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Promoting Excellence *in* END-OF-LIFE CARE

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FOR IMMEDIATE RELEASE

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FOUR HEALTH CARE INSTITUTIONS TO PIONEER INNOVATIONS IN PALLIATIVE CARE IN INTENSIVE CARE SETTINGS

***Projects Will Total \$1,495,920 over 3 Years;
They Seek to Improve Care for Dying Americans in Hospital Intensive Care
Units (ICUs)***

MISSOULA, MT – Four health care institutions from around the country today received grants totaling nearly \$1.5 million for developing innovative ways of integrating high-quality palliative care services in critical care settings. The four demonstration projects will develop palliative care models for ICUs and assess the impact on the quality of care for patients and their families. The grants will enhance care across the spectrum of Medical, Surgical, Trauma, Acute Care, Burn, Coronary and Pediatric ICUs.

Promoting Excellence in End-of-Life Care, a national program of The Robert Wood Johnson Foundation, selected grantees for 3-year projects from a highly competitive pool of 242 applicants responding to the “Promoting Palliative Care Excellence in Intensive Care” call for proposals. (See attached list of grantees.)

Although many Americans receive highly skilled, state-of-the-art care in ICUs, experts increasingly recognize that critically ill patients also can benefit from palliative services. All four of the projects selected propose comprehensive, coordinated approaches to patient care in ICUs that include team-based care planning involving the patient and the family, attention to spiritual comfort and psychosocial support for patients and families and bereavement support for families of patients who die.

(more)

Promoting Excellence in End-of-Life Care is a national program supported by The Robert Word Johnson Foundation, with direction and technical assistance provided by the Practical Ethics Center at The University of Montana

Ira Byock, M.D., a pre-eminent palliative care physician at The University of Montana, and Director of the *Promoting Excellence in End-of-Life Care* national program, explains the need for the demonstration projects, “For too long, critical care and palliative care have been viewed as polar opposites. In reality, the science and skills of both disciplines are needed to provide optimal care for critically ill or injured patients and their families.”

Each project suggests a cultural change in critical care settings that fuses palliative care into existing practice patterns, and includes educating ICU staff and embedding palliative care practice in daily hospital routines. Projects are:

- A palliative care model to be implemented in three ICUs (Medical ICU, Surgical ICU and Acute Care Unit) in a community hospital in rural Pennsylvania. The project includes a well-developed educational component for clinicians and students from the hospital and the community. (Grantee: Lehigh Valley Hospital and Health Network, Allentown, Pa.)
- The merging of a well-established palliative care program with a Medical ICU in an urban, tertiary care teaching hospital affiliated with Harvard Medical School in Boston. (Grantee: Massachusetts General Hospital and Harvard Medical School, Boston)
- A collaboration between a university hospital and medical school to develop and implement an exportable model of palliative care in an inner city academic medical center Trauma/Surgical ICU, where familiar palliative care models do not fit the clinical realities of a trauma/surgical center. (Grantee: University of Medicine and Dentistry of New Jersey, New Jersey Medical School, Newark, N.J.)
- The introduction of interdisciplinary palliative care services in seven distinct ICUs (Medical, Trauma, Neurosurgical, Burn, Surgical, Coronary and Pediatric) in a multi-cultural county hospital within the University of Washington system. (Grantee: University of Washington Schools of Medicine and Nursing, Harborview Medical Center, Seattle, Wash.)

“This *Promoting Excellence* initiative seeks to integrate attention to comfort and quality of life within state-of-the-art critical care,” says Byock. “In so doing, we hope to elevate best practice standards of critical care to a new plane. The enthusiastic response to the call for proposals is evidence of the strong commitment among leaders in critical care to advance the human values of comfort and emotional and spiritual caring within the high-tech environment and high-pressure pace of ICU practice.”

The Robert Wood Johnson Foundation, based in Princeton, NJ, is the nation’s largest philanthropy devoted exclusively to health and health care. It concentrates its grantmaking in four goal areas: to assure that all Americans have access to quality health care at reasonable cost; to improve the quality of care and support for people with chronic health conditions; to promote healthy communities and lifestyles; and to reduce the personal, social and economic harm caused by substance abuse – tobacco, alcohol and illicit drugs.

This press release is available at <http://www.promotingexcellence.org>.

GRANT RECIPIENTS

PROMOTING EXCELLENCE IN END-OF-LIFE CARE

Lehigh Valley Hospital and Health Network, Allentown, Pa. Contact: Daniel Ray, M.D., Phone: 610.402.8499	\$375,000
Massachusetts General Hospital and Harvard Medical School, Boston Contact: J. Andrew Billings, M.D., Phone: 617.724.9197	\$375,000
University of Medicine and Dentistry of New Jersey, New Jersey Medical School, Newark, N.J. Contact: Pat Murphy, Ph.D., A.P.N., F.A.A.N., Phone: 973.972.7251	\$374,770
University of Washington Schools of Medicine and Nursing, Harborview Medical Center, Seattle, Wash. Contact: J. Randall Curtis, M.D., M.P.H., Phone: 206.731.3356	\$371,150