



## **LifeCourse:**

**A clinical trial of early palliative care,  
delivered in the community by  
trained lay persons**

**Eric W. Anderson, MD**  
Division of Applied Research



## Objectives

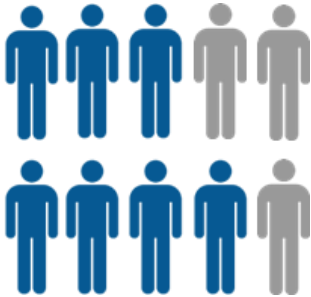
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- Describe two tools for understanding individuals as whole persons.
- Understand the relationship between whole person care and advance care planning.



# Serious Illness Care Today

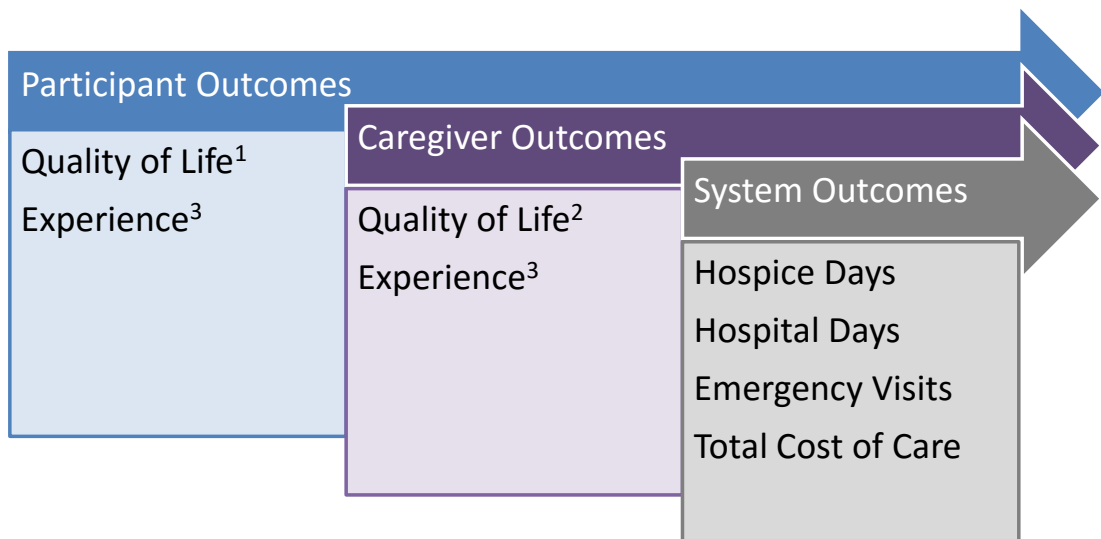
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# Outcomes

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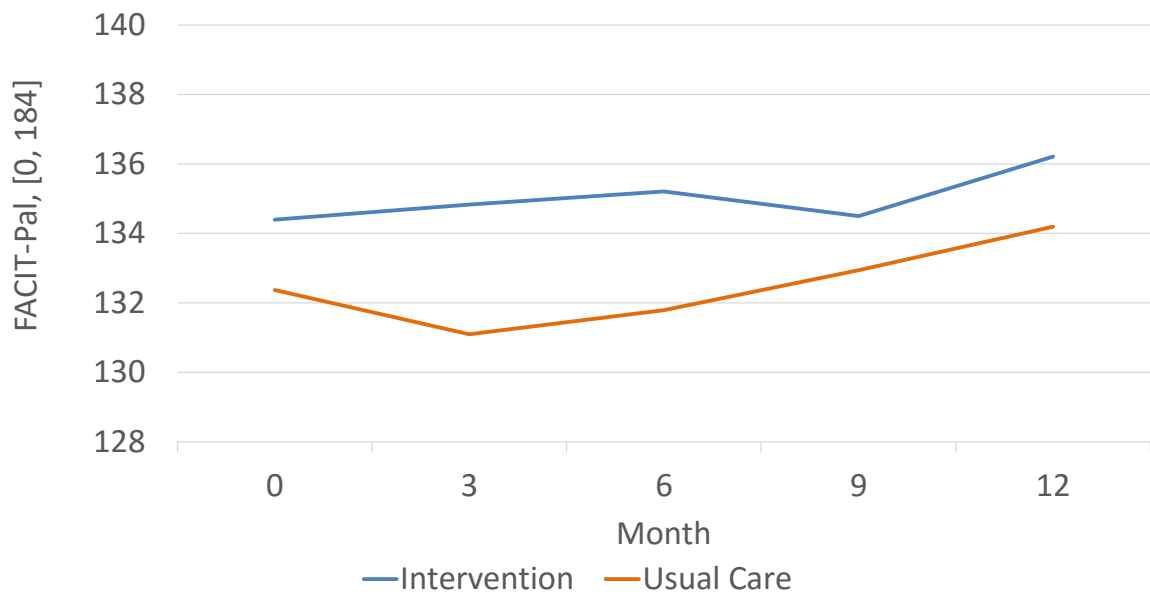


