**Journal Watch**

**Center to Advance Palliative Care Palliative Care Consultation Service Metrics: Consensus Recommendations**


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**Abstract:**

The need to standardize the prospective collection and analysis of data has been a cornerstone of education and technical assistance provided by the Center to Advance Palliative Care (CAPC). Data analysis is vital for strategic planning, quality improvement and demonstration of program impact to hospital administrators, private funders, and policymakers. To develop a set of core measures, CAPC convened a consensus panel in 2008 to focus on the topic of operational metrics for consultation services. Operational metrics, as distinct from clinical, customer and financial metrics, describe the characteristics of patients seen on the consultation service, such as age, disease, location, referring service and disposition. The panel arrived at 12 metric domains, all but one of which can be used for either internal programmatic use or for external comparisons of service characteristics/impact between different hospitals. In an effort to ensure access to reliably high-quality palliative care data throughout the nation, hospital palliative care consultation teams are encouraged to collect and report outcomes for each of the twelve metric domains described here. *Journal of Palliative Medicine* 2008; 10: 1294 – 1298

**Comments:**

**Strengths/uniquness:**

This article summarizes the recommended operational metrics that would contribute to quality and sustainability for rapidly growing palliative care consultation in U.S. hospitals. These are consensus-based recommendations developed by the Center to Advance Palliative Care. The metrics can be used internally to assist programs as they strive for quality, sustainability and growth, and/or externally to compare service utilization across hospitals.
Weaknesses:

N/A

Relevance to Palliative Care:

It is important to ensure high quality of the data when collecting information in operational, clinical, customer, and financial domains to support program development. Data definitions are important (e.g. what constitutes a palliative care consultation?); however, it may be time-consuming to reach consensus. The list of comments in Table 3 is particularly helpful to guide understanding of data definitions.