Q. How Can Palliative Care Help Reduce Preventable Readmissions?

Palliative care is supportive care for people who are living with serious illnesses and treats the associated pain and symptoms. It is also support for families and caregivers. This holistic care focuses on the physical, social, psychological and spiritual aspects of living with a serious illness.

Palliative care specialists are experts in the management of pain and complex symptoms and in the communication and coordination of care. They help to better understand the goals of medical treatment, reduce conflict in making medical decisions and assist in easing the stresses of living with a serious illness. Palliative care is interdisciplinary, meaning that it includes a team of clinicians (physicians, nurses, social workers, spiritual care providers and others) who are focused on providing the care that is most important to the patient, family and caregivers.

People living with serious illness often experience changes that impact their daily functioning and quality of life, and place strain on their caregivers. Palliative care teams treat symptoms, help patients adapt, and provide optimal support and resources to caregivers; this can be provided throughout the trajectory of an illness – not just at end of life – and across care settings.

A large, national study examining community dwelling older adults found that “approximately half of older adults reported two or more of the six symptoms analyzed, and more than a quarter reported three or more symptoms. The impact of symptoms was substantial…older adults with multiple symptoms were more functionally limited, had greater risk for several major adverse outcomes over time including slow gait speed, falls, hospitalizations, disability and mortality.”

A palliative care team will develop a plan to treat pain, shortness of breath, nausea, constipation, anxiety, etc. Patients and families can also expect to receive support in understanding their illness, their treatment options and what to expect in the future. This care helps patients and families cope, develop plans and seek resources that provide the safety and tools to remain at home, even as the illness changes.

Sometimes staying out of the hospital requires assisting people with arranging meals or medications to be delivered to their homes, and often times it is about helping the caregiver to feel confident in the care they are providing to their loved one – which can be day and/or night. The palliative care team will spend as much time as needed to understand the patient and family’s wishes and to discuss options for care and support that will ensure those wishes are understood and respected by their medical providers.

Studies have shown that including palliative care specialists both in the acute care setting and in the home may reduce 30-day rehospitalization rates. This may be especially true when patients’ stated goals are clearly to remain at home – both in the setting of acute illness and for end-of-life care. This reduction in 30-day rehospitalization rates may improve patient-centered outcomes in addition to cost savings.

Palliative care can help patients stay out of the hospital when it is not necessary to be there. Patients can continue to receive treatment at the same time they are receiving palliative care support so they are losing nothing in terms of options. Further, patients and families who receive palliative care are gaining an additional layer of support to ensure they are receiving the best possible care and outcomes.


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