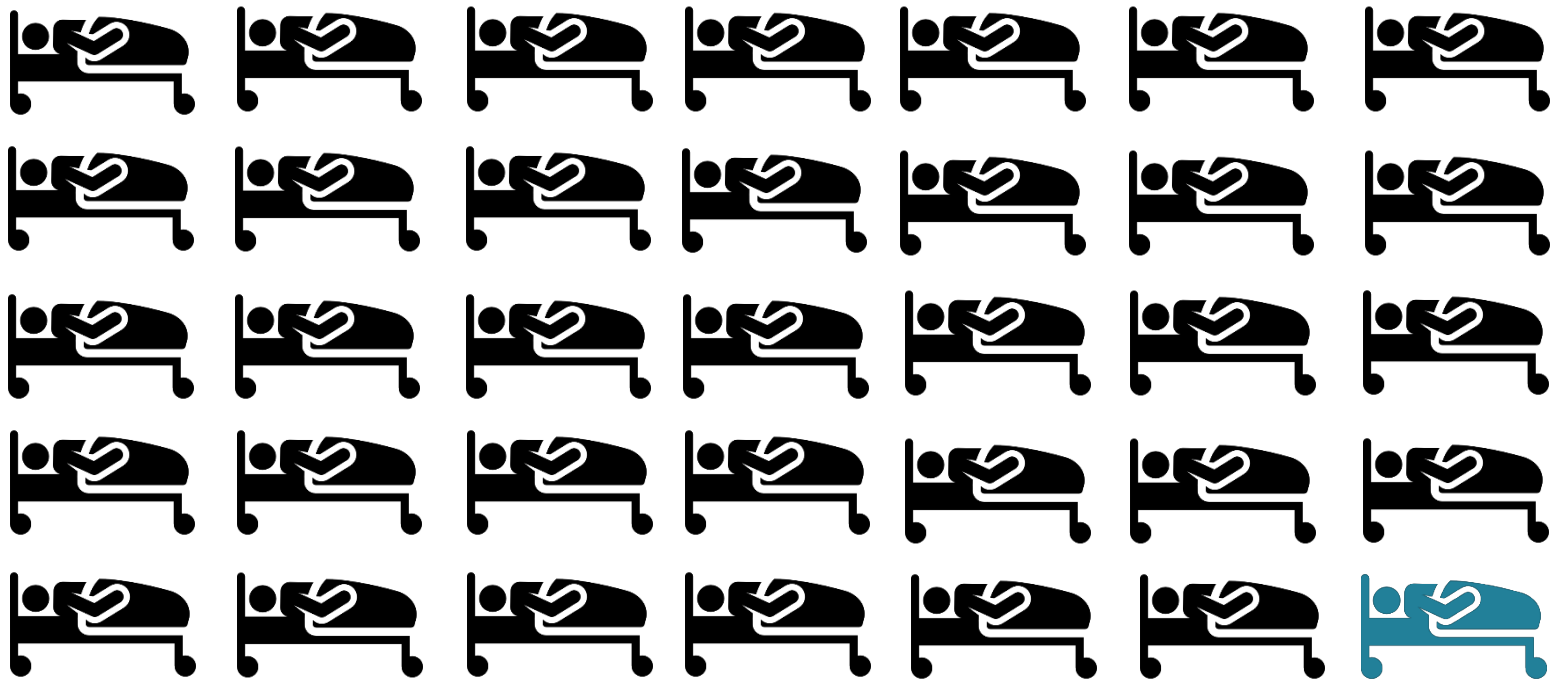


# **Patient Encounters & Hospital Reach**

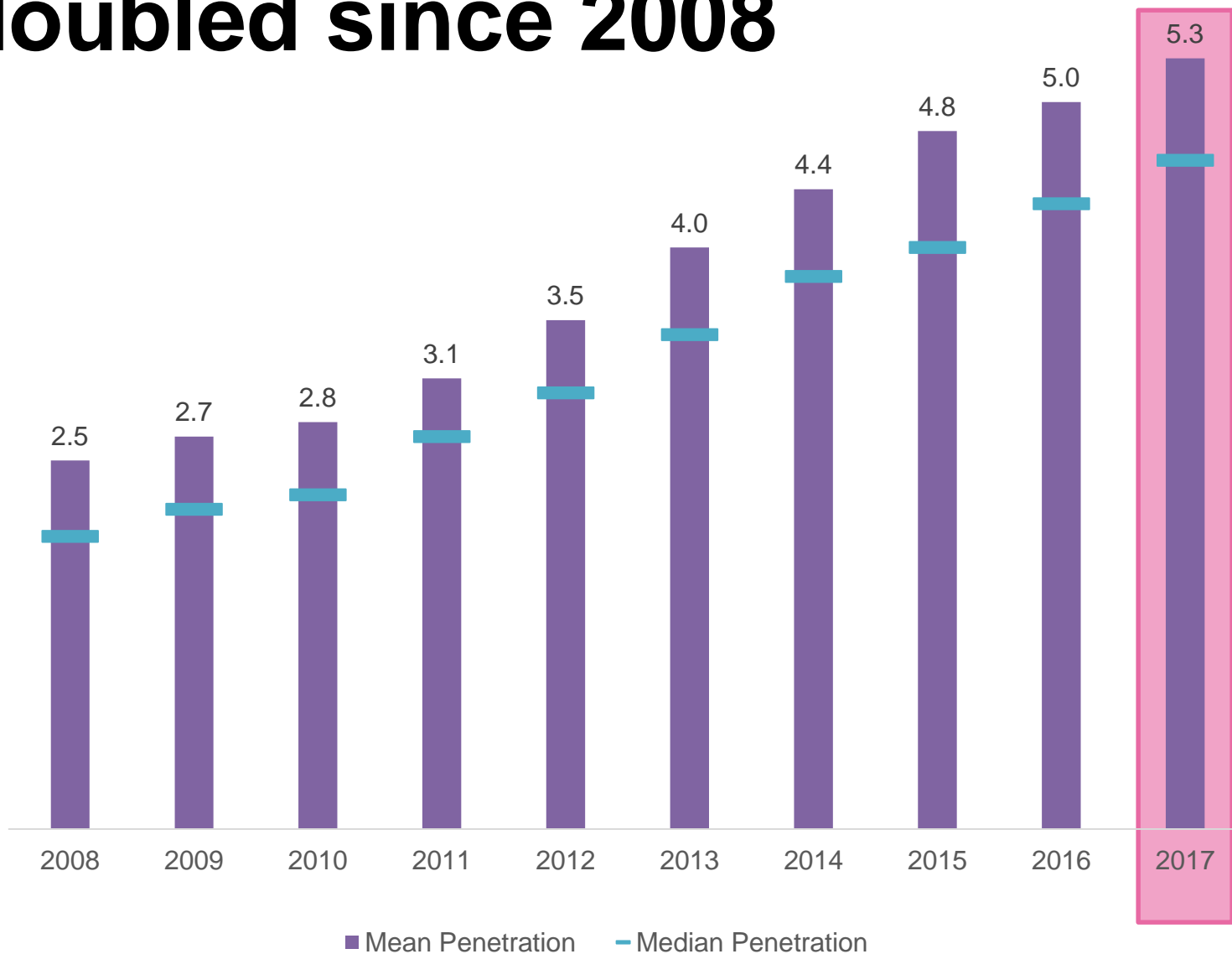
# Palliative Care Service Penetration

Palliative care service penetration is the percentage of annual hospital admissions seen by the palliative care team. Penetration is used to determine how well palliative care programs are reaching patients in need.



