

End-of-life care still fails patients and families

SIR - We are writing to draw attention to the need for the NHS to prioritise improving the care of both children and adults at the end of life.

Dying people may need help with pain or other symptoms at any time of day or night, but only 37 per cent of NHS trusts are able to offer face-to-face access to specialist palliative care between nine in the morning and five in the afternoon from Monday to Sunday, which has been the minimum standard recommended by Nice since 2011. Just 11 per cent offer specialist care 24/7. The rest of the time most hospitals rely on a telephone advice service. Round-the-clock palliative care should also be available to children and adults in the community, yet this is only the case in some areas.

There are nowhere near enough palliative care doctors and nurses to provide a 24/7 service across the whole of Britain - for example, we only have one palliative care consultant and five palliative care nurses per 1,000 beds in England. This is unacceptable.

Communication between health services and the families, friends and

carers of the dying person has been improving, but many relatives and friends are still left in the dark without being able to discuss the care of their loved one with doctors and nurses, and are not consulted often enough about the needs of the dying person or their own needs at this difficult time.

For the future, we need more doctors, nurses and other health professionals to be trained in the care of the dying. NHS trusts should make sure they have the resources and services in place to be able to treat patients as individuals and respond to their specific needs, communicating fully with those close to the patient, and making sure someone at board level has ultimate responsibility for the quality of the care provided. Only then will dying patients receive the best possible care.

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Chairman, Cicely Saunders International and eight others: see telegraph.co.uk

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