1. FACIT-PAL (Functional Assessment of Chronic Illness Therapy - Palliative Care)
2. PROMIS-29 (Patient Reported Outcome Measurement Information System)
3. LifeCourse Experience tool





## FACIT-Pal Total Trajectory

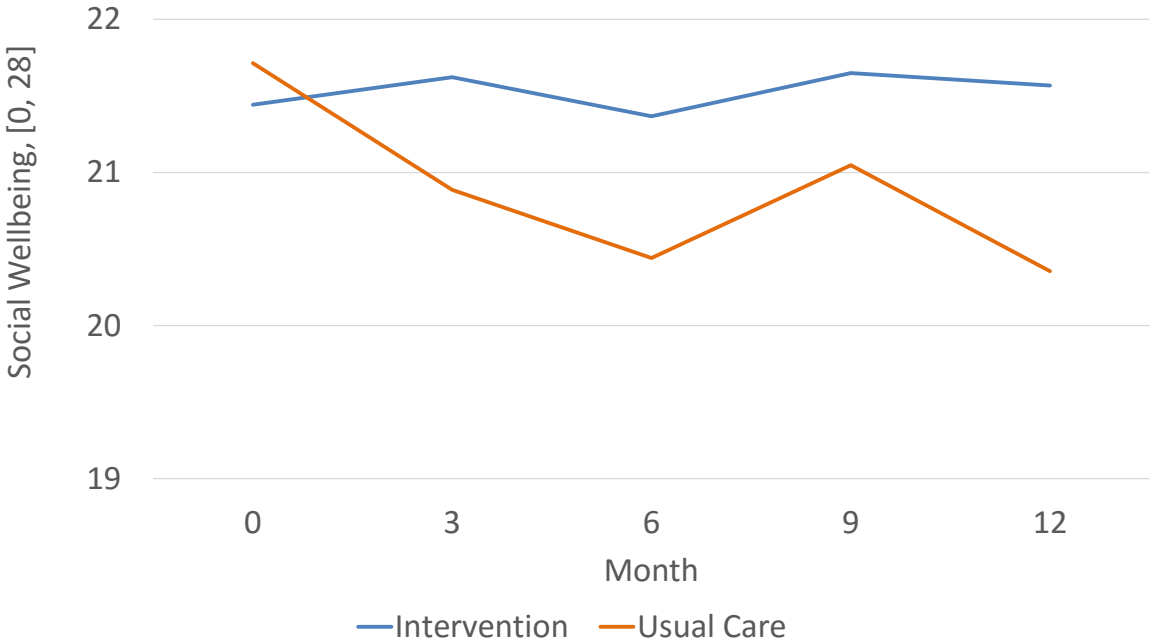


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Note: Adjusted using primary diagnosis standardization.



# Domain Trajectory: Social



Note: Adjusted using primary diagnosis standardization.

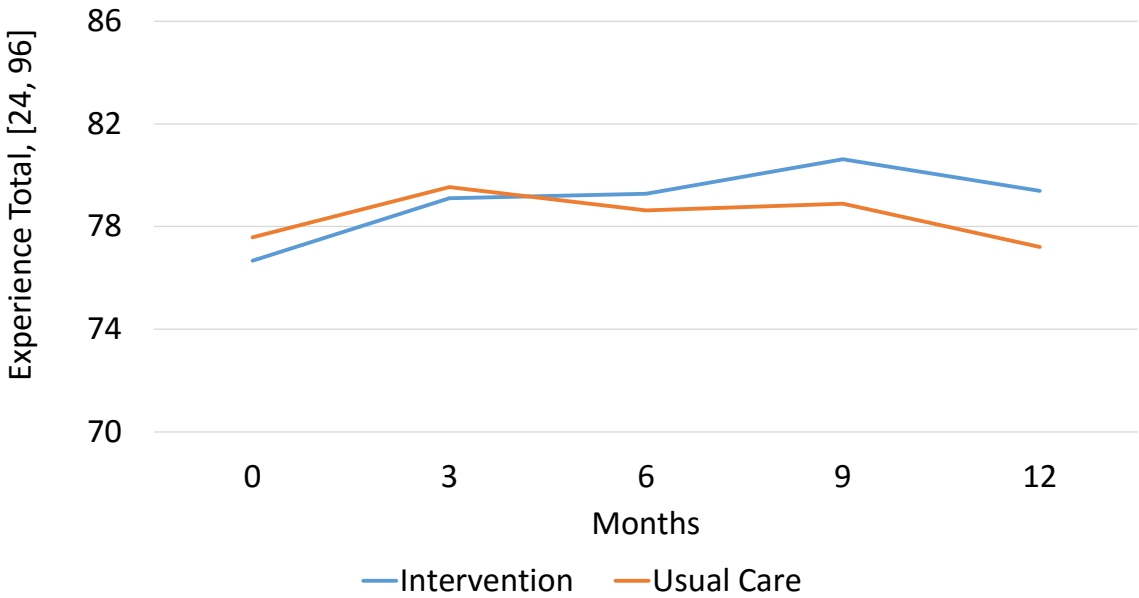








# Experience Total Trajectory



Note: Adjusted using primary diagnosis standardization.

