

CLINICAL AUDIT IN PALLIATIVE CARE

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Introduction. Evaluation of the quality of life of patients with an advanced disease and an insufficient number of standardized tools for assessing the efficiency of care provided for terminal patients almost at the end of their lives (including patients' and their families' satisfaction) are major problems in palliative medicine.

Aim. To study the influence of a clinical audit on the quality of palliative care and improvement with respect to the studied parameters of care quality in an inpatient department.

Materials and methods. Effectiveness of care provided at an inpatient hospice and palliative department was assessed by means of standard scales for evaluating the quality of life and questionnaire forms evaluating the level of patients' and their families' satisfaction devised by the author. The application of experimental methodology (which is relatively rare in palliative medicine) was intended to facilitate the comparisons of monitored parameters concerning the quality of care between the studied groups.

The study group comprised 215 patients hospitalized in the Hospice and Palliative Care Department at the Independent Public Health Care Center in Działdowo, the majority with advanced neoplastic disease (174). The control group consisted of 98 patients monitored only during the first part of the research. To modify treatment and care provided for the remaining 117 patients who comprised the second group the method of clinical audit was employed.

Results and discussion. The more advantageous results achieved in the audited group over the control group were demonstrated statistically on the basis of data collected from patients' satisfaction forms, families' satisfaction forms and the Support Team Assessment Schedule (STAS). The achieved results indicate that the introduction of audit itself improves the quality of care. This enhances the role of audit in palliative care, both as a method evaluating results of clinical examinations and as a method for the routine monitoring of provided care.

Conclusions. 1. Adequately selected tools for evaluating the quality of care and the employed research methodology allowed for the application of the experimental method and for achieving a reliable evaluation of the influence of audit on the quality of palliative care (fulfillment of the methodological aim of the study). 2. The employment of clinical audit with respect to the treatment and care provided for patients with an advanced stage of a chronic illness improved many parameters of palliative care (fulfillment of the research aim of the study). 3. The employment of audit improved the quality of care provided at the inpatient Palliative Care Department of the Independent Public Health Care Center in Działdowo (fulfillment of the utilitarian aim of the study).