



Connecticut

Palliative Care in Your State's Hospitals, 2015

Hospital-Based Palliative Care in Your State*

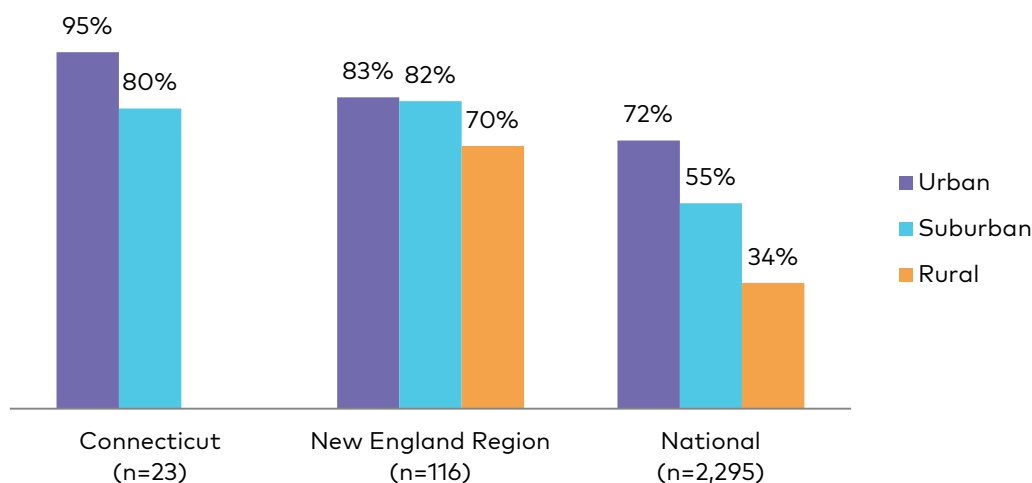
The availability of palliative care services in U.S. hospitals varies widely by state and region. Most large hospitals now offer palliative care services.

Location	Total Programs/ Hospitals	By Hospital Size			
		<50 beds	50-150 beds	151-300 beds	300+ beds
Connecticut	92% (23/25)	0% (0/1)	83% (5/6)	100% (9/9)	100% (9/9)
New England Region	80% (116/145)	62% (29/47)	76% (29/38)	94% (29/31)	100% (29/29)
National	59% (2,295/3,888)	38% (509/1,508)	60% (540/904)	77% (580/756)	93% (666/720)

New England = CT, MA, ME, NH, RI, and VT

Percentage of Hospitals with a Palliative Care Program by Community Type

Hospital-based palliative care is less common in rural communities. Nationally, 34% of rural hospitals provide palliative care compared to 72% of urban hospitals.



*Data on hospitals with palliative care were obtained from the American Hospital Association (AHA) Survey Database™ and the National Palliative Care Registry™. For both, the most recent and complete data available are for 2015.

National Palliative Care Registry™

Participation in the Registry is free and open to all palliative care programs across the continuum of care. By participating in the Registry, programs add their data to the national profile of palliative care, receive access to custom reports that measure their progress year-to-year, and assess their programs through comparisons with peer programs. Participation also helps promote standardization and improve the quality of palliative care in your state and nationally.

44% (10/23) of hospital-based palliative care programs in CT participated in 2015.

The findings below are based on palliative care programs that participated in the Registry.

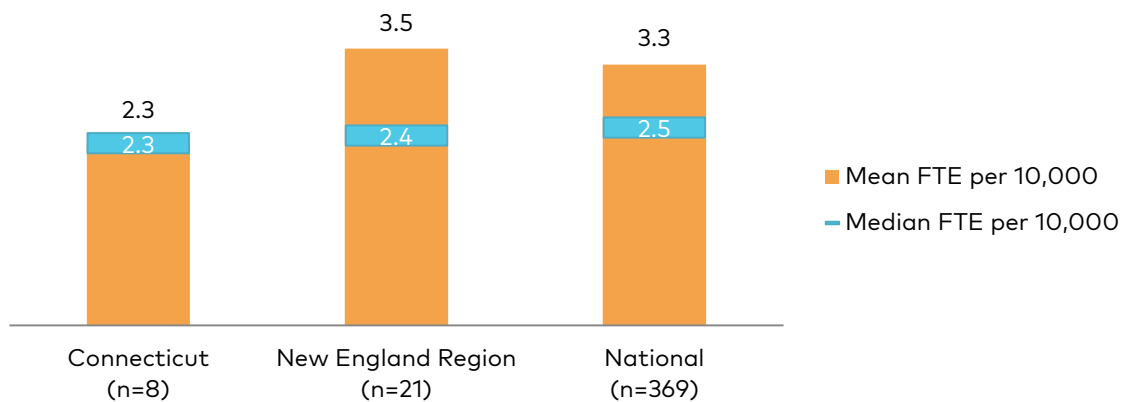
Palliative Care Service Penetration

Penetration is the percentage of annual hospital admissions seen by the palliative care program and is an estimate of how well programs are reaching patients in need.



Staffing per 10,000 Hospital Admissions

Hospital-based palliative care teams are composed of physicians, nurses, social workers, chaplains, and other disciplines. Staffing full-time equivalent (FTE) per 10,000 admissions allows for staffing level comparisons across hospitals of different sizes by standardizing admissions.



The National Palliative Care Registry™ is a joint project of the Center to Advance Palliative Care (CAPC) and the National Palliative Care Research Center (NPCRC).

Learn more and participate at registry.capc.org