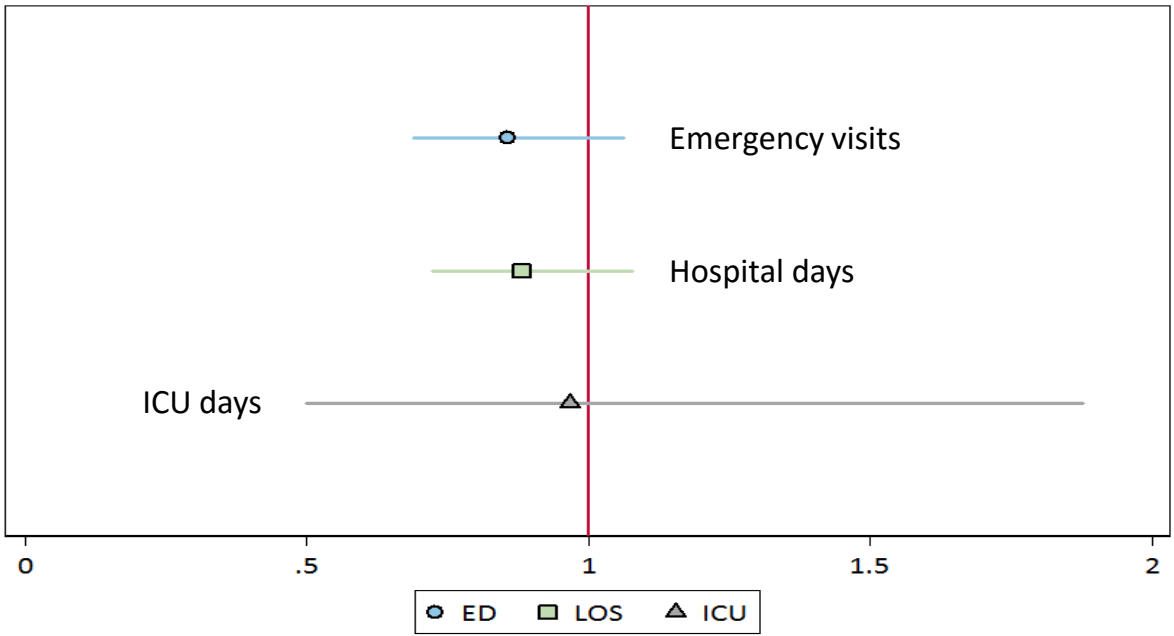


An abstract graphic consisting of several overlapping, curved shapes in shades of green and blue. The shapes are layered, with some appearing in front of others, creating a sense of depth. The colors range from a light, pale green to a medium blue. The overall composition is centered on the page.

# Resource Utilization



# Utilization





## Palliative Care

Visit Type	Intervention (N=429)				Usual Care (N=262)				P-Value
	#	Mean ± SD	Min	Max	#	Mean ± SD	Min	Max	
Inpatient Palliative Care Visits									
<b>MD/NP</b>	93	<b>6.4 ± 10.7</b>	1	81	50	<b>3.9 ± 2.7</b>	1	14	<b>0.037</b>
Social Work	28	2.8 ± 7.0	1	38	8	1.6 ± 0.9	1	3	0.384
Spiritual	18	2.6 ± 2.0	1	9	20	2.0 ± 3.0	1	14	0.501
Community-Based Palliative Care Visits									
<b>Total</b>	8	<b>7.4 ± 3.5</b>	3	13	11	<b>4.3 ± 3.2</b>	1	10	<b>0.063</b>



## Hospice Utilization Prior to Death

	U.S. (N=2.6M)	Allina (N=46,198)	Intervention (N=129)	Usual Care (N=52)	P-Value
Enrollment, %	42.8	17.4	53.5	40.4	0.111
LOS, median days	18.7	17.0	<b>27.0</b>	<b>14.0</b>	<b>0.094</b>

All data are percent unless otherwise indicated. NHPCO estimates are for the 2013 calendar year. Allina EHR estimates are for patients with any hospice admission and a date of death in 2013 or later.