100 initial consultations / 3,500 hospital admissions = 2.9% penetration

# Penetration has more than doubled since 2008



# Palliative Care Programs, 2017

## 5.3% Penetration

- Varies depending on the type of hospital, including size
- Depends on the make-up of the patient population

## 830 Initial Consults

- Larger hospitals provide a larger number of initial consults
- 1,302 for large hospitals with 300+ beds compared to 376 for small hospitals with <150 beds

## 3.2 Visits per Patient

- 1 initial consult + 2.2 follow-up visits per patient during a single hospital stay

# Pediatric Programs, 2017

## 3.1% Penetration

- Based on pediatric admissions
- Smaller hospitals reach a larger percentage of annual hospital admissions

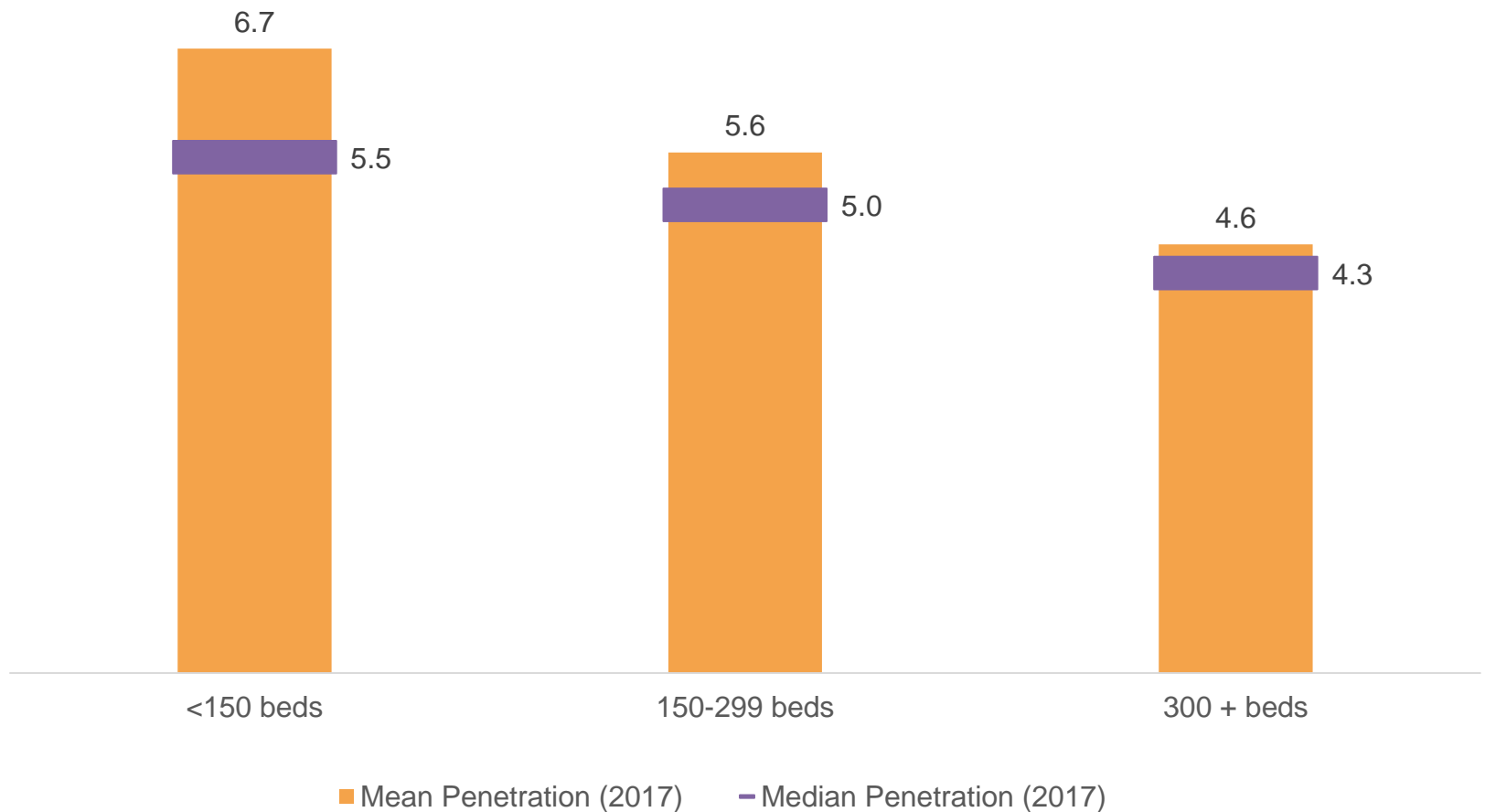
## 326.5 Initial Consults

- Range: 70 – 1,309
- Larger hospitals provide a larger number of initial consults

## 4.4 Visits per Patient

- 1 initial consult + 3.4 follow-up visits during the hospital admission
- More visits per patient than adult programs

