Implementation Clinical Pathway Primary Palliative Care

Prague, EAPC Congress 1/6/2013

Bert Leysen, MD

Promotors: Bart Van den Eynden, MD PhD; Johan Wens, MD PhD

Universiteit Antwerpen
Challenges in Palliative Care*

1. To reach beyond cancer
2. To start much earlier in the illness than terminal stages
3. To reach beyond the physical to other dimensions of care (social, psychological, existential)
4. To extend from hospices and specialist services to generalists in hospitals and the community
5. To reach out more to support family carers

Clinical Pathway Palliative Care

• **Who:**
  - University of Antwerp: Research Group Palliative Care
  - Flemish Federation of Palliative Care

• **What:**
  - Pathway for palliative care in first-line setting
  - Inspired by Liverpool Care Pathway (LCP)
  - “1 year-prognosis” until death
Clinical Pathway Palliative Care

**Chronic patient**
1. ‘Surprise question’/SPICT

   Surprised: Next year again

   Not surprised: pathway!

**Assessment (2-3 consultations?)**
2. Prognosis:
   a) PPS
   b) ‘disease trajectory’

3. Needs?
   a) Bio-: stop therapy, more comfort?
   b) Psycho-: coping, depression, …?
   c) Social: supporting family, finances
   d) Existential: search for meaning

4. Advance care planning

**Interdisciplinary discussion!**
Needs and wishes are known
5. Care team to be extended?
6. Multidisciplinary discussion needed?

**Action**
7. Palliative care, holistic and interdisciplinary, to be followed in a common (paper/electronic) file

**Re-evaluation**
8. Steps 2-7 again
9. Watch for mile stones in prognosis:
   a) 3 months: palliative forfeit
   b) 3 days: LCP
Content

- Implementation
- Data collection
  - Individual data
  - Regional data
  - Qualitative data
• Palliative care networks (PCNs)
  - 2 PCNs in Flanders: 750,000 + 600,000
  - 1 PCN zone in Brussels: 1,100,000
  - 2 PCNs in Wallonia: 750,000? + 300,000?
Stepped wedge cluster design


Figure 1
Example of a stepped wedge study design.
Per cluster: step-by-step

• Before: usual care
• Education: PCN + GP-circle
  - GP + 1 primary health care worker
  - Interdisciplinary, interactive, practice-oriented
  - Two sessions + electronic support
• CPPPC in use
• Late participants
• Data collection

Universiteit Antwerpen
1. Practice denominator: total patients (14 days)

2. Research population: total SQ+ (14 days)

3. Included population: informed consent
   → GP: SPICT once; after death questionnaire (ADQ) once
   → Patient and informal carer (=unit): questionnaires during and after palliative care

   → GP: PPS monthly, from PPS<40 weekly
   → Home care nurse: PPS from PPS<40 weekly + ADQ

Universiteit Antwerpen
### Components coupled database

<table>
<thead>
<tr>
<th><strong>IMPLEMENTATION</strong></th>
<th><strong>DATA COLLECTION: INDIVIDUAL</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>GP+nurse</td>
<td>Patient+carers</td>
</tr>
<tr>
<td>A. (SPICT) PPS</td>
<td>C. POS + ...</td>
</tr>
<tr>
<td>B. After death</td>
<td>D. After death</td>
</tr>
<tr>
<td>InterMutualistic Agency (IMA)</td>
<td>Multidisciplinary Support Team (MST)</td>
</tr>
<tr>
<td>E. Health care consumption data</td>
<td>F. Health care service data</td>
</tr>
</tbody>
</table>

Universiteit Antwerpen
Components coupled database

InterMutualistic Agency (IMA)

E. Health care consumption data

Universiteit Antwerpen

IMPLEMENTATION

DATA COLLECTION: INDIVIDUAL

GP+nurse

A. (SPICT) PPS
B. After death

Patient+carers

POS + ...

After death

Multidisciplinary Support Team (MST)

F. Health care service data
Components coupled database

**IMPLEMENTATION**

- GP+nurse
  - A. (SPICT) PPS
  - B. After death

- InterMutualistic Agency (IMA)
  - E. Health care consumption data

**DATACOLLECTION: INDIVIDUAL**

- Patient+carers
  - C. POS + ...
  - D. After death

- Multidisciplinary Support Team (MST)
  - F. Health care service data

Universiteit Antwerpen
Type of questions answered

→ Selection bias! Only data of motivated GPs, nurses and patients + family
→ Comparison included patients <> focus patients
→ To be stratified by:
  → domicile, age, sex, ...
  → organ failure, cancer, dementia, ...

- Correlation pain score and pain medication
- Correlation Palliative Performance Scale and health care consumption
- ...

Universiteit Antwerpen
Regional databases

- Stepped wedge design analysis only for these data
- Not coupled to analysis per database

InterMutualistic Agency (IMA)
E. Health care consumption data

Multidisciplinary Support Team (MST)
F. Health care service data

Universiteit Antwerpen
Type of questions answered

- Mean/percentage for the whole region
- To be stratified by domicile, age, sex, ..., 
- Not to be stratified by clinical data

- Number of patients with a palliative forfeit and/or with support of MST per region and per phase
- Mean time between palliative forfeit and death
- Correlation home visits by GP in the last month and hospitalisation?
- ...

Universiteit Antwerpen
Qualitative research

• Regional organisation of palliative care
  - General practitioners
  - Palliative care networks

• Individual care
  - General practitioners
  - Patient and informal carers
THANK YOU FOR YOUR ATTENTION!