

ANNUAL SURVEY SUMMARY

Results of the 2014 National Palliative Care Registry™ Survey, as of July 2015

The National Palliative Care Registry™ (“the Registry”) is the only repository of information about the operational features of our nation’s hospital palliative care services. The goal of the Registry is two-fold: (1) assist hospital palliative care programs in tracking their development year-to-year, and (2) promote standardization of quality palliative care services in the United States.

The Registry (registry.capc.org) provides actionable data programs can use to secure, expand and retain resources for the delivery of high-quality palliative care. It also supports the establishment of new palliative care programs where none exist. Participating programs receive annual reports measuring their operational capacity and reach against comparable programs.

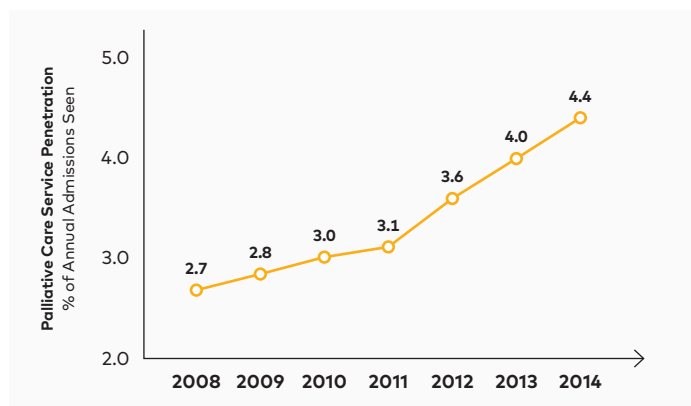
Since its launch in 2008, over 1,000 programs have participated in the Registry and over 800 have received a Comparative Performance Report. In 2014, nearly 400 hospital palliative care programs participated. Here are some of their results.

Palliative Care Service Penetration Continues to Increase

Palliative care service penetration is an estimate of how well programs are reaching patients in need. Service penetration is defined as the percentage of annual hospital admissions seen by the palliative care team.

Since 2008, hospitals with palliative care programs have increased their service penetration by 63%, from 2.7% in 2008 to 4.4% in 2014.

CHART 1 Palliative Care Service Penetration Over Time

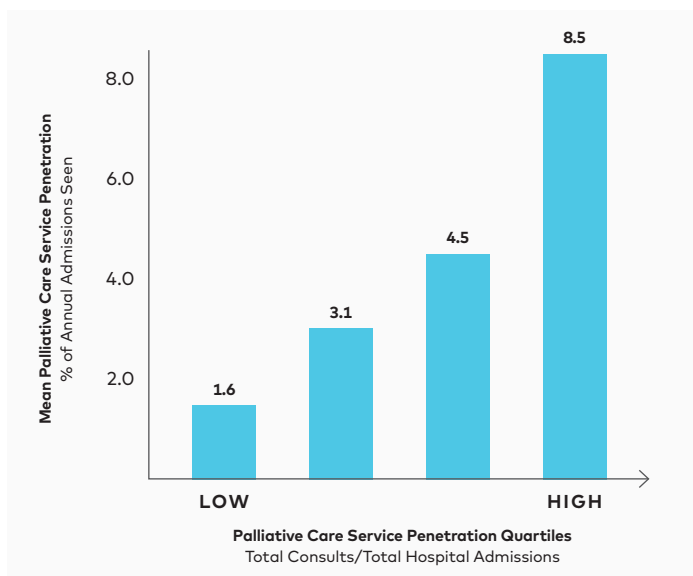


Teams in the Top Quartile Reach 8.5% of all Hospital Admissions

In 2014, the 398 palliative care programs participating in the Registry provided palliative care consultations to 4.4% of hospital admissions in 482 hospitals.

Teams with the highest penetration rates reached an average of 8.5% of annual hospital admissions. Palliative care service penetration among hospitals participating in the Registry ranged from less than 1% to over 16% of total hospital admissions.

CHART 2 Palliative Care Service Penetration Rates

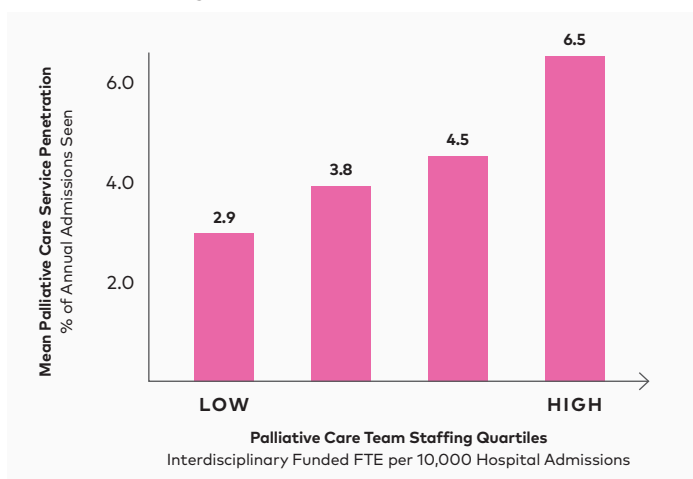


Higher Staffing is Associated with More Patients Served

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 in need.

Teams with the highest staffing levels (2.7+ FTE) reach 6.5% of all hospital admissions, while the smallest teams (<1.2 FTE) reach only 2.9%.

CHART 3 Staffing Levels and Service Penetration Rates

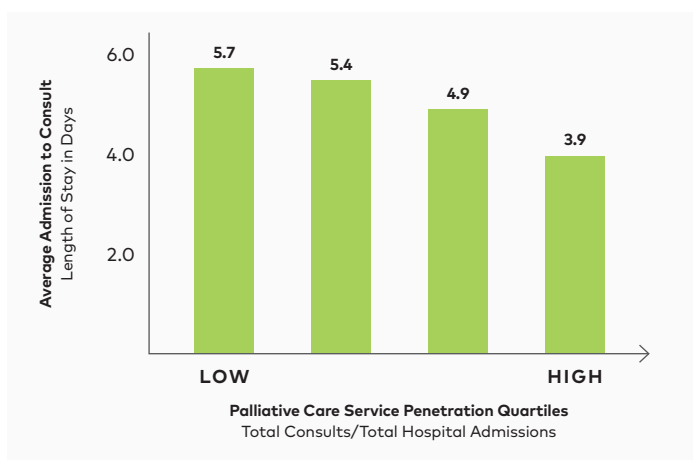


Higher Penetration is Associated with Shorter Time to Palliative Care Consultation

Programs with higher penetration see patients earlier in their stay. Research demonstrates that early palliative care consultation reduces the cost of hospital stays up to 24%.¹

Palliative care teams that see 5.3% or more of total hospital admissions report shorter time to palliative care consultation compared to teams that see fewer than 2.4% of admissions (3.9 v. 5.7 days).

CHART 4 Penetration Rates vs. Time to Consultation



¹ May P, Garrido MM, Cassel JB, Kelley AS, Meier DE, Normand C, Smith TJ, Stefanis L, Morrison RS. Prospective cohort study of hospital palliative care teams for inpatients with advanced cancer: Earlier consultation is associated with larger cost-saving effect. J Clin Oncol. 2015 Jun 8. pii: JCO.2014.60.2334. [Epub ahead of print]