



## Palliative Care in Hospitals Continues Rapid Growth

Over the last decade, palliative care has been one of the fastest growing trends in health care. The number of hospitals with palliative care teams has increased almost 150%, from about 600 in 2000 to more than 1,500 in 2009. According to the most recent analysis of the American Hospital Association (AHA) Annual Survey Database, 1,568, or 63% of U. S. hospitals with more than 50 beds have a palliative care team, and 85% with over 300 beds have one. The new analysis was conducted by the Center to Advance Palliative Care in conjunction with the National Palliative Care Research Center.

Once informed of the services provided by hospital palliative care teams, the public is extremely favorable toward them. In a 2011 nationwide survey, **92%** of respondents said it is important that palliative care services be made available at all hospitals for patients with serious illness and their families.

In a study of eight hospitals around the country reported in 2008, palliative care consultation was associated with a reduction in direct hospital costs of almost \$1,700 per admission (\$174 per day) for live discharges and of almost \$5,000 per admission (\$374 per day) for patients who died. A similar study conducted in 2011 of four New York State hospitals with mature, interdisciplinary palliative care consultation teams showed even greater savings with palliative care consultation. Palliative care consultation has been associated with better pain and symptom management, improved communication between the health care team and patient/family, and lower costs.

The WV Center for End-of-Life Care (WVCEOLC) through the WV Palliative Care Network (WVPCN) is available to assist institutions to start or strengthen their palliative care teams. Beginning in the Fall of 2011, the WVPCN will be conducting a series of audio conferences that will 1) explain how an interdisciplinary approach to palliative care can help patients and families accept a terminal diagnosis and plan accordingly, 2) discuss advanced strategies for pain and symptom management, and 3) identify how palliative care can improve quality and reduce hospital costs for end-of-life care.

**[www.wvendoflife.org](http://www.wvendoflife.org)**

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