

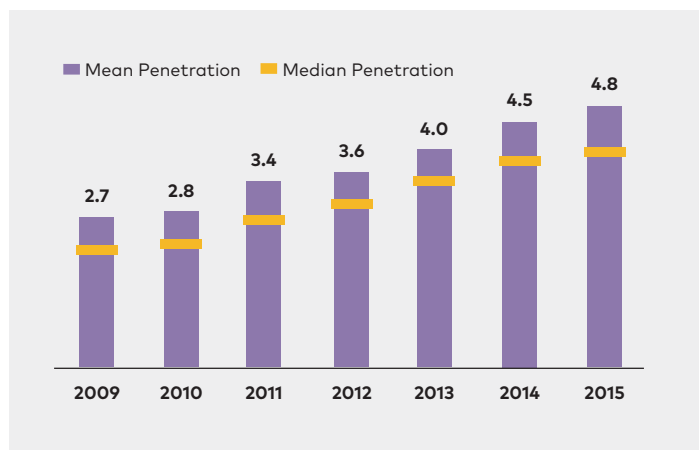
Annual Survey Summary

Results from the National Palliative Care Registry™ 2015

The National Palliative Care Registry™ is building a profile of palliative care teams, operations and service delivery. The goals of the Registry are two-fold: (1) assist palliative care programs in tracking their development year-to-year, and (2) promote standardization and improve the quality of palliative care in the United States.

The Registry (registry.capc.org) provides actionable data that programs can use to secure, expand and retain resources for delivery of high-quality palliative care, and to support the establishment of new palliative care programs where none exist. Programs that participate in the Registry receive annual reports that measure their operational capacity and reach against comparable programs. Following are some of the trends.

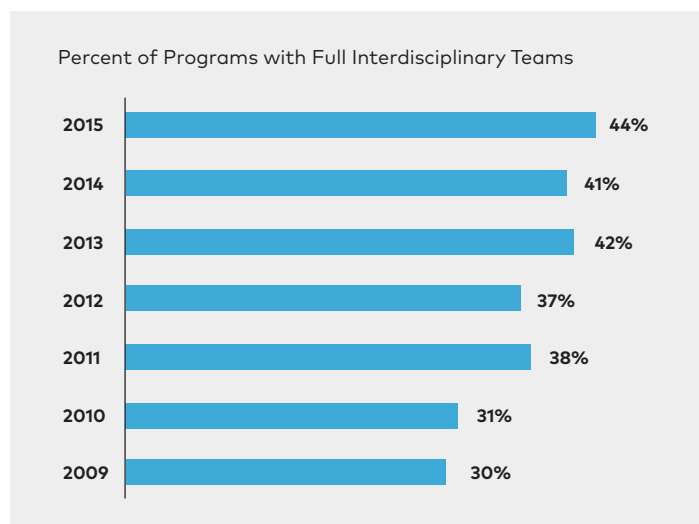
Palliative Care Service Penetration



Palliative care service penetration is the percentage of annual hospital admissions seen by the palliative care team. Over the past 7 years, penetration has increased by 78%, from 2.7 to 4.8 %.

In 2015, on average, 4.8% of all hospital admissions received palliative care.

Complete Interdisciplinary Palliative Care Teams



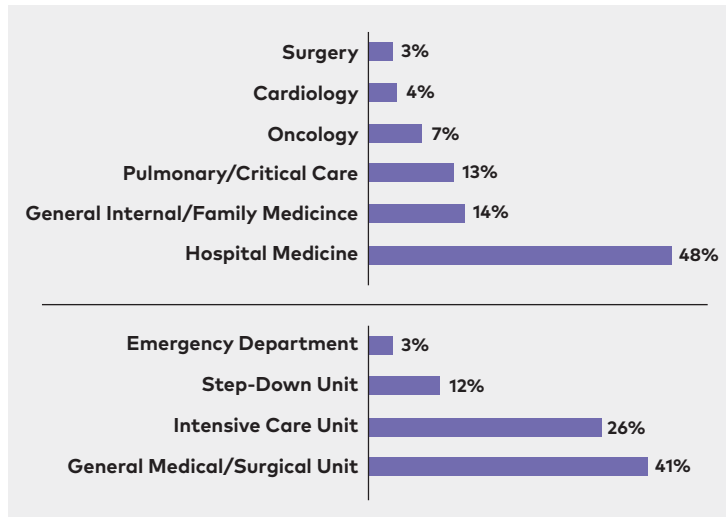
Standards set by the Joint Commission Advanced Certification for Palliative Care state that the core interdisciplinary team should include a physician, an advanced practice or registered nurse, a social worker and a chaplain.

From 2009 to 2015, the number of programs reporting a complete interdisciplinary team increased by nearly 50%, from 30% of programs to 44%.

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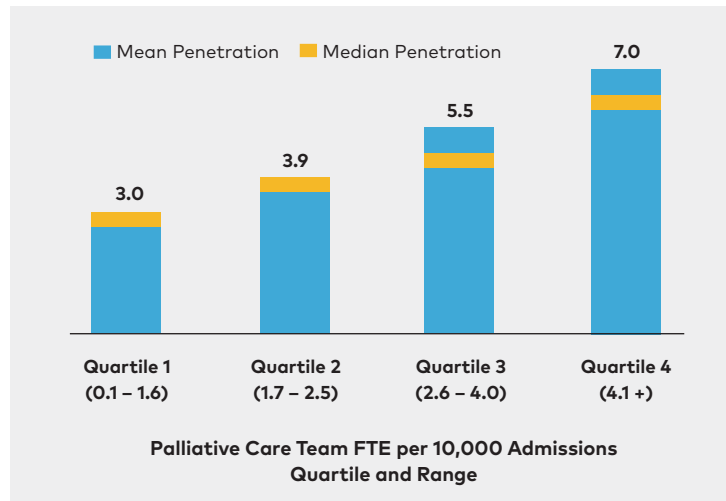
Referring Physician Specialties and Sites



Nearly half (48%) of all palliative care referrals in 2015 came from hospitalists.

When looking at referring hospital unit, most referrals (41%) came from medical/surgical units.

Palliative Care Staffing and Penetration



Higher staffing levels are a key determinant of higher penetration rates (serving more patients in need). Insufficient staffing continues to present a barrier to reaching patients.

Programs with the highest staffing levels (full-time equivalent) reach 7% of all hospital admissions, while the smallest programs reach 3%.

To learn more and to submit data, visit registry.ccapc.org