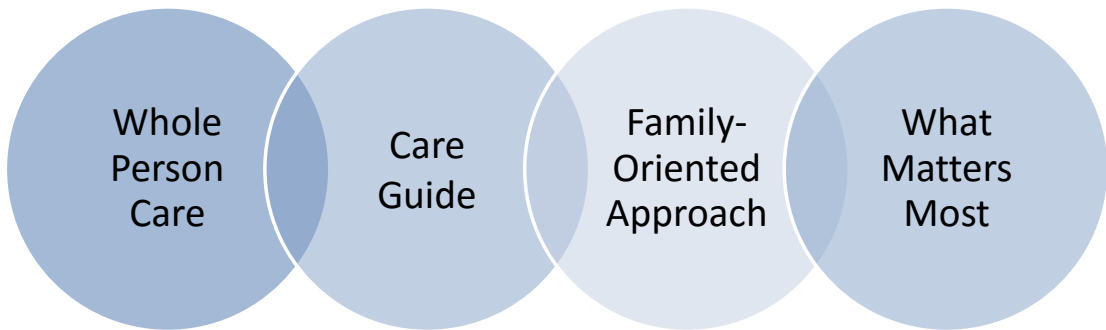
## Research Outcomes

Measure	Early Results	
	Participant	Caregiver
<b>PATIENT &amp; FAMILY OUTCOMES</b>		
Quality of Life	+	+/-
Experience	+	+
<b>SYSTEM OUTCOMES</b>		
Palliative Care Utilization		↑
ED Visits		↓
Inpatient Days		↓
Advance Directives		↑
Hospice Enrollment		↑



## Key Components

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## Expanded Palliative Care Domains

NCP Palliative Care domain name	LifeCourse domain name
Structure and processes of care	Not included as a domain
Physical aspects of care	Physical domain
Psychological and psychiatric aspects of care	Psychological domain
Social aspects of care	Social domain
	Family/Caregiver domain
Cultural aspects of care	Cultural domain
Spiritual, religious, and existential aspects of care	Spiritual domain
	Legacy/bereavement domain
Care at the end of life	End of life domain
Ethical and legal aspects of care	Ethical domain
	Financial/legal domain





## Care Guide Training

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- Palliative care: domains, goals, and what matters most
- Relational training to build communication techniques, develop healing presence, and ensure an understanding of professional boundaries
- LifeCourse semi-structured visit framework and field guides
- Skills validation



## Semi-Structured Visit Framework

	Visit #1	Visit #2	Visit #3	Visit #4	Visit #5	Visit #6	On-going
Set Intention							
What Matters Most/Goals							
Question Sets	Physical	Social	Cultural	Financial & Legal	Revisit Question Sets	Revisit Question Sets	Revisit Question Sets
	Psychological	Cultural		Spiritual			
	Family			Legacy			
Assessment Tools	Physical	Physical	Spiritual	Revisit Physical	Revisit Physical	Care at End of Life	Revisit Assessment Tools
				Ethical			
Further Exploration and Validation							
Follow-up Plan and Next Steps							

**Supplemental Visit: Advance Care Planning**



**Goals:**  
**Medical, Non medical, Multiple, WMM**

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*"I want to breathe without oxygen"*

*"I want to improve my memory"*

*"I'd like to do some volunteer work"*

*"I want to go shopping."*

*"I want to talk to my pastor about what this dementia is like"*

*"I want to create a will"*

**"I JUST WANT HER  
TO BE HAPPY."**



## Ethical Domain



Topic 1: Recognize and validate goals and preferences based upon current state of health

Topic 2: Recognize when decision-making capacity is impaired or possibly impaired



Advance Care Planning

Mini-Cog™



Patient goals conflict with medical plan of care

Scoring of Mini-Cog™



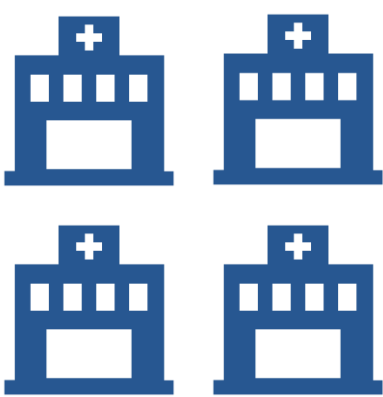
Connect with patient's provider team



# LifeCourse Spread – 2016



**Primary Care Clinics**



**Specialty Clinics**

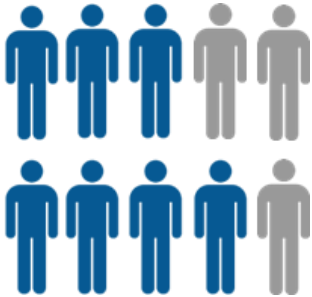


**Community**



# Serious Illness Care... from Today Forward

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# Thank You!

Questions?

Eric Anderson

[Eric.worden.Anderson@allina.com](mailto:Eric.worden.Anderson@allina.com)

[www.lifecoursemn.org](http://www.lifecoursemn.org)