

Integration and Enculturation of a Palliative Care Program into a Small Community Hospital



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Background

Inova Fair Oaks Hospital is a 182 bed community hospital located in Fairfax, VA. In 2009 one provider began seeing patients using a Palliative Care consult model, which led the intensivists in our ICU to request Palliative Care participation at ICU inter-disciplinary morning rounds. The satisfaction of the medical team in ICU resulted in discussions with hospital senior leadership to sponsor a Palliative Care Team, charged with the goals of improving the quality of patient care and of achieving Disease Specific Certification for Advanced Palliative Care from the Joint Commission. Certification was achieved in May 2012 and re-certification in May 2015.

Methods

- Identifying champions across disciplines (Administration, Nursing, Medical, etc.);
- Implementation of a process to identify appropriate patients;
- Determining and providing the educational needs for hospital staff and the local community;
- Funding for a nurse administrator/program coordinator for Palliative Care, an experienced social worker and experienced chaplaincy support,
- Enlisting co-operation of other palliative/hospice providers with hospital privileges to use the platform designed for Palliative Care within the hospital to create consistency within the quality of care provided.
- Arranging 24/7 coverage;

The value of Certification:

- Quality of patient care improved through consistency in clinical processes
- Certification standards provides a framework for program structure and management to organize and to maintain a consistently high-level of quality, using effective data-driven performance improvement.
- The objective assessment of clinical excellence by a non-biased expert providing advice and education on best practices
- The process creates a loyal, cohesive clinical team where skills and knowledge are validated
- Promotes a culture of excellence across the continuum of care
- Facilitates marketing, contracting and reimbursement
- Certification strengthens community confidence in the quality and safety of care, treatment and services making a strong about the organization's efforts to provide the highest quality services.
- Demonstrates how Palliative Care influences quality of care and patient satisfaction in a community hospital.

Results

Hospital Nursing Medicine Chaplaincy Social Work

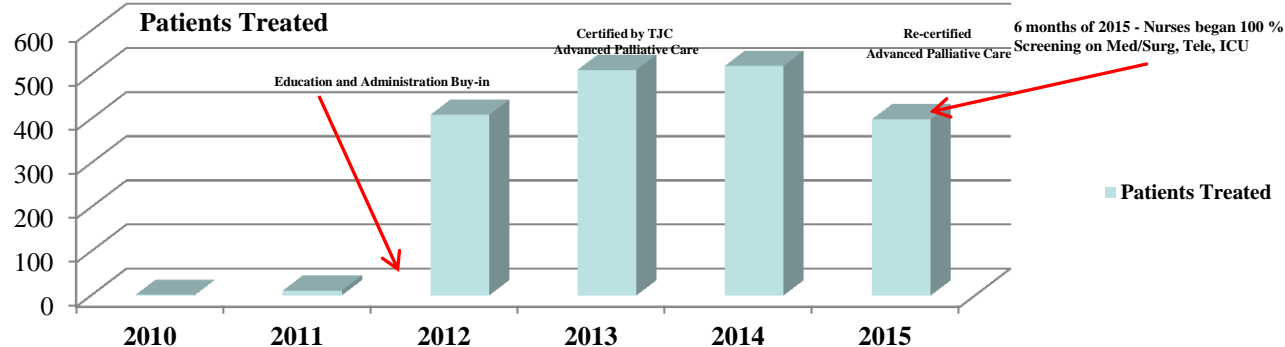
The result of this systematic approach to platform development led to:

- Consistent growth in Palliative Care referrals,
- Incorporation of Palliative Care as a 'standard of care';
- Positive impact on hospital patient satisfaction surveys;
- Improved pain control;
- Improved nursing satisfaction with Interdisciplinary Team support and co-operation, and
- Shorter length of stay with reduced 30 day re-admissions.

References

American Academy of Hospice and Palliative Medicine (AAHPM) and Hospice and Palliative Nurses Association (HPNA). 2014. Top 10 measures that matter. <http://aaahpm.org/wp-content/uploads/2014/05/Top10Measures.pdf>
Hanson LC, Rowe C, Wessell K, et al. Measuring palliative care quality for seriously ill hospitalized patients. *J Palliat Med*. 2012;15:798-804.
Schenck AP, Rokoske FS, Durham D, Cagle JG, Hanson LC. Quality measures for hospice and palliative care: piloting the PEACE measures. *J Palliat Med*. 2014;17:769-775.
Center to Advance Palliative Care (CAPC). 2015. Accessed on July 10, 2015. <https://www.capc.org/>

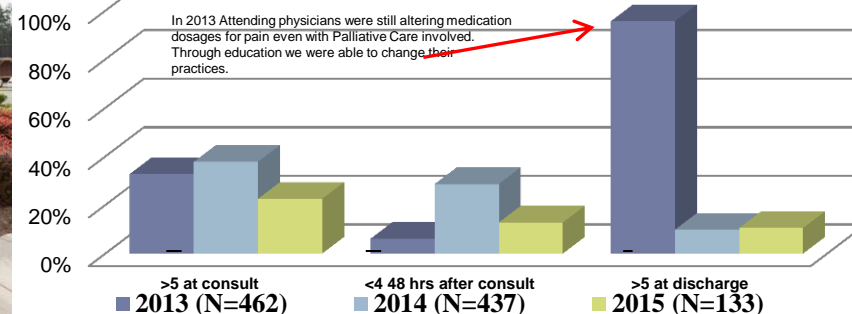
Patient Referrals – Patient screening occurs on Admission in Medical, Oncology, ICU, Telemetry, and Surgical



Pain Scores at Consult and at 48 Hours after Consult

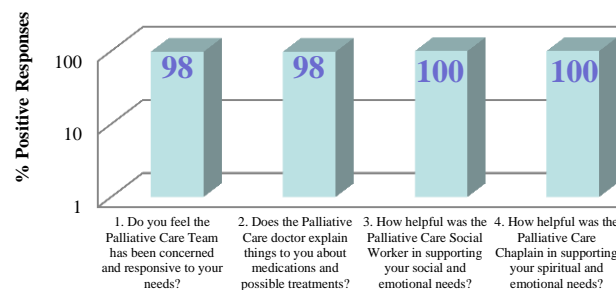


Pain Scores Pre- and Post P.C. Consultation (2013-2015 YTD)

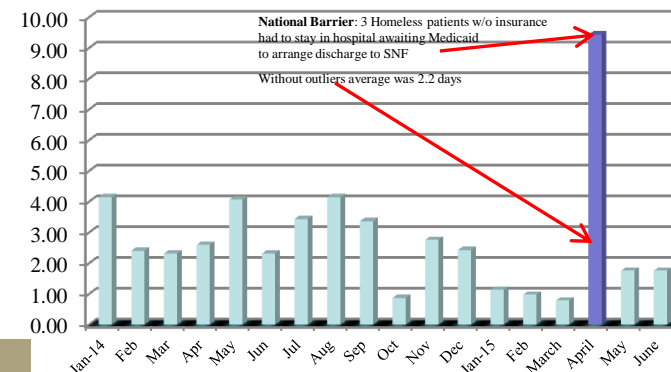


Patient Satisfaction

Palliative Care 2015 Satisfaction Survey Results



Average LOS after Consult 2014 & 2015



**INOVA FAIR OAKS
HOSPITAL**