

Supplemental online content for:

The Current State of Palliative Care for Patients Cared for at Leading US Cancer Centers: The 2015 NCCN Palliative Care Survey

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eAppendix 1: NCCN Palliative Care Survey Development Team

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eAppendix 2: NCCN Palliative Care Survey Questions

1. Please provide the following background information:

Name:

Title:

NCCN Member Institution:

E-mail Address:

Phone Number:

2. Please check all that apply regarding data at your cancer center.

Outcome:	Palliative Care has seen baseline data for this outcome	Palliative Care has been approached by the cancer center to try to impact this outcome data
Hospital 30-day readmission rate for cancer-related admissions		
Rate of cancer center patient death in hospital (defined as the proportion of all patients with cancer decedents who die in the hospital)		
Average length of stay for inpatient patients with cancer		
Percentage of patients receiving chemotherapy within last 2 weeks of life		
Percent of discharges to hospice with hospice length of stay less than 3 days		
Percentage of patients with advanced directive documented in the EMR		

Comments:

3. Which specialty palliative care services for adults are available at your cancer center? Please check all that apply.

- Inpatient consultation
- Palliative care unit/Inpatient hospice service
- Clinic-based palliative care (clinics that are stand-alone, co-located in another practice but function independently, or embedded in another practice and serving that practice exclusively)
- Home-based palliative care/Mobile palliative care

4. Please indicate the specific services your palliative care program offers to patients and families. Please check all that apply.

- Symptom management
- Advance care planning
- Survivorship support
- Psycho-oncology
- Child-life services
- Bereavement services
- Please provide a brief description of any services you believe need further explanation:

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

5. Please provide the following information for your INPATIENT CONSULTATION SERVICE:
 - a. Number of unique consults per year
 - b. Average length of stay
 - c. Year service started
 - d. Average number of visits per patient

6. Please provide the following information for your PALLIATIVE CARE UNIT/INPATIENT HOSPICE SERVICE:
 - a. Number of unique consults per year
 - b. Average length of stay
 - c. Year service started
 - d. Average number of visits per patient

7. Please provide the following information for your CLINIC-BASED PALLIATIVE CARE SERVICE:
 - a. Number of unique consults per year
 - b. Year service started
 - c. Average number of visits per patient
 - d. Average appointment wait time for new referrals

8. Please provide the following information for your HOME-BASED/MOBILE PALLIATIVE CARE SERVICE:
 - a. Number of unique consults per year
 - b. Year service started
 - c. Average number of visits per patient
 - d. Average appointment wait time for new referrals

9. Please indicate the top THREE most prevalent patient diagnosis for each service listed below:
 - a. Inpatient consultation
 - b. Palliative care unit/Inpatient hospice
 - c. Clinic-based palliative care
 - d. Home-based/Mobile palliative care

10. What is the total number of FTEs dedicated to palliative care for each of the following services that are available to patients with cancer:
 - a. Inpatient consultation
 - b. Palliative care unit/Inpatient hospice
 - c. Clinic-based palliative care
 - d. Home-based/Mobile palliative care

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

11. Please indicate the number of FTEs in your palliative care program (for services available to patients with cancer) for each clinical discipline listed below.
- Physician
 - Physician assistant
 - Nurse practitioner
 - Registered nurse
 - Social worker
 - Chaplain
 - Pharmacist
 - Psychologist
 - Psychiatrist
 - Child-life specialist
 - Administrative assistant
 - Data analyst
 - Other

12. To whom does the service report within the cancer center structure?
- Division of oncology/hematology
 - Department of medicine
 - Hospital/Medical center
 - Division of supportive care
 - Other

If OTHER, please specify:

13. Please indicate which of the following most accurately describes how the capacity of palliative care services at your cancer center compares to the demand for palliative care services.
- The capacity of palliative care services at my cancer center significantly exceeds the level of demand for palliative care services.
 - The capacity of palliative care services at my cancer center slightly exceeds the level of demand for palliative care services.
 - The capacity of palliative care services at my cancer center is appropriate for the level of demand for palliative care services.
 - The capacity of palliative care services at my cancer center is slightly insufficient for the level of demand for palliative care services.
 - The capacity of palliative care services at my cancer center is significantly insufficient for the level of demand for palliative care services.

14. Please estimate the percentage by which the capacity of palliative care services at your cancer center exceeds or is insufficient for the level of demand for palliative care services.

15. What is the typical visit length for new outpatient appointments?
- 15 minutes
 - 30 minutes
 - 45 minutes
 - 60 minutes
 - 75 minutes
 - 90 minutes
 - Other

If OTHER, please specify:

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

16. What is the typical visit length for follow-up outpatient appointments?

- a. 15 minutes
- b. 30 minutes
- c. 45 minutes
- d. 60 minutes
- e. Other

If OTHER, please specify:

17. Are outpatient visits typically conducted by physicians only, jointly by physicians and advanced practice providers (APPs), or by APPs only?

