Palliative Care and Hospice Care

*Improving Quality and Length of Life at Every Stage*

**Initiative Goals:**

- *Increase the number of patients and families accessing palliative care throughout the cancer care continuum*
- *Increase the number of patients and families accessing hospice care, and increase the length of hospice care*

**C-Change’s Approach:**

- **Educate** about the differences and overlap of palliative care and hospice care services
- **Change practice** to embrace palliative care and hospice care services at appropriate points
- **Create capacity** (personnel, policies, and resources) to support the appropriate delivery of palliative care and hospice care
- **Create demand** for palliative care and hospice care by informing the public about the nature, importance, and benefits of these services
- **Ensure quality** by defining what good palliative care and hospice care are
### ADVOCACY

- Support the work of organizations who are advocating for the use of palliative care and hospice care at appropriate points, including anti-cancer therapy that is provided concurrently with hospice care.
- Support the work of organizations who are advocating to expand opportunities and reimbursement for conversations around palliative care, hospice care, and advanced care planning.
- In the absence of immediate increases in palliative care and hospice care workforces, educate on alternative models for providing palliative care and hospice care services.

### RESEARCH

Develop and advocate for a national research agenda for palliative care and hospice care to:

- Expand cancer research focus beyond disease directed “curative” treatment to include caring approaches, and across disease silos within organizations that fund cancer research;
- Promote the development of best evidence and best practice;
- Develop and increase the research workforce;
- Improve and expedite knowledge translation and dissemination to better and more quickly integrate what we know into the healthcare system; and
- Increase research funding related to palliative care and hospice care.

### NATIONAL CONVERSATION

Change the way the public thinks about and acts regarding palliative care and hospice care.

- Continue to research the knowledge, values, and beliefs about palliative care and hospice care of underrepresented populations and those with cancer disparities. Expand into caregiver, pediatric, and adolescent and young adult populations.
  - Craft strategies and messages to inform advocacy and communications based on research findings.
- Increase coordination and collaboration with other stakeholders to create greater demand for palliative care and hospice care.
- Provide a mechanism to address reaching consensus on common language and definitions related to palliative care and hospice care.
- Pursue recommendations from IOM report *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis*.

### GUIDANCE

Provide guidance that improves access to and delivery of palliative care and hospice care

- Promote the development of best practices and evidence-based guidelines.
- Promote common existing standards of palliative care and hospice care.
- Provide state, tribe, territory, and Pacific Island Jurisdiction Comprehensive Cancer Control Coalitions and other organizations with tools to assess and improve their palliative care and hospice care services.

### MAPPING NATIONAL & COMMUNITY SUPPORT

- Inventory priorities of organizations and gaps/areas for improvement in palliative care and hospice care. Identify overlap, gaps, and opportunities for collaboration and coordination.
- Increase palliative care and hospice care services in smaller, community settings to ensure that everyone has access to these services.