TOP TEN MEASURES THAT MATTER

MEASURE 1: Hospice and Palliative Care—Comprehensive Assessment
Percentage of patients for whom a comprehensive assessment was completed
Source: PEACE Set1,2 | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 2: Screening for Physical Symptoms
Percentage of seriously ill patients receiving specialty palliative care in an acute hospital setting >1 day or patients enrolled in hospice >7 days who had a screening for physical symptoms (pain, dyspnea, nausea, and constipation)
Source: PEACE Set1,2 | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 3: Pain Treatment (ANY)
Seriously ill patients receiving specialty palliative care in an acute hospital setting >1 day or patients enrolled in hospice >7 days who screened positive for moderate to severe pain on admission, and the percent receiving medication or nonmedication treatment, within 24 hours of screening
Source: PEACE Set1,2 | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 4: Dyspnea Screening and Management
Percentage of patients with advanced chronic or serious life-threatening illnesses that are screened for dyspnea; for those who are diagnosed with moderate or severe dyspnea, a documented plan of care to manage dyspnea exists
Source: National Committee for Quality Assurance/American Medical Association–Physician Consortium for Performance Improvement 3

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MEASURE 5: **Discussion of Emotional or Psychological Needs**
Percentage of seriously ill patients receiving specialty palliative care in an acute hospital setting >1 day or patients enrolled in hospice >7 days with chart documentation of a discussion regarding emotional or psychological needs.

Source: PEACE Set1,2 | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 6: **Discussion of Spiritual/Religious Concerns**
Percentage of hospice patients with documentation in the clinical record of a discussion of spiritual and religious concerns or documentation that the patient or caregiver did not want to discuss these issues.

Source: National Quality Forum #1647/Deyta, LLC/Hospice Item Set (HIS) | http://www.qualityforum.org/Projects/Palliative_Care_and_End-of-Life_Care.aspx#t=2&es=&p=3%7C

MEASURE 7: **Documentation of Surrogate**
Percentage of seriously ill patients receiving specialty palliative care in an acute hospital setting >1 day or patients enrolled in hospice >7 days with the name and contact information for the patient's surrogate decision maker in the chart or documentation that there is no surrogate.

Source: PEACE Set1,2 | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 8: **Treatment Preferences**
Percentage of seriously ill patients receiving specialty palliative care in an acute hospital setting >1 day or patients enrolled in hospice >7 days with chart documentation of preferences for life-sustaining treatments.

Source: National Quality Forum #1641/PEACE Set1,2/HIS | http://www.med.unc.edu/pcare/resources/PEACE-Quality-Measures

MEASURE 9: **Care Consistency with Documented Care Preferences**
If a vulnerable elder has documented treatment preferences to withhold or withdraw life-sustaining treatment (eg, a do-not-resuscitate order, no tube feeding, no hospital transfer), then these treatment preferences should be followed.


MEASURE 10: **Global Measure**
Although no specific global measure was endorsed by the MWM process, the committee, panels, membership, and stakeholders agreed that patient and/or family assessments of the quality of care is a key part of measuring quality for any setting caring for palliative or hospice patients.

**References**