis on inter-disciplinary working between geriatric and palliative care teams. This inter-disciplinary working has evolved organically and more needs to be known about current working practices. This is of policy and clinical interest as the elderly patient population continues to grow.

Methods: An exploratory qualitative interview study was undertaken of end-of-life care for older in-patients in a large London NHS Trust. Staff from palliative care and geriatric medical and nursing teams and patients and carers were contacted for interview. 30 semi-structured qualitative interviews were conducted with staff, two with patients and five with carers. Questions covered: recent examples where teams worked together; staff perceptions of collaboration and issues; patient and carer perceptions of clarity as to who was providing care. Interviews were transcribed and thematically analysed focusing on: examples of successful collaboration; areas of tension, duplication or confusion about responsibilities; suggestions for future practice.

Results: Participants were overwhelmingly positive about collaboration between the teams. Examples of what currently works well were: the referral process to the palliative care team; inter-team communication and use of face-to-face handovers; unity between the teams when communicating with patients and families. Areas of concern and for future development were: embedding palliative care within multidisciplinary team meetings within the ward; the need for continual on-ward education given rotation of junior medical staff; improving collaboration between palliative care, physiotherapy and occupational therapy; patients' and carers' lack of awareness of the different teams and whether this has a detrimental effect on their care.

Conclusions: There is evidence of strong collaborative working between the teams however this study provides insights into where things could be improved. The study has shown the feasibility of the methodology, particularly when interviewing patients and carers during a difficult time in their care. An exploration of these relationships in other settings is required to determine if the same themes arise with a view to inform national guidelines and policy to improve care towards the end of life.