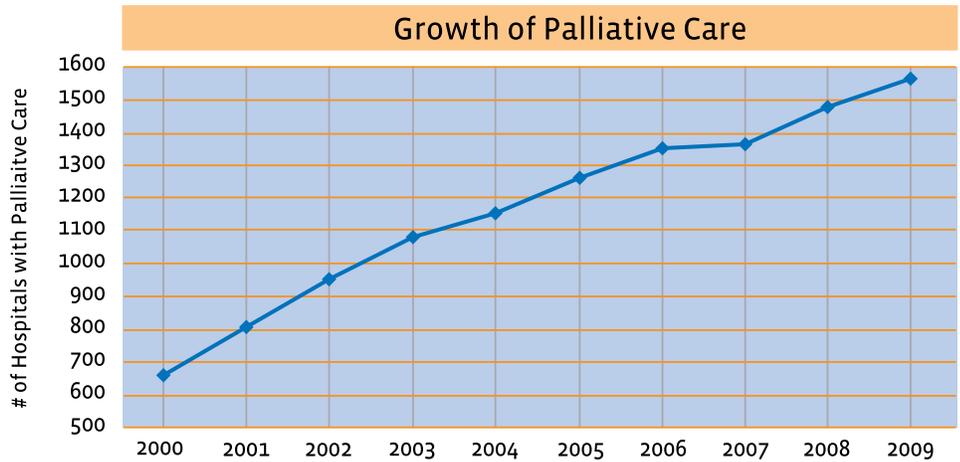


Growth of Palliative Care in U.S. Hospitals 2011 Snapshot

Over the last ten years palliative care has been one of the fastest growing trends in health care. In fact, the number of palliative care teams within hospital settings has increased approximately 138%, from more than 600 in 2000 to more than 1500 today.



Source: Center to Advance Palliative Care, March 2011

Growth of palliative care has occurred primarily in response to the increasing number of Americans living with serious and chronic illnesses and to the caregiving realities faced by their families.

PREVALENCE (2000–2009)

The prevalence of palliative care teams in U.S. hospitals shows steady growth and indicates a rapidly rising trend. According to the most recent data analysis, 1,568, or 63%, of U.S. hospitals with more than 50 beds have a palliative care team—an increase of 138.3% since 2000.

Prevalence (2000-2009)

Data Year	Teams (#)	Hospitals (#)	Prevalence (%)
2000	658	2,686	24.5%
2001	805	2,648	30.4%
2002	946	2,658	35.6%
2003	1,082	2,683	40.3%
2004	1,150	2,569	44.8%
2005	1,265	2,509	50.4%
2006	1,357	2,452	55.3%
2007	1,373	2,505	54.8%
2008	1,486	2,517	58.5%
2009	1,568	2,489	63.0%

Change in palliative care programs 2000 to 2009

138.3%

REGION (2009)

The prevalence of hospital palliative care programs is lowest in the southern region of the U.S., with only 51% of hospitals reporting a palliative care team.

Region (2009)

Region	Teams (#)	Hospitals (#)	Bed Size (%)
Northeast	308	424	73%
Midwest	451	625	72%
West	313	459	68%
South	496	981	51%

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2011 Snapshot

SIZE (2009)

Larger hospitals are more likely to have a palliative care program. More than 80% of hospitals with more than 300 beds have a palliative care team, while less than one-quarter of hospitals with fewer than 50 beds report a team.

Size (2009)			
Bed Size ¹ (#)	Teams (#)	Hospitals (#)	Bed Size (%)
300+	597	699	85%
50 to 299	971	1,790	54%
Under 50	326	1,500	22%

Sources: FY2002-2009 AHA Annual Survey Databases. Chicago, IL: Health Forum, an American Hospital Association affiliate, 2010. National Palliative Care Registry™: Center to Advance Palliative Care (CAPC), as of March 17, 2011.

Methodology: This analysis was conducted in March 2011. The primary source of hospital data was the AHA Annual Survey Database™ for FY 2000 through 2009. For FY 2008 and FY 2009, supplemental data were obtained from the National Palliative Care Registry™. The Registry provides data on the operational features and processes of care for hospital palliative care teams starting with calendar year 2008. Hospitals creating a profile in the Registry are included in the FY 2009 figures (both numerator and denominator) regardless of their response to the AHA Annual Survey.²

Hospitals were **EXCLUDED** from this analysis if:

- No admissions were identified as general medical/surgical, obstetrics/gynecology, cancer or cardiac
- They are controlled by the federal government (e.g., U.S. Department of Veterans Affairs)
- They are located outside the 50 states and the District of Columbia
- They contain less than 50 total beds³
- They did not respond to the AHA Annual Survey⁴

In the AHA Annual Survey, hospitals self-report their palliative care programs within four categories: hospital, health system, network or joint venture. We do not confirm AHA data. We include all four categories in the analysis.

1. The “300+” category refers to hospitals that have 300 or more facility beds. The “Under 50” category refers to hospitals with less than 50 facility beds.
2. The National Palliative Care Registry™ data were not used to supplement data for FY 2000 through 2007. Note: In FY 2008, the AHA data were supplemented with all programs that had published data in the National Palliative Care Registry™.
3. The total number of beds is derived by excluding the count of nursing-home unit beds from the total count of facility beds.
4. This exclusion criterion corresponds only to FY 2000–2007. Effective FY 2008 and 2009 hospitals not responding to the AHA Annual Survey but reporting a palliative care program in the National Palliative Care Registry™ are included in both the numerator and denominator.

The Center to Advance Palliative Care (CAPC) (www.capc.org, www.getpalliativecare.org) and the National Palliative Care Research Center (NPCRC) (www.npcrc.org) are affiliated with Mount Sinai School of Medicine and are dedicated to increasing quality palliative care services for people facing serious illness.

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