Quality Indicators for Evaluating Palliative Care Day Services: Systematic Review

Seán R O’Connor PhD HCPC Reg 1, Noleen McCorry PhD 2, Martin Dempster PhD 1
1 Queen’s University Belfast, United Kingdom, 2 Marie Curie Cancer Care, Belfast, United Kingdom

Why we carried out the review?
• With an ageing population there is a growing demand for Palliative Day Services
• It is important to measure quality of day services, but there is little agreement on which aspects of care should be used to do this

Aims of the review?
• To identify existing quality indicators relevant to Palliative Day Services
• To examine how well indicators were developed and the strength of evidence supporting their use

How we carried out the review?
• Systematic review conducted following PRISMA guidelines [1]
• Five databases (Ovid MEDLINE, Ovid EMBASE, CINAHL, PsycINFO, Cochrane Central Register of Controlled Trials) searched from January 2000 to August 2015
• Systematic searches (including grey literature) to identify quality indicators used to assess care for adults with life-limiting illness within day hospice, community or primary care settings
• Information extracted on population & setting, indicator type and description [2] method of development and evidence of testing or implementation
• Development evaluated using Appraisal of Indicators through Research and Evaluation (AIRE) Instrument [3]
• Overall quality of evidence assessed using Grading of Recommendations, Assessment, Development, and Evaluation (GRADE) system [4]

What we found?
562 indicators extracted from 89 evidence sources
• After removing duplicates and grouping similar indicators 185 remained
• Quality varied considerably but was typically low to moderate
• The vast majority were process or structural indicators with few outcome indicators identified

Table 1. Summary of Quality Scores for Main Care Domains
<table>
<thead>
<tr>
<th>Indicator</th>
<th>AIRE score (%)</th>
<th>GRADE rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical, psychosocial &amp; spiritual care</td>
<td>72</td>
<td>+++</td>
</tr>
<tr>
<td>Care planning, goal setting, decision making</td>
<td>40</td>
<td>+</td>
</tr>
<tr>
<td>Co-ordination &amp; continuity of care</td>
<td>60</td>
<td>++</td>
</tr>
<tr>
<td>Effectiveness &amp; outcome assessment</td>
<td>79</td>
<td>+++</td>
</tr>
<tr>
<td>Staff &amp; service development</td>
<td>65</td>
<td>+</td>
</tr>
<tr>
<td>Societal, ethical &amp; legal aspects of care</td>
<td>67</td>
<td>+</td>
</tr>
</tbody>
</table>

What this means in practice?
A large number of potential quality indicators are available to evaluate day services

BUT ... Most are focused on diagnosis and assessment of physical symptoms

AND ... Few studies have directly explored outcomes after implementation

AS A RESULT ... Further work is needed to develop appropriate & reliable indicators that can be used across different settings & models of day care

References
3. Appraisal of Indicators through Research and Evaluation (AIRE).

Contact: s.oconnor@qub.ac.uk
Project website: http://www.qub.ac.uk/sites/QualPalUK/ Twitter: @QualPalUK

Funding acknowledgment: This review forms part of the UK Consensus project on Quality in Palliative Care Day Services which is funded by Marie Curie Cancer Care [R270]