

# Increasing Access to Hospice Through the Creation of an Emergency Department to Hospice Workflow

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# Background & Aim

Patients with serious illness who present to the emergency department may be admitted and ultimately die, despite having preferences to minimize pain and avoid efforts such as cardiopulmonary resuscitation.

We worked to first identify patients that may benefit from hospice care.

Second, we collaborated with multiple disciplines to create a workflow to allow patients to receive hospice care in the most appropriate setting.

# Stakeholders



# Interventions

- 4/2020 - Creation and dissemination of a Hospice Dashboard
- 9/2020 - Integration of a Hospice Patient FYI flag in to Epic EMR

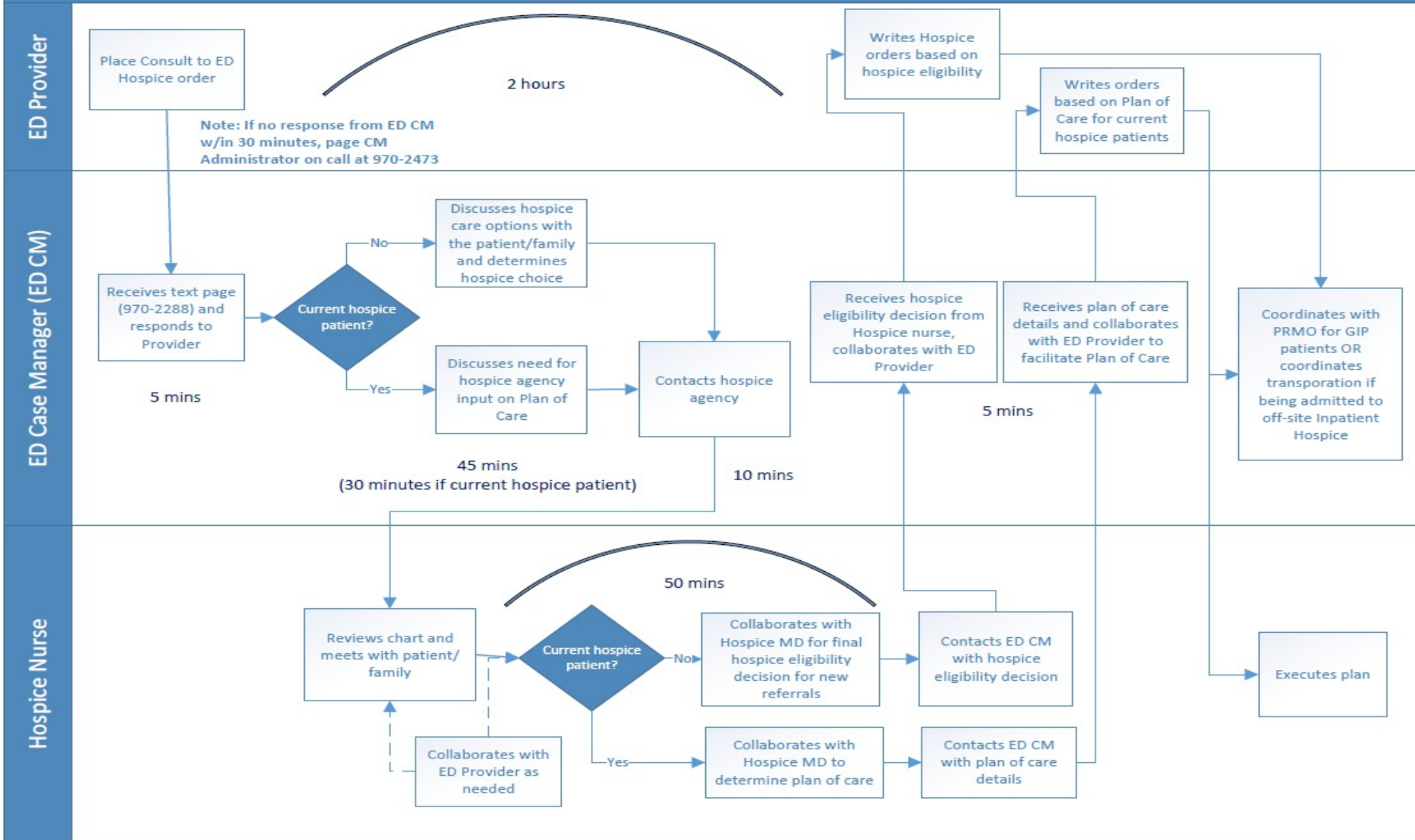


# Interventions

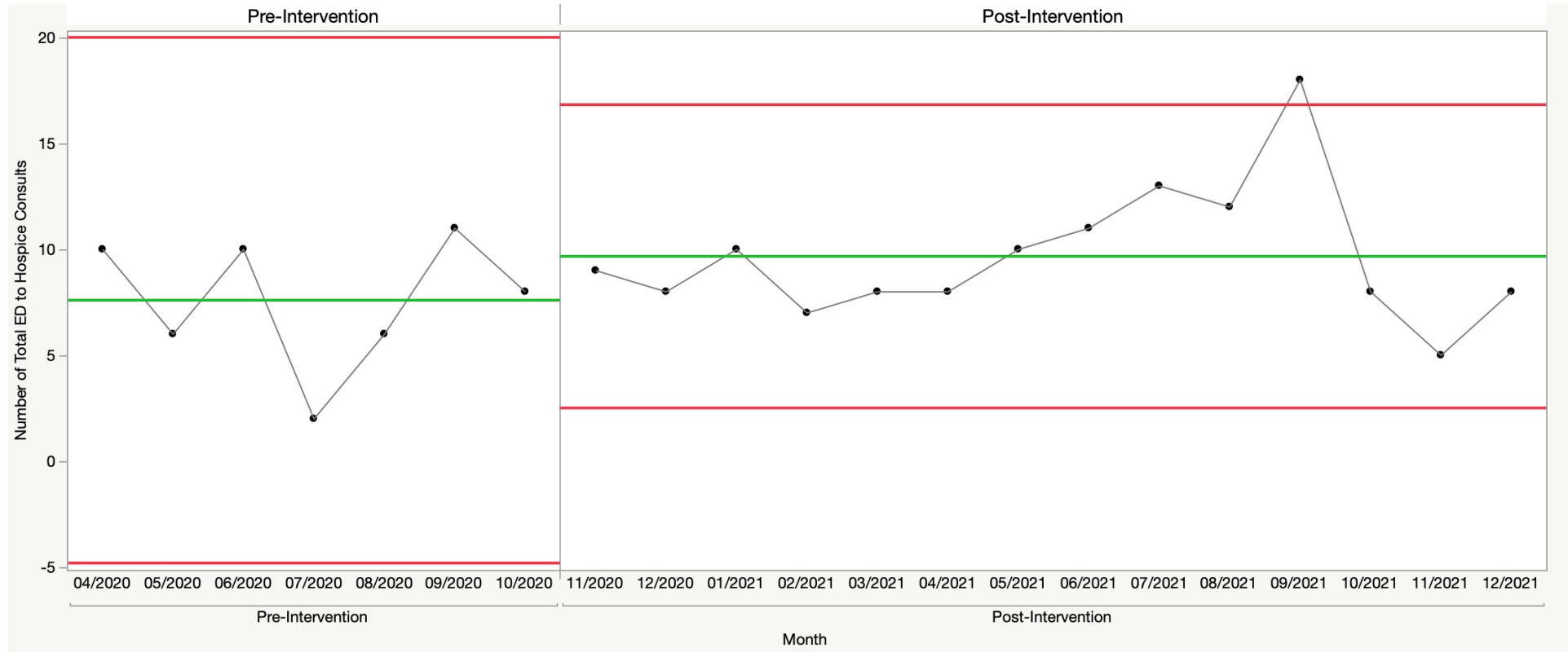
- 10/2020 - Standardized workflow via a Consult to ED Hospice order
- 10/2020 - Education via an ED Hospice Resource Guide
- 12/2020 - Development of visual management tool for ED Case Managers to facilitate identification of hospice eligible patients

# Workflow

## Consult to ED Hospice Order workflow



# Results



# Results

- From April 2020 to December 2021 there were a total of 188 ED to Hospice Consults.
- 119 patients (63%) died within 30 days of their emergency room visit without a hospital admission.
- 48 patients (26%) avoided 30-day readmission defined as avoided an inpatient admission and had a previous hospitalization in the last 30 days.
- With an estimated length of stay of 5.15 days for this population there have been 654 total patient days avoided for the hospital.



# Reflection & Next Steps

- Building a multidisciplinary group allowed for engagement on the issue from multiple vantage points
- Ongoing meetings to review success and issues within the process allow for real time feedback and changes
- We will continue to increase access to hospice care with plans to improve a process surrounding terminal extubation