# Smaller hospitals reach a larger % of annual hospital admissions



# Penetration Differences, 2017

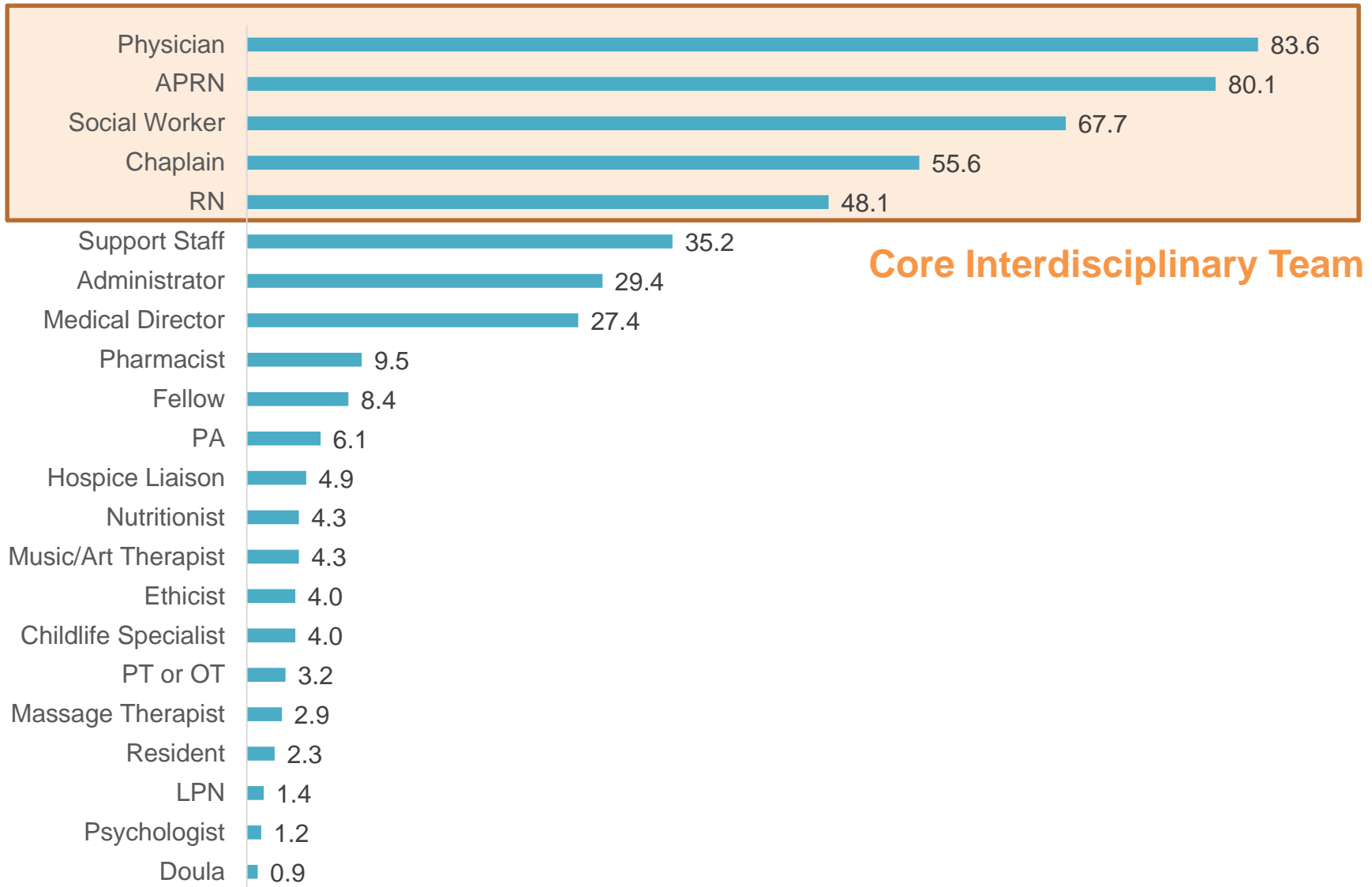
- **Teaching Status:** Teaching hospitals see an average of 4.9% compared to 5.9% for non-teaching hospitals (trend holds across all hospital sizes)
- **Pal Care Trigger:** Hospitals with automatic screening criteria see an average of 6.0% of admissions compared to 5.0% for hospitals without a trigger
- **Follow-ups:** Programs providing at least 1 follow-up visit per patient see a smaller penetration (4.9%) compared to programs that provide an initial consult without follow-up visits (5.6%)