- a. By physicians only
- b. Jointly by physicians and APPs
- c. By APPs only
- d. Other

If OTHER, please specify:

18. Does the outpatient clinic service consult or co-manage patients? Please check all that apply.

- a. Consult
- b. Co-manage
- c. Other

If OTHER, please specify:

19. Do patients visit the outpatient palliative care provider or are palliative care providers embedded in oncology practices seeing patients where they receive their oncologic care? Please check all that apply.

- a. Patients visit the outpatient palliative care provider
- b. Palliative care providers see patients where they get their oncologic care
- c. Other

If OTHER, please specify:

20. Does your overall palliative care program compare itself to any national guidelines or quality metrics (e.g., NCCN, NQF, QOPI)?

- a. Yes
- b. No

If YES, please specify the organization:

21. Does your overall palliative care program collect any of the following data? Please check all that apply.

- a. Patient and/or family satisfaction
- b. Referrer satisfaction
- c. Program utilization or number referrals
- d. Patient clinical outcomes
- e. Patient utilization outcomes
- f. Other

If OTHER, please specify:

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

22. What percent of your total referrals to palliative care are for solid tumor patients (as opposed to hematology patients)?
- <10%
 - 10%–24%
 - 25%–49%
 - 50%–75%
 - >75%

Comments:

23. Please indicate if automatic referrals (based on objective clinical or demographic data; i.e., “triggered referrals”) are in place for any of the following specialty palliative care services by checking the box:
- Inpatient consultation
 - Palliative care unit
 - Inpatient hospice service
 - Home-based palliative care
 - Mobile palliative care
 - Clinic-based palliative care: stand-alone
 - Clinic-based palliative care: co-located in another practice but function independently
 - Clinic-based palliative care: embedded in another practice and serving that practice exclusively

Comments:

24. In your opinion, what are the top 3 barriers to referral to the palliative care service? Please only check 3 of the below options.
- Oncologists/hematologists are not aware of the palliative care service
 - Oncologists/hematologists are not aware of the benefits of palliative care
 - Oncologists/hematologists are not aware of the scope of palliative care services
 - Late referrals (patient’s disease is too advanced to benefit significantly from referral)
 - Oncologists/hematologists who insist that they don’t need the help of palliative care because their patients don’t need it
 - Oncologists/hematologists who insist that they provide adequate palliative care
 - Inadequate palliative care staffing
 - Space for palliative care services
 - Other

If OTHER, please specify:

25. How many palliative care fellows participate in your palliative care service?
- 0
 - 1
 - 2
 - 3
 - 4
 - >4

Comments:

26. Approximately which year did your palliative care fellowship program begin?

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

27. How many oncology fellows participate in your palliative care consultation service?

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4
- f. >4

Comments:

28. Does the cancer center support the palliative care program to provide primary palliative care training within the cancer center?

- a. Yes
- b. No

If YES, please describe:

29. Please indicate the percent of your palliative care program expenses that are covered by the following:

	<10%	11%–20%	21%–30%	31%–40%	41%–50%	51%–60%	61%–70%	71%–80%	81%–90%	>90%
Billing revenue										
Institutional support										
Outside philanthropy or foundation										
Research funds										
Special global cost systems										
Accountable care organization										
Bundled payments										
Other										

If OTHER, please specify:

30. Does your palliative care program cover the salaries of non-billing providers and staff?

- a. Yes
- b. No

Comments:

31. Does the institution fund the palliative care service/providers to conduct research?

- a. Yes
- b. No

Comments:

eAppendix 2: NCCN Palliative Care Survey Questions (cont.)

32. Do you have program productivity expectations for any of the following specialty palliative care services?
- a. Overall palliative care service (combined productivity from inpatient, clinic, and home-based services)
 - b. Inpatient consultation
 - c. Palliative care unit/Inpatient hospice service
 - d. Clinic-based palliative care (stand-alone, co-located in another practice but function independently, or embedded in another practice and serving that practice exclusively)
 - e. Home-based palliative care/Mobile palliative care

If you responded “yes” to combined service productivity or any of the 4 types of palliative care services noted above, please provide a brief description of the relative value unit (RVU) or other productivity standard expectations for the given type of services.

eAppendix 3: Responding NCCN Member Institutions

Fred & Pamela Buffett Cancer Center
City of Hope Comprehensive Cancer Center
Dana-Farber/Brigham and Women's Cancer Center
Duke Cancer Institute
Huntsman Cancer Institute at the University of Utah
Fred Hutchinson Cancer Research Center/Seattle Cancer Care Alliance
The Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins
Robert H. Lurie Comprehensive Cancer Center of Northwestern University
Massachusetts General Hospital Cancer Center
Mayo Clinic Cancer Center
Memorial Sloan Kettering Cancer Center
Moffitt Cancer Center
The Ohio State University Comprehensive Cancer Center – James Cancer Hospital and Solove Research Institute
Roswell Park Cancer Institute
Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine
Stanford Cancer Institute
UC San Diego Moores Cancer Center
UCSF Helen Diller Family Comprehensive Cancer Center
University of Colorado Cancer Center
University of Michigan Comprehensive Cancer Center
Vanderbilt-Ingram Cancer Center
Yale Cancer Center/Smilow Cancer Hospital