Claud Regnard, FRCP, a palliative care consultant, has called the demise of the Liverpool Care Pathway a "tragedy" and compared it to banning the Highway Code because of bad drivers in a paper for the journal *Age and Ageing*, published online today (Tuesday).

After a series of media stories about the palliative care system causing malnutrition, dehydration, and premature death in patients across a wide age-range, the Liverpool Care Pathway (LCP) was subject to review by a panel under Baroness Neuberger. The panel delivered their findings on 15 July 2013. They said that the LCP needed to abandon its name, as well as the use of the word "pathway", and that the LCP should be replaced within 12 months by an "end of life care plan".

Writing in *Age and Ageing*, the journal of the British Geriatrics Society, Claud Regnard rejects some of the Neuberger report findings, saying that the LCP has been made "a scapegoat". The review lists the many reasons for poor care and communication but found no evidence that the LCP was the cause of poor care.

Regnard also calls some of the report's recommendations "puzzling", stating that "their suggestion to replace the LCP with an "end of life care plan" creates a plan with death as an end point, the same criticism they levelled at the LCP. They also expect the Care Quality Commission to carry out a thematic review within 12 months of how dying patients are treated, which Regnard describes as "rather like setting a handwriting test but confiscating the only pen beforehand."

"The most puzzling omissions were not to consider the distress of partners and relatives at the mention of a document that had been discredited by a national review and to make no provision for a replacement tool."

Regnard does say that the LCP could have been improved, suggesting that audits could have focused more on delivery than documentation, and that training should have been made mandatory, but argues that the LCP itself was not the cause of poor care. Discrediting it, he warns, "will ensure that those who remain ignorant or negligent will continue their poor practice without fear of being discovered for the years it may take to produce an alternative."

However, the Neuberger report does contain components that he believes will be of benefit to patients, particularly the plea for personalised care and the proposal to set up a national alliance looking at end of life care.

Regnard says, "the death of the Liverpool Care Pathway was preventable, an irony that was lost in the rush to pronounce its demise and promote the message of a listening government. It is as logical to discredit guidance because of errant clinicians as it is to ban the Highway Code because of bad drivers."

**Key Messages:**
- The Neuberger report made the Liverpool Care Pathway "a scapegoat"
- No evidence that the LCP was the cause of poor care
- Discrediting a widely used quality assurance tool without a replacement is a disservice to dying patients
- Recommendations for personalised care and a national end of life care alliance are worthy aims

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