Making change in end-of-life care: a new hybrid vehicle

Princeton Conference 2009 Linda Emanuel MD PhD

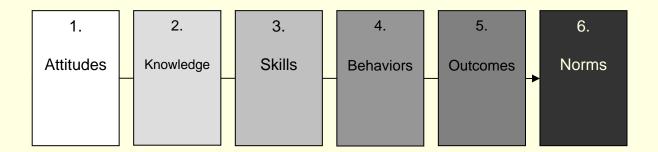
Our Prius



Making change step by step ...

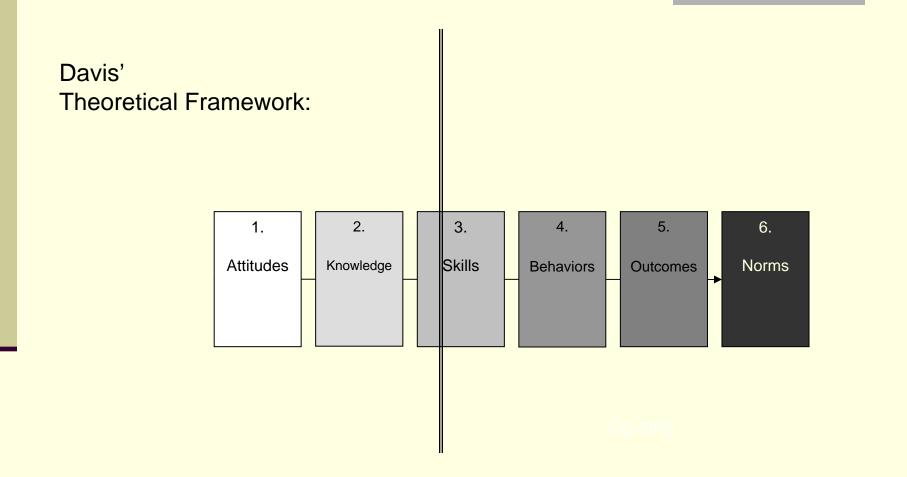
Davis'

Theoretical Framework:



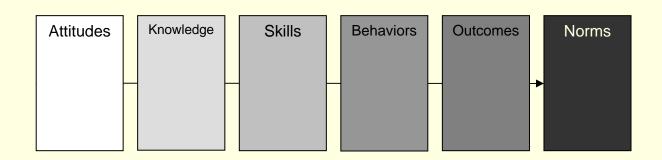
CG-TIPS

Making change step by step ...

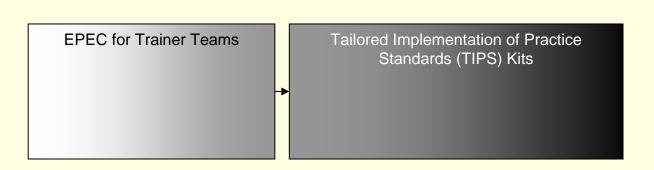


... Making change step by step

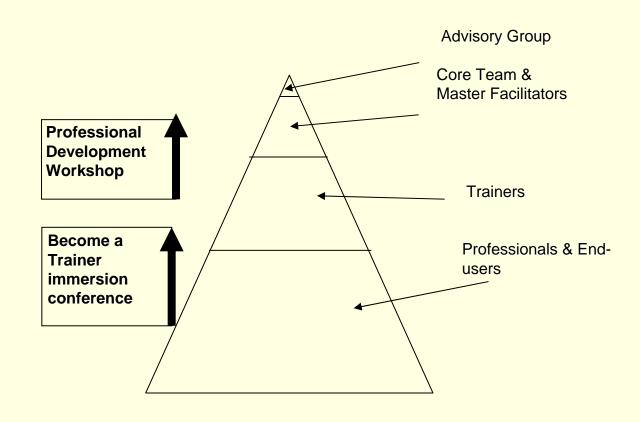
Davis'
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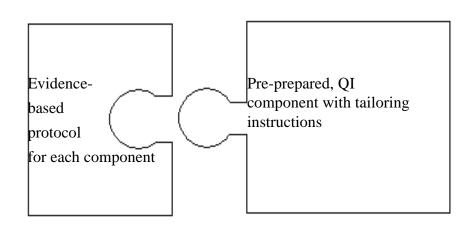
Our intervention components



Education in Palliative and End-of-life Care (EPEC) Project Organization



Model Design of the Tailored Implementation of Practice Standards (TIPS) Kit



- Protocol provides standards
- QI approach provides flexibility, power and speed
- Valid, uniform measures and preprepared components provide generalizability
- EPEC network provides for RCT
- Template human subjects plan ensures good QI research conduct

How powerful is our hybrid?