# **Palliative Care Program Staffing**

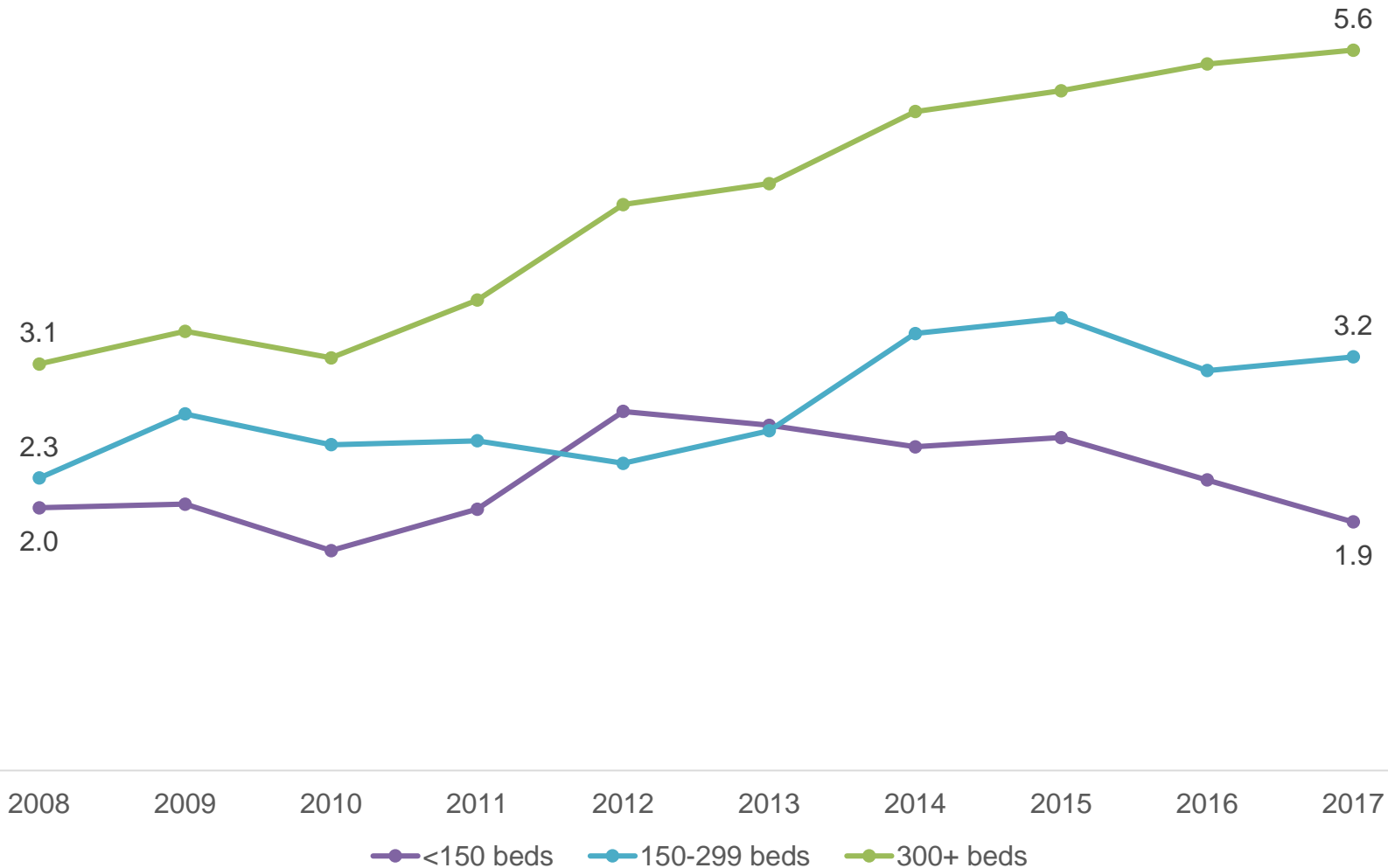


# Percent of Programs Reporting the following Staff Disciplines, 2017

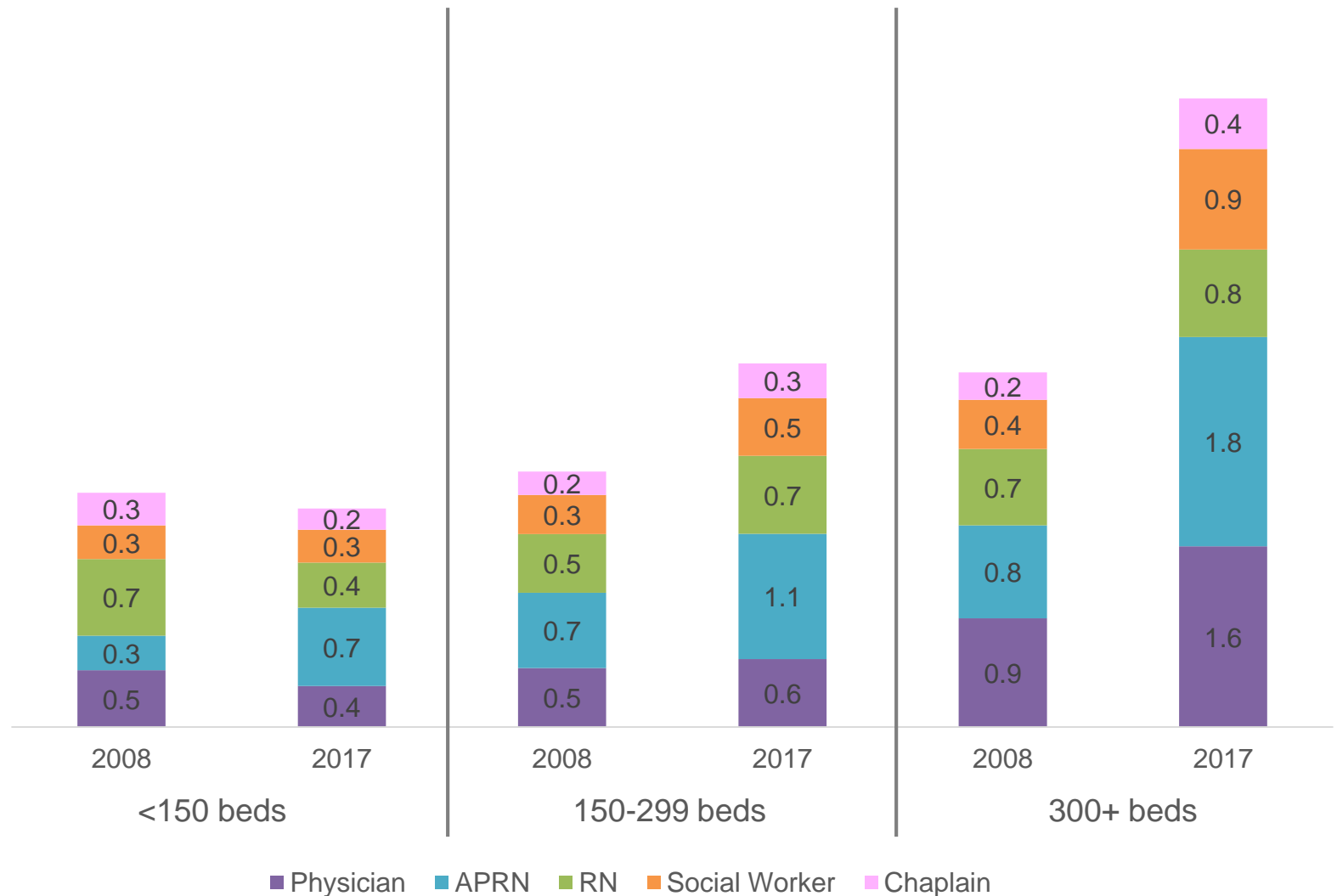


# Growth in Staffing Full-time Equivalent for the Interdisciplinary Team

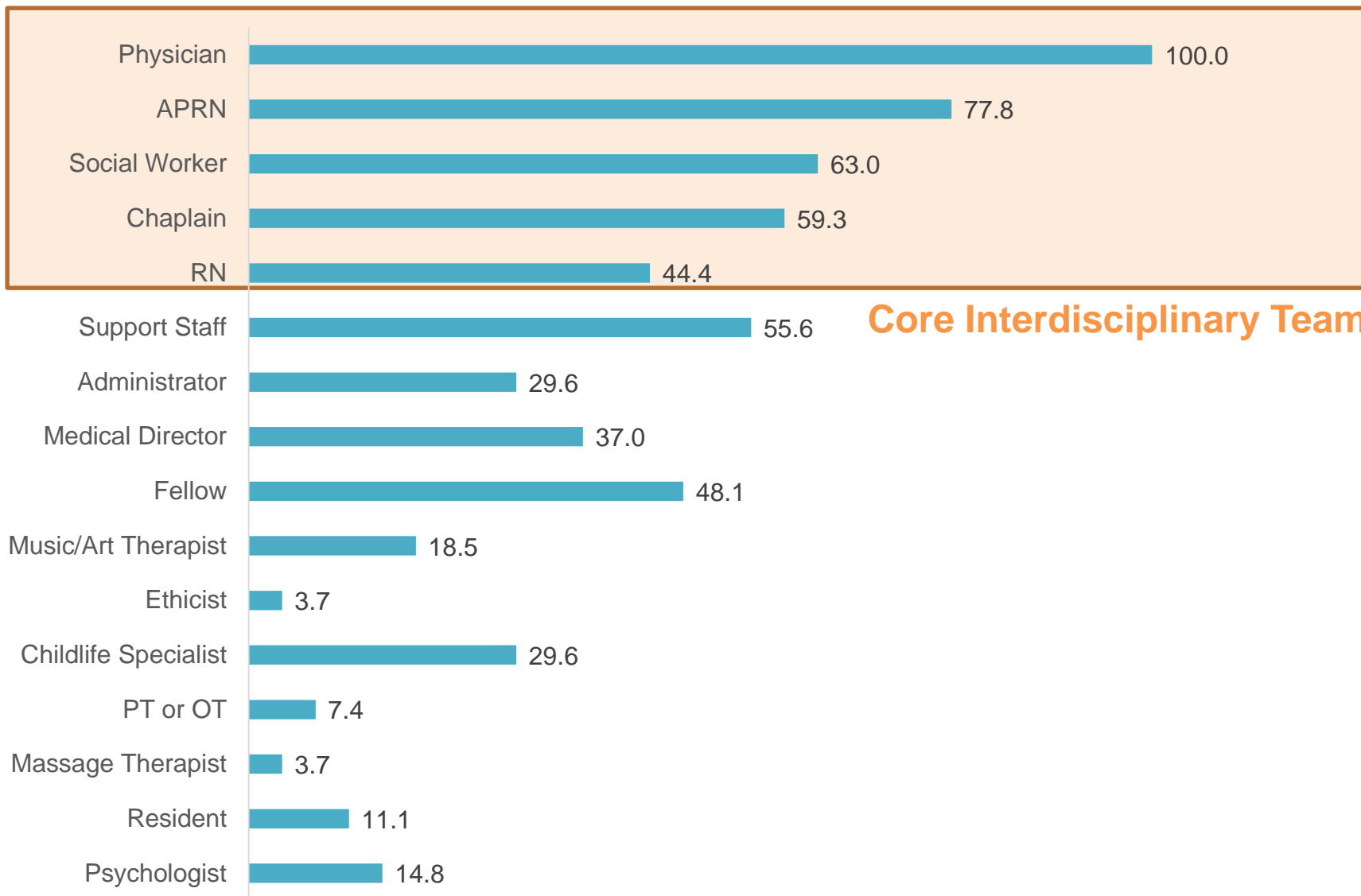
(Physicians, APRNs, RNs, Social Workers, Chaplains)



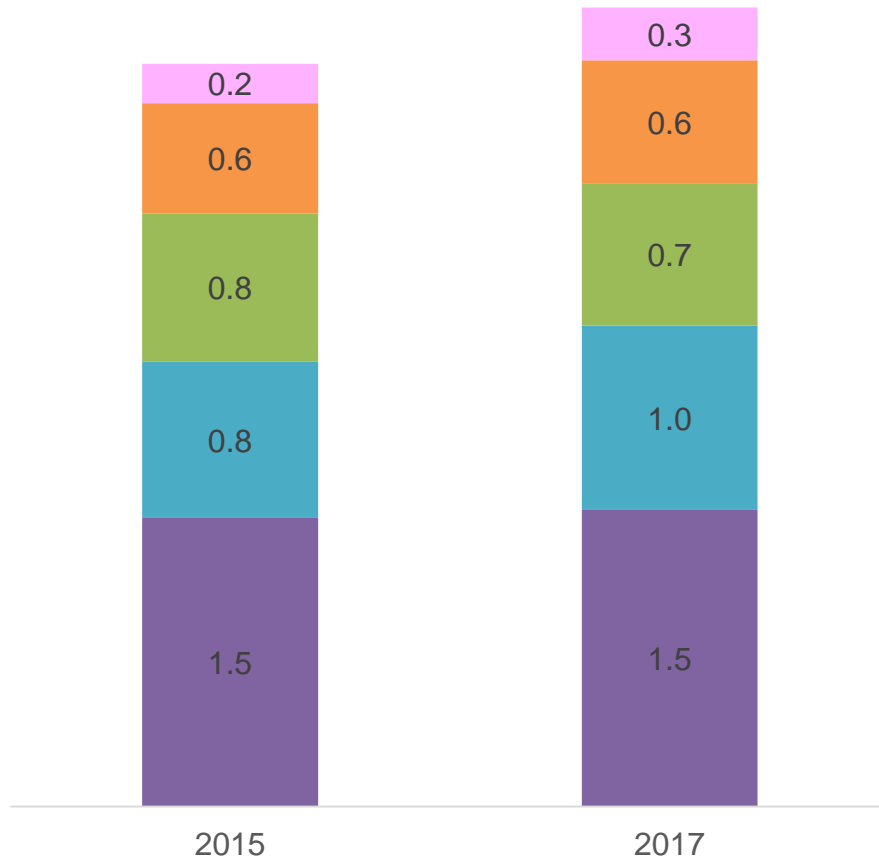
# Growth in Staffing FTEs limited to large hospitals and APRNs



# Pediatric Programs: Percent of Programs Reporting the following Staff Disciplines



# Pediatric Programs: Staffing FTEs



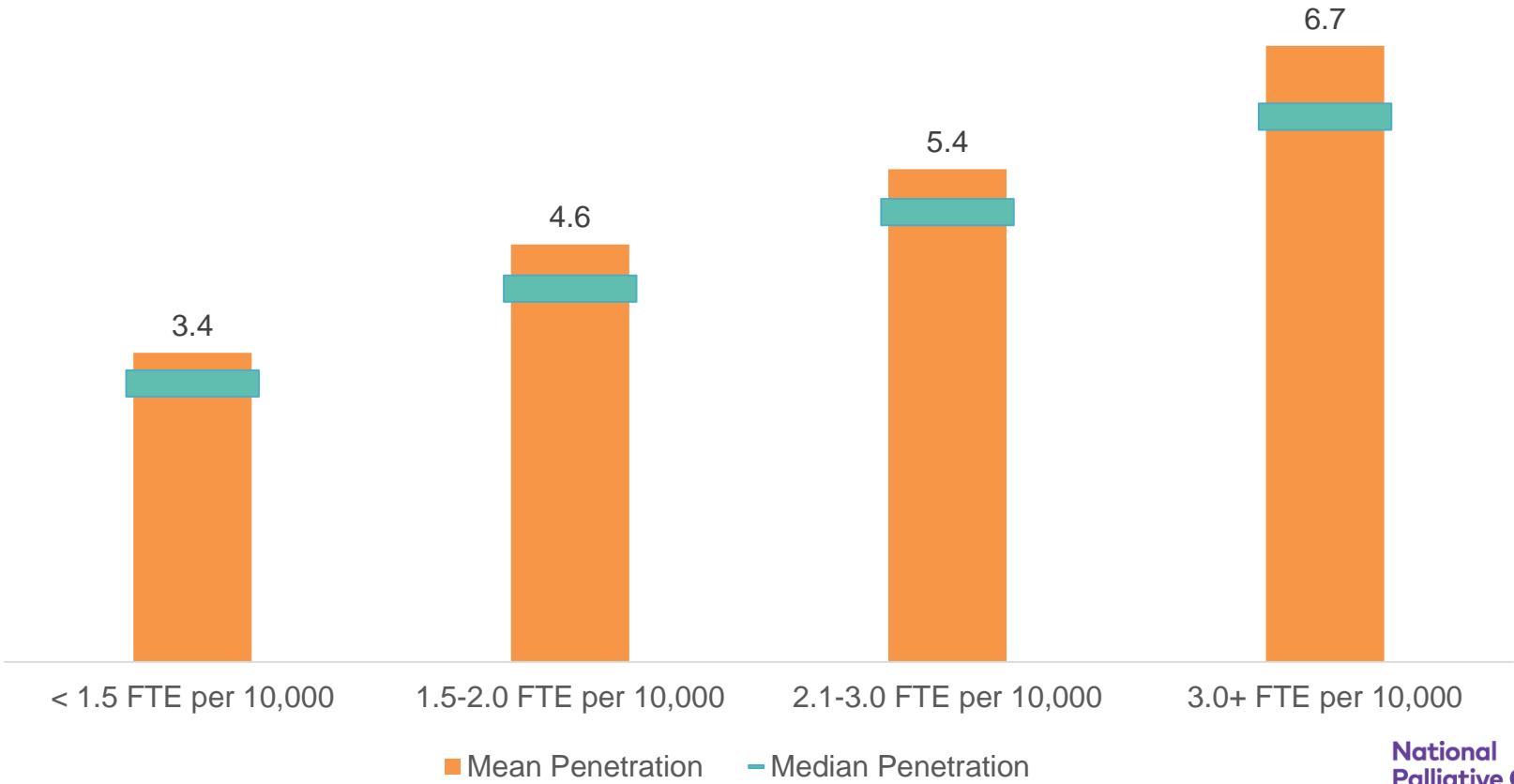
■ Physician ■ APRN ■ RN ■ Social Worker ■ Chaplain

