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# **Increasing Palliative Care Team Involvement in Pediatric Hematopoietic Stem Cell Transplant Patients**

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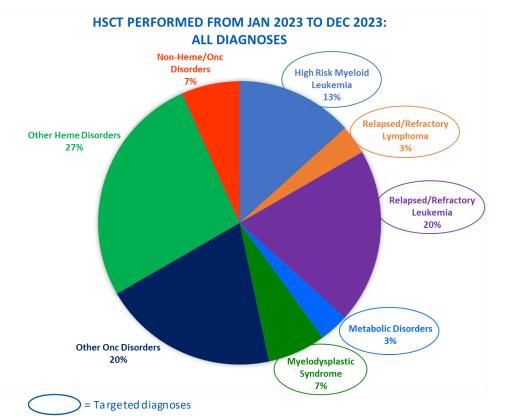
# **Children's Mercy Kansas City**

# Introduction

- Palliative care facilitates communication, helps with physical and psychological symptom management, and assists in goals of care and advanced care planning conversations.<sup>1</sup>
- Multiple organizations including the World Health Organization, American Academy of Pediatrics and American Society of Clinical Oncology encourage palliative care involvement.
- Palliative care involvement with hematopoietic stem cell transplant (HSCT) patients has been shown to be beneficial as HSCT is associated with a high degree of morbidity and possible mortality.<sup>2-3</sup>

#### Aim

- Baseline data revealed 48 patients underwent HSCT from July 2020 to July 2022, 25 of whom had a targeted diagnosis (see Methods). The Palliative Care Team (PaCT) was consulted on 12 of the 25 patients (48%).
- The aim was to increase the number of PaCT consults for patients receiving HSCT for our targeted diagnoses from 48% to 75% by December 2023.



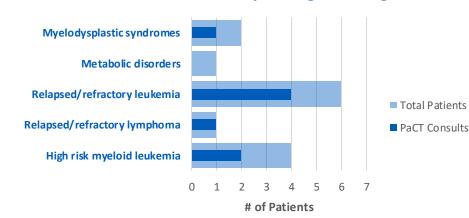
# Methods

- · Chart review was conducted on patients who underwent HSCT from July 2020 to July 2022.
- A targeted diagnosis list was compiled based on which patients were felt to benefit most from palliative care involvement
  - Relapsed or refractory leukemia (ALL, AML, MPL)
  - Relapsed or refractory lymphoma
  - Myelodysplastic syndrome
  - High risk myeloid leukemias
  - Metabolic disorders
- PDSA Cycle #1 discussion of the project at division meetings, posting flyers in workrooms and education regarding palliative care and evidence of their involvement in HSCT patients.
- PDSA Cycle #2 revision of the HSCT referral form to include "Is PaCT consulted?" If the answer was "no," further information was requested. This intervention coincided PaCT beginning to attend the weekly transplant team meetings to discuss current/upcoming patients.

#### **Results**

• From 1/1/23 to 12/30/23, 30 patients received a HSCT, 14 of whom had a targeted diagnosis. Eight of the 14 patients (57%) had a PaCT consult.

#### Palliative Care Consults per Targeted Diagnosis



- As HSCT patients receive more intensive therapy, have frequent deaths in intensive care units and can have limited opportunity for end of life planning due to rapidly changing clinical courses, early integration of palliative care could allow for decreased symptom burden and distress for both patients and families.<sup>4</sup>
- Future PDSA cycles
- Long term goal of this QI project make a PaCT consultation standard of care for all HSCT patients

# References

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# **Conclusions**

- Review HSCT referral forms to identify possible barriers to PaCT consultation
- Add PaCT consultation to the HSCT evaluation
  - order set in the EMR

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