EPEC dissemination

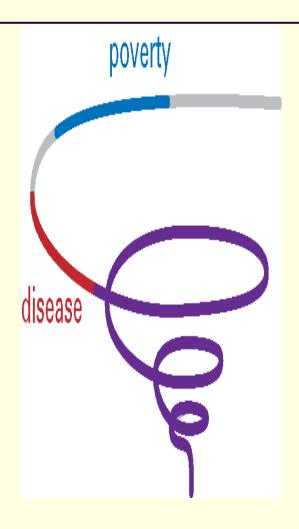
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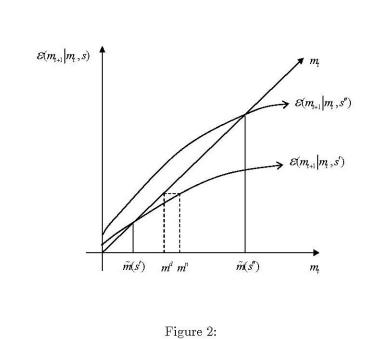
- Hybrid methodology (TIPS) for practice change
- = Realistic hopefor powerful, reliable, prudent, sustained improvement

Palliative care: beyond the medical model to include economic resilience

- Economic Resilience
 - Cancer 2008;113(12 suppl):3548-55.
- Financial pressures
 - SUPPORT JAMA 1995
- Difficult recovery
 - 1/3 households not at baseline by 4-6 years
 - Health & Retirement Study

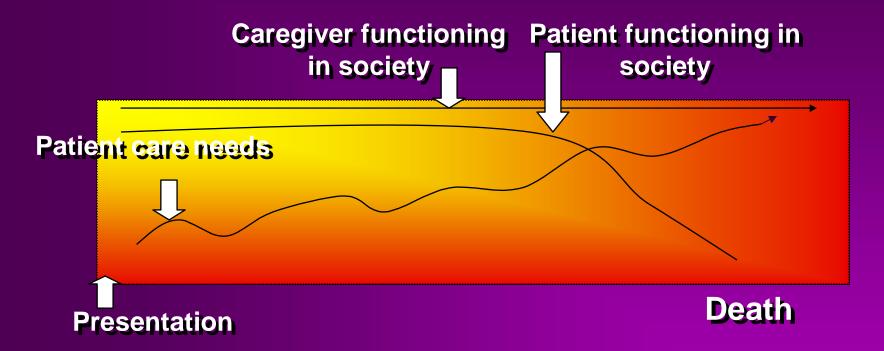
Illness-poverty trap





The 1st of two possible solutions

Curative / remissive therapy



Supportive / palliative care

Adapted from The EPEC Project

Essential research for policy fuel

- Does palliative care provide economic resilience?
- Can it provide additional inbuilt economic resilience options?
 - Family caregiver training already invested in
 - Leverage invested social capital with training?

Early work

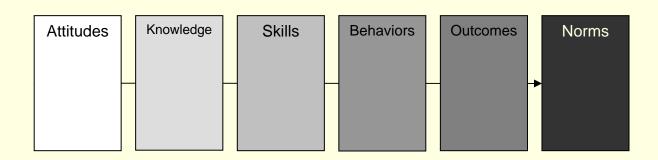
- EPEC-CG
 - Formalizes family caregiver training
- Network of options for employment as a CG
 - ShoreBank, Chicago
 - Uganda J Pall Med 2008
 - India

The 2nd of two possible solutions

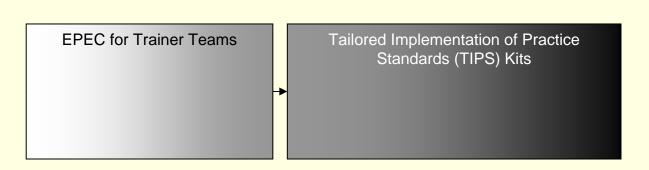
- Reduce unwanted, costly interventions
 - Existential maturity
 - Dignity therapy
 - Goals of care
 - = Cost-warranted care
- Research needed

Both a fit for this approach

Davis'
Theoretical
Framework:



Our intervention components



Two new hybrid vehicles:

education + training » dissemination & implementation

business + medicine » economic resilience, cost-effective policy

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