Not enough data to compare back to 2008.

Small increases since 2015 across all disciplines, with the largest growth also being in APRNs on teams.

- **Hospital Program Models:**
  - 81% of programs are internal to the hospital, where all team members are employed by the hospital
  - 3% are administered by an outside entity like a hospice
  - 16% are partially internal with additional contracted services
- **Staffing Models:**
  - 90% of Physicians, APRNs, RNs, and SWs are funded through the palliative care budget
  - Nearly 30% of chaplains are either in-kind (paid out of other budgets) or are volunteer

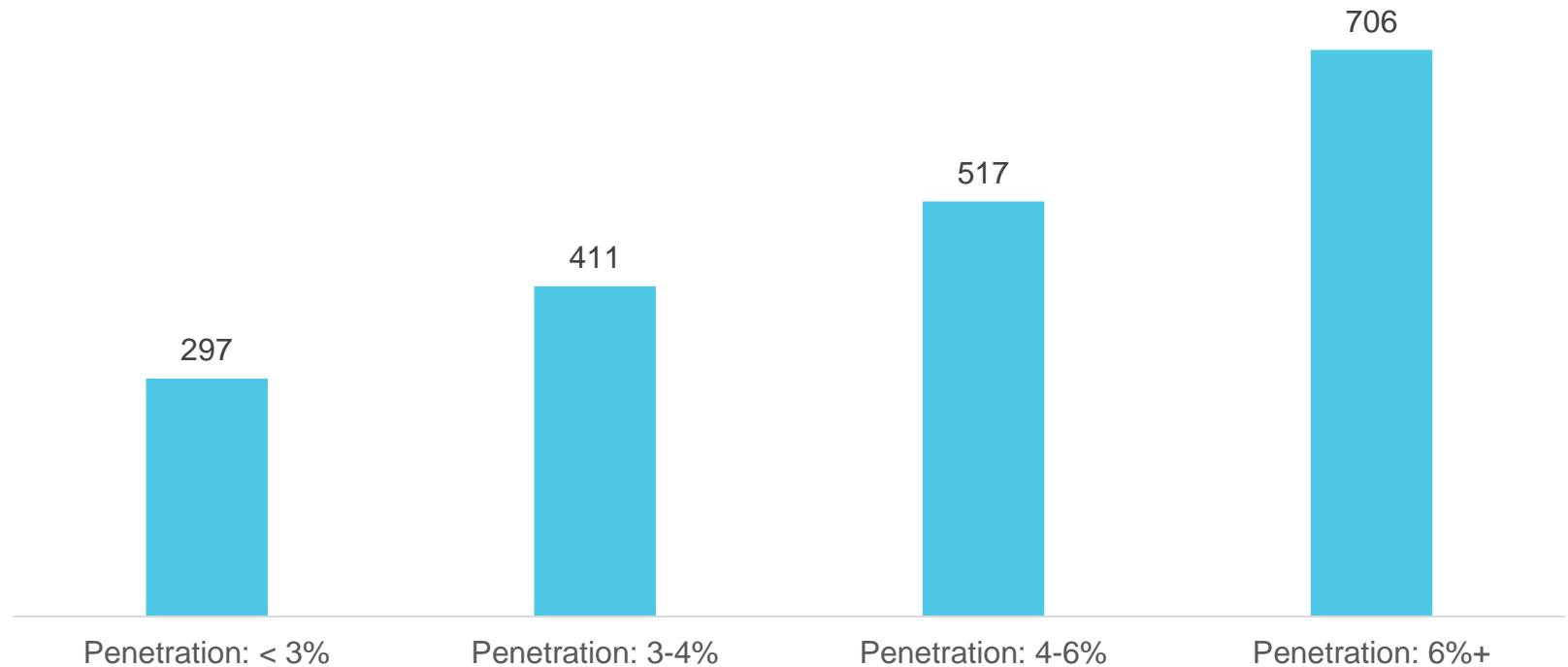
# More adequately staffed programs see a larger percentage of annual hospital admissions



Based on: Interdisciplinary Palliative Care Team FTE per 10,000 Hospital Admissions

# Programs with higher penetration have higher billable workload

Number of Initial Consults per 1 FTE Billable Provider by Penetration



Workload = Number of initial consults per 1 FTE of Physician or APRN or PA

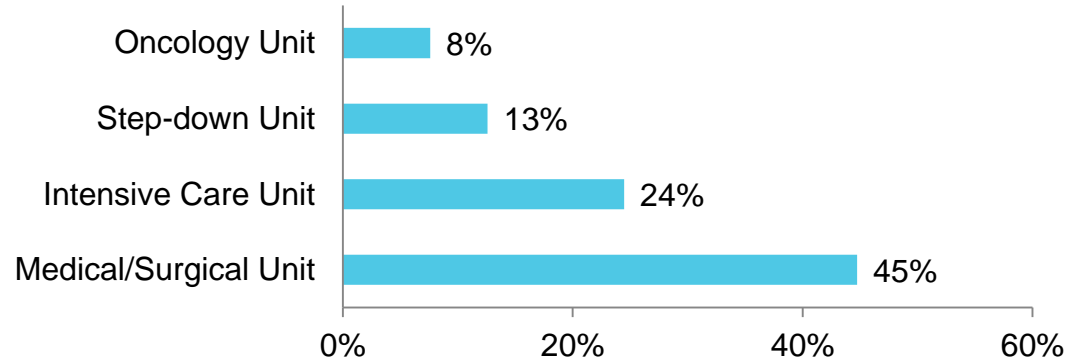




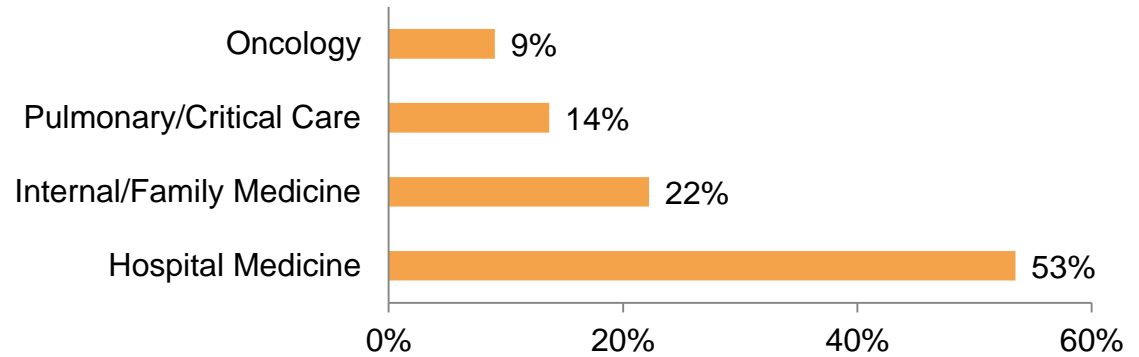
# **Palliative Care Program Features**

# Top 4 Referrals (2017)

## Referring Sites



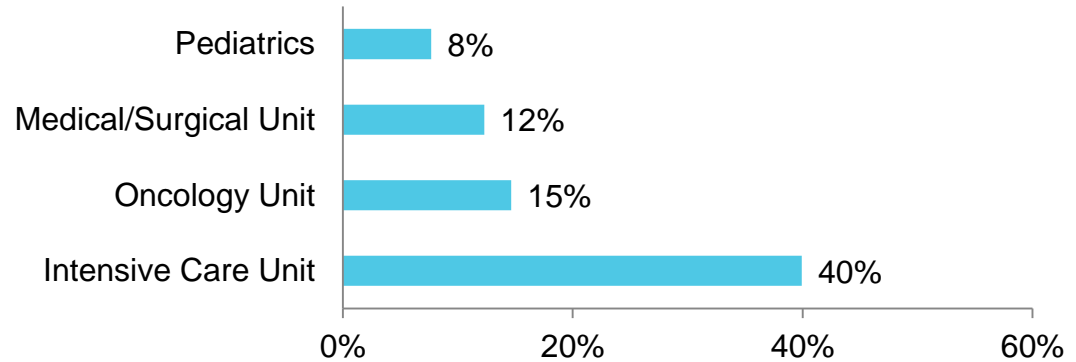
## Referring Physician Specialties



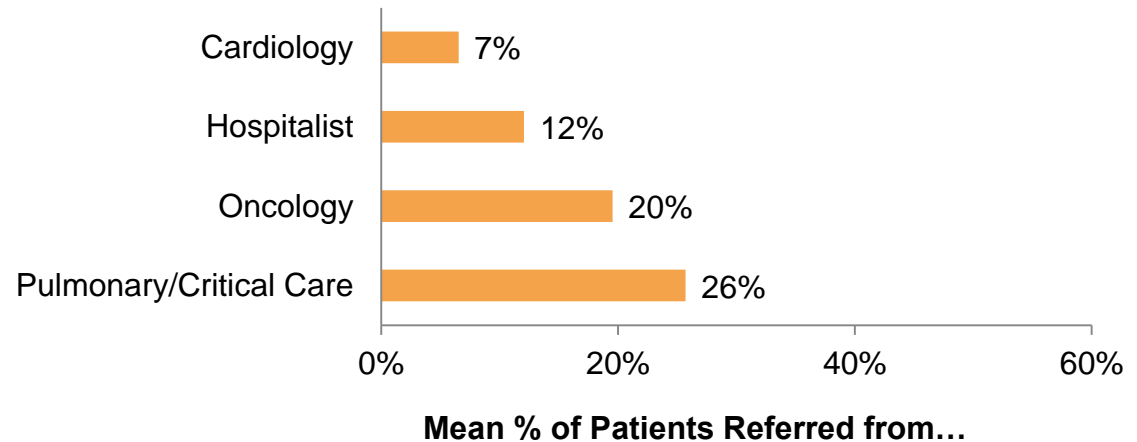
Mean % of Patients Referred from...

