

QI Weekly



Hospice and Palliative Care

End-of-Life Care

- Healthcare costs in the last year of life account for about 25% of total healthcare spend for Medicare beneficiaries.
- Seriously ill patients and their families often receive inadequate care, characterized by: untreated pain and physical symptoms, spiritual and emotional distress, high family caregiving burdens, and unnecessary or unwanted treatments inconsistent with their previously stated preferences for care.

Impacts of Hospice Care

- Research indicates that hospice reduces the use of hospital-based services—including emergency department visits and intensive care unit stays—and the likelihood of death in the hospital.
- It can also reduce psychological distress and improve patient and family satisfaction.



Understanding Hospice Care:

- Applies to patients who are expected to live 6 months or less and have subsequently ceased curative treatments
- Focuses on providing pain and symptom management to improve chronically ill, terminally ill or seriously ill patients'
 quality of life
- Utilizes a multidisciplinary care team of physicians, nurses, social workers, and chaplains to care for the physical, emotional, social, and spiritual needs of patients and their families

Understanding Palliative Care:

- Applies to seriously ill patients who are continuing to have curative treatment and do not have a prognosis of less than 6
 months to live.
- Focuses on providing patients relief from pain and other symptoms of serious illness, regardless of the diagnosis or stage
 of the illness

Initiating Patient Conversations about Hospice

While it may be difficult to initiate conversations with your patients about hospice, having a better understanding of its overall philosophy can help you feel more comfortable and informed.

- Hospice is an approach to care, not a specific place.
- Hospice can be provided in any setting—home, nursing home, assisted living facility, or inpatient hospital.

Ordering a Hospice Referral in Allscripts:

