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## End-of-life care for people with dementia in hospitals

Dementia is the second leading cause of death of Australians, contributing to approximately 14.6% of all deaths in 2020.<sup>1</sup> The dementia trajectory is characterised by progressive decline, punctuated by acute events such as an infection or fall, where the person may recover or experience an increased rate of decline in health until the end of life.<sup>2</sup> Often dementia is not recognised as a terminal illness and so timely discussions regarding prognosis and end-of-life decisions are important for people with dementia and their families.<sup>2</sup>

People with dementia are frequent users of acute services, with one in four people with dementia admitted to hospital every year.<sup>3</sup> The likelihood of a person living with dementia being admitted to and dying in hospital is high, therefore increased recognition of the importance of end-of-life care for people with dementia in acute settings is required.<sup>3</sup>

The use of a person-centred approach to care by health care professionals (HCPs) in hospitals has been shown to improve care quality for people with dementia, as well as reducing the patients' behavioural and psychotic symptoms during short stays in hospital.<sup>4</sup> There is a call to adopt a needs-based approach, recognising the complexities and variability in how dementia progresses, rather than focusing only on cognitive and functional decline.<sup>5</sup>



## End-of-Life Essentials Education

End-of-Life Essentials (EOLE) provides free, evidence-based, online education on end-of-life care, for HCPs working in hospitals. The modules were developed from the Australian Commission on Safety and Quality in Health Care (ACSQHC) National Consensus Statement<sup>6</sup> designed to improve quality of end-of-life care.<sup>7</sup>

Each module focusses on a specific aspect of clinical care, including patient-centred communication, recognising the end of life, goals of care, teamwork, and patient states of mind. Some modules also focus on end-of-life care for patients in specific settings, including the emergency department, chronic complex illnesses, and patients who are imminently dying.<sup>7</sup> The modules include self-reflection learning opportunities, and focus on clinical compassion and person-centred care, with the recognition that compassion in fast-paced environments can happen. A range of downloadable toolkits assist teams in implementing a unified approach to end-of-life care.


To date, more than 27,000 HCPs have accessed the EOLE education. Ongoing evaluation shows that the education improves HCPs' self-perceived knowledge, skill, attitude, and confidence in end-of-life care, enhances their ability to initiate end-of-life conversations, and assists HCPs in identifying essential elements and tools for effective teamwork.<sup>8</sup>

The EOLE team will shortly be releasing new education that aligns to the National Safety and Quality Health Service (NSQHS) Standards<sup>9</sup> and aims to assist hospitals with change management, leadership, and compliance with safety and quality standards.

For more information go to: [www.endoflifessentials.com.au](http://www.endoflifessentials.com.au)

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