# Pediatric: Top 4 Referrals (2017)

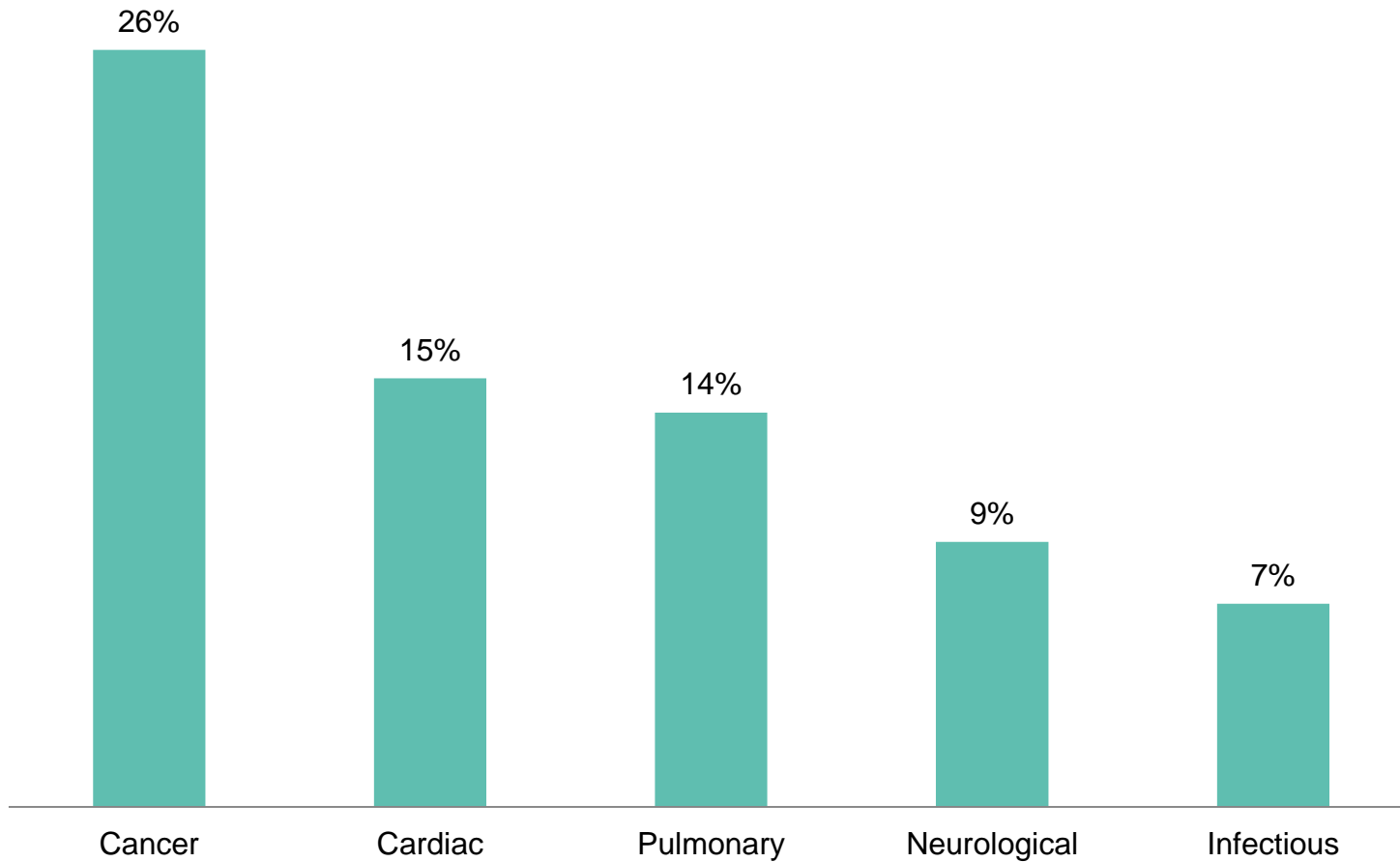
## Referring Sites



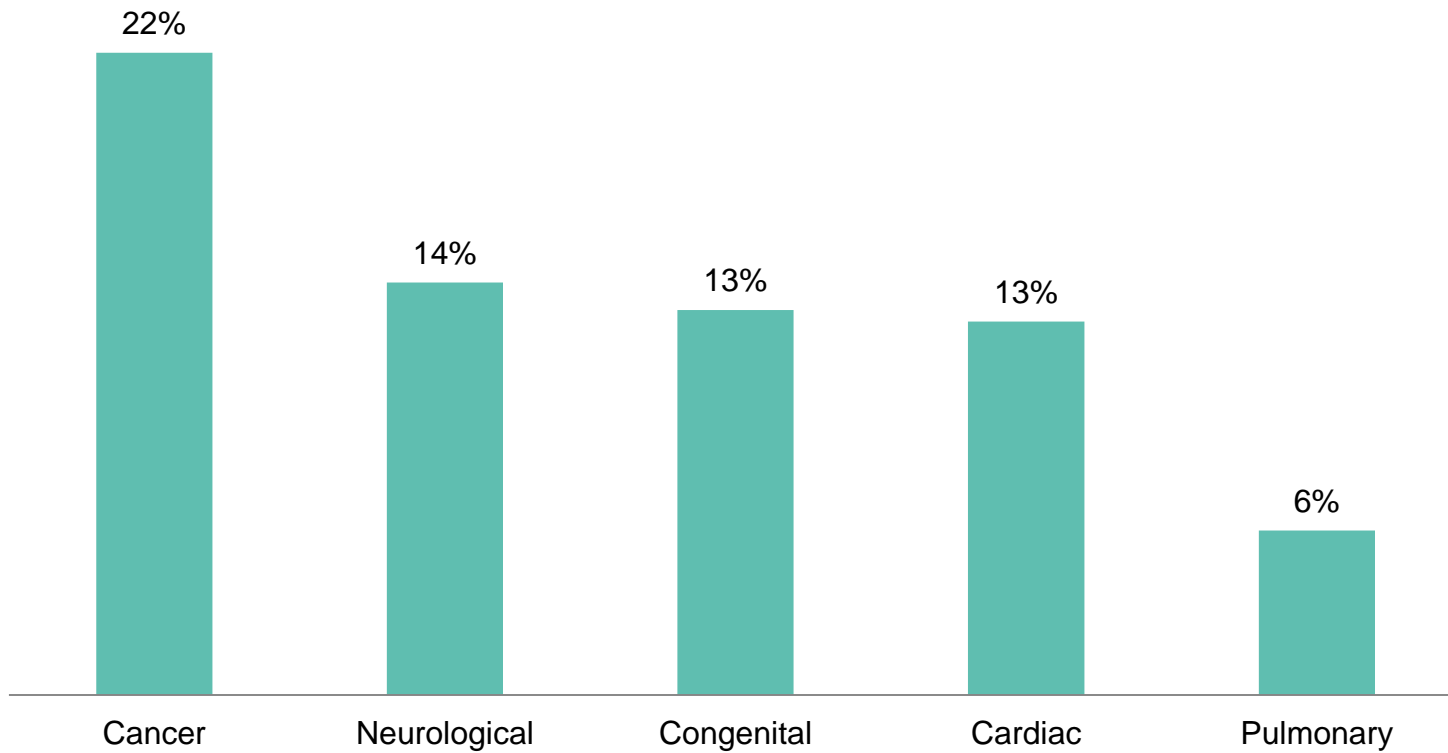
## Referring Physician Specialties



# Top 5 Primary Diagnoses (2017)



# Pediatric: Top 5 Primary Diagnoses (2017)



# Programs meeting NCP Guidelines

Program Feature	Adult Programs	Pediatric Programs
24/7 Availability	38.7%	81.5%
Team Wellness Plan	46.7%	61.5%
Bereavement Plan	48.7%	79.2%
Quality Improvement (QI) Plan	71.4%	54.2%
Education Plan	74.0%	87.5%
Physician on Team	83.6%	100.0%
Social Worker on Team	67.7%	63.0%
Chaplain on Team	55.6%	59.3%
At least one HPM Certified Clinician	83.6%	83.9%
Established Relationship with a Hospice	97.5%	96.6%