



# How Palliative Care Team Composition Affects Program Variables and Outcomes Data



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## Statement of the Problem

Few studies have focused on the relationship of inpatient palliative care (PC) team composition and its effect on program variables and outcomes data.

## Background

- Literature review suggests that many studies support the benefit of PC on patient satisfaction and outcomes: readmission rate, hospice utilization, hospital penetration rate, length of stay reduction.
- Substantial evidence exists on the positive impact of inpatient PC in relation to outcomes but evidence does not show how PC team composition may or may not affect the same outcomes (Spetz et al., 2016).

## Purpose & Methods

- Program evaluation project assessed the relationship between PC team composition and program variables (number of PC referrals per month, primary diagnosis, reason for consult, referring unit), and outcomes (discharge disposition, length of stay [LOS] pre/post PC consult, PC readmission rate, percent of hospice utilization, and PC penetration rate) at three hospitals.

- IRB exempt
- Three Denver Metro Centura Health System hospitals
- Each hospital's PC team consists of a different staff combination (physicians, advance practice nurses (APNS), and/or social workers).
- 2017 PC program data were extracted from the EHR, entered into an Excel database, and retrospectively evaluated to compare program variables and outcomes.

## Findings



## Conclusions/Implications

- Similar trends existed for number of PC referrals per month, PC penetration rate, discharge disposition, length of stay [LOS] before and after PC consult, referring unit, and reason for consult.
- Team with the largest number of physicians/APNs had slightly greater number of consults requested for pain/symptom management evaluation.
- Teams with a greater number of social work hours had higher hospice utilization.
- Data for PC readmission rate and primary diagnosis could not be obtained as unknown changes to the EHR occurred and this was no longer being tracked.
- Few variances were noted among program variables and outcomes despite inpatient PC teams having significant differences in team composition.
- Given the limitations of this study, more research on the impact of interdisciplinary team composition on program variables and outcomes is indicated.

## Acknowledgement/References

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References:

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