

ERRATUM

The care experiences of patients who die in residential hospice: A qualitative analysis of the last three months of life from the views of bereaved caregivers – ERRATUM

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In **Table 4** in the original online article contained text errors under the sub headings of “Hospital care themes, Good themes” the word “homecare” should have been “hospital care”. The entire corrected Table is reprinted herein.

The author and publisher regret these errors.

REFERENCE

Daryl Bainbridge, D., Giruparajah, M., Zou, H., Seow, H. (2017). The care experiences of patients who die in residential hospice: A qualitative analysis of the last three months of life from the views of bereaved caregivers. *Palliative and Supportive Care*. doi:10.1017/S147895151700058X.

Table 4. Unique good and bad themes about home and hospital care

Homecare themes (<i>n</i> = 379)			
Good themes	<i>n</i> (%*)	Bad themes	<i>n</i> (%*)
Generally good homecare, unspecified provider	101 (26.6)	Needed more staff and/or services to support patient in home	36 (9.5)
Generally good homecare care by nurses	71 (18.7)	Issues with homecare in general	16 (4.2)
Generally good homecare care by personal support workers	37 (9.8)	Would like the same homecare providers to come to the home	15 (4.0)
Generally good homecare care by occupational therapists/physiotherapists	5 (1.3)	Scheduling issues with homecare services and providers	13 (3.4)
Compassionate, caring, supportive, and/or empathic homecare providers (unspecified)	18 (4.7)	Getting access to homecare services was difficult	11 (2.9)
Compassionate, caring, supportive, and/or empathic homecare nurses	7 (1.8)	Homecare provider(s) lacked training and/or experience (including questionable practices)	10 (2.6)
Compassionate, caring, supportive, and/or empathic homecare personal support workers	7 (1.8)	Homecare needed to be better organized and coordinated	10 (2.6)
Support enabled patient to remain at home	14 (3.7)	Care and services from unspecified homecare provider lacking	10 (2.6)
Responsive homecare	9 (2.4)	Homecare case manager was insensitive, lacked empathy, unpleasant, or lacked respect	9 (2.4)
Good pain and/or symptom management in home	9 (2.4)	Care and services from personal support worker(s) lacking	9 (2.4)
Homecare providers took time to answer questions and educate patient and family	6 (1.6)	Inadequate pain and/or symptom management at home	6 (1.6)
Regularity in homecare providers (i.e., the same providers visit)	6 (1.6)	Homecare nurse(s) insensitive, lacked empathy, unpleasant, or lacked respect	6 (1.6)
Respectful homecare	6 (1.6)	Equipment needed at home was slow to arrive, slow to be removed, did not come when scheduled, and/or did not accompany caregiver education or assistance	6 (1.6)
Specialized equipment and care at home	6 (1.6)	Inconsistent quality and amount of homecare	6 (1.6)
		Private homecare costs too high	6 (1.6)
		Homecare providers' communication with family and patient lacking	5 (1.3)
		Needed more doctor visits at home	5 (1.3)
Hospital care themes (<i>n</i> = 306)			
Good themes	<i>n</i> (%*)	Bad themes	<i>n</i> (%*)
Generally good hospital care, unspecified provider	30 (9.8)	Issues with hospital care in general	56 (18.3)
Generally good hospital care by physicians	16 (5.2)	Hospital care provider was insensitive, lacked empathy, unpleasant, or lacked respect	23 (7.5)
Generally good hospital care by nurses	16 (5.2)	Needed more and better communication with hospital care providers	23 (7.5)
Compassionate, caring, supportive, and/or empathic hospital providers	6 (2.0)	Needed more staff and/or services to support patients in hospital	17 (5.6)
		Inadequate pain and/or symptom management in hospital	13 (4.2)
		More responsive hospital care needed	13 (4.2)
		Inadequate accommodations (including bed) in hospital	9 (2.9)
		More communication and coordination needed between hospital care providers	9 (2.9)
		Personal care at hospital was lacking	5 (1.6)

* The calculated percentages reflect the number of patients who received care in the setting.