

## Health and care service utilisation in the last year of life before nonsudden death in Wales, 2014–2023, by palliative care registration: a population-based retrospective cohort study

**Executive Summary** 

October 2025

## **Background**

As the need for palliative and end-of-life services across Wales increases with our ageing populations, health and care services need are required to adapt, to provide efficient and appropriate management and care.

End-of-life health and care service provision are complex processes. We aimed to quantify the uptake of health and care services in the last year of life before death from non-sudden causes by palliative care registration.

This study was developed in collaboration with the National Clinical Lead for Palliative and End of Life Care and will contribute to shaping the future strategic direction and national planning for palliative and end-of-life care in Wales.

## **Methods**

This study looks to understand patterns of change in both health and care settings using population-scale data from the <u>SAIL Databank</u> in the last year of life for individuals who died of non-sudden causes.

In this study, we assess transitions to health and care services at an individual level and explore characteristics associated with uptake of health and care service use.

## **Results**

This review of population data in Wales found that the majority of time was spent at home in the last year of life, and demand for urgent care increased rapidly towards the end-of-life.

We found that people **living at home** in urban areas had a higher rate of health and care service use in the last year of life, compared to those from rural areas. Likewise, those living at home on the palliative care register had a higher rate of service use compared to those **not** on the palliative care register in the last year of life (prior to a non-sudden death).

However, for individuals in care homes, we found that those on the palliative care register used health and care services in the last year of life **less** than those **not** on the register.

Overall, individuals on the palliative care register were discharged from emergency hospital settings sooner.

Demographics **under-represented** on the palliative care register included:

- men
- people from urban areas,
- people living in the most-deprived communities
- people living alone

Targeted approaches for efficiently identifying individuals needing palliative care services, and providing additional support at **home** where appropriate, should be prioritised. This will help to optimise system management and appropriate care for those nearing the end-of-life.





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