3 current challenges in palliative care
“Happy” for palliative care development, but 3 holes in palliative care, 3 challenges to improve access

1. Feasible tool to identify people with palliative care needs and estimate prognosis
2. Implementing community palliative care for people with special vulnerability
3. Implementing palliative and psychosocial care in nursing homes

Atención integral a personas con enfermedades avanzadas
New perspectives, new challenges 1: Developing a pragmatic approach for identifying people and estimating prognosis
PRACTICAL RECOMMENDATIONS
FOR IDENTIFYING
AND ESTABLISHING PROGNOSTIC
APPROACH OF PEOPLE WITH
ADVANCED CHRONIC CONDITIONS
AND PALLIATIVE CARE NEEDS
IN HEALTH AND SOCIAL SERVICES
NECPAL 4.0 PROGNOSTIC (2021)

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Atención integral a personas con enfermedades avanzadas
NECPAL TOOL VERSION 4.0 2021

1. **SURPRISE QUESTION**
   - Would you be surprised if this patient die in one year?

   - **YES**
     - NECPAL NEGATIVE
   - **NO**
     - + IF THERE IS AT LEAST 1 PARAMETER

2. **PALLIATIVE NEEDS IDENTIFIED**
   - Professionals think that he/she has palliative care needs

3. **FUNCTIONAL DECLINE**
   - Clinical assessment of functional decline sustained, severe and irreversible

4. **NUTRITIONAL DECLINE**
   - Clinical assessment of nutritional decline sustained, severe, and irreversible

5. **MULTIMORBIDITY**
   - More than 2 chronic diseases added to the principal condition

6. **USE OF RESOURCES**
   - ≥2 emergency admission or increase of demand of interventions and 6 months

7. **SPECIFIC DISEASE CRITERIA**
   - Severity or progression of chronic conditions as Heart, Renal, Lung, Neurologic, or Hepatic

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**Atención integral a personas con enfermedades avanzadas**
> "Situational" Checklist: identification of the prognostic risk to elaborate the prognostic approach:

- Situational prognostic checklist
- Risk estimation
- Criteria for prognostic approach

Listing the parameters with prognostic utility (palliative needs identified by professionals, functional decline, nutritional decline, multimorbidity, increased use of resources, and parameters of the specific disease.

The result of this procedure includes the patient MACA in one of these three prognostic stages:

The evolutive stage: can be determined according to the number of parameters affected. If 1-2 or 3-4 or 5-6
THE NECPAL 4.0 APP: identifying prognosis with 6 simple parameters in your phone
New perspectives, new challenges: Palliative care for people with special social vulnerability at the community
Catalonia: Specialist Palliative Care Services

- UCP+MEP 40+48
- UFISS-CP+MIX 1+3
- EAIA-CP+POL 2+4
- PADES 7

- UCP+MEP 26+164
- UFISS-CP+MIX 2+1
- EAIA-CP+POL 1+4
- PADES 12

- UCP+MEP 25+390
- UFISS-CP+MIX 17+2
- EAIA-CP+POL 9+22
- PADES 53
“Gaps” black holes of palliative care access in Catalonia

Total prevalence: 112,000 people

Identified in Primary care services
NECPAL/MACA: 32,454 (29%)

Identified and attended by specialist pall care services:
42,979 (38%)

Not identified nor attended: 35,577 (32%)

Fuente, Dep Salut, 2021
“Gaps”

En Cataluña, para una prevalencia total de 112.000:

Identificados y atendidos al primaria NECPAL/MACA:
32.454 (29%)

Identificados y atendidos SCPs:
42.979 (38%)

(55-60% cáncer)

No identificados (atendidos?): 35.577 (32%)

En Cataluña, para una prevalencia total de 112.000:

Composición 112.000:
65% (73.000): 85 a, Multimorbilidad, fragilidad, demencia

35% (39.000): 75 a, insuficiencias orgánicas, cáncer

Con necesidades sociales asociadas: 28.000 (25%)

En domicilio o residencia
Mujer > 85, soledad, pobreza, demencia
22.000

Sin acceso a SCPs???

Identificados y atendidos SCPs + EAP:
42.979 + 32.454 = 75.433 (38+ 29% = 67%)

Gap: Women > 85 with advanced chronic frailty + dementia, severe distress, bereavement, unwanted loneliness, poverty, Access difficulties, at home or in Nursing Homes without Access to palliative care services

Proposal: Hospice for this population in central BCN
New perspectives, new challenges:
Palliative, psychosocial & spiritual care in nursing homes
Program for the comprehensive psychosocial and spiritual care of patients with advanced conditions and their families

La Caixa Foundation & WHOCC Barcelona
Compassionate communities: design and preliminary results of the experience of Vic (Barcelona, Spain) caring city

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The Program in Spain

- 44 Teams
- > 200,000 Patients
- > 300,000 relatives
- > 240 professionals
- > 1,500 volunteers

44 Teams de Atención Psicosocial (EAPS)
128 Centros sanitarios
133 Equipos domiciliarios

*Fecha diciembre 2018

+ The Program in Hongkong: Nursing homes

+ The Program in Portugal: 10 Teams
Palliative, psychosocial and spiritual care in nursing homes

• Statement: Nursing homes in Spain: a black hole of palliative care, and specially for psychosocial care

• Actions:

1. Training for 800 NHs catalonia (400 so far)
2. Implementing psychosocial support form La Caixa program: 140 NHs attended
3. Necpal 4.0 available
4. Research: Impact COVID and áreas for improvement
5. Recommendations for ethical decisión-making: with 26 organisations

Atención integral a personas con enfermedades avanzadas
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