

Short Communication

Palliative Care and Innovations in Healthcare

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Introduction

Palliative Care is a critical component to healthcare services, especially as aging patient populations grow. Palliative Care deals with serious illnesses as well as end of life care, and often patients need both levels of care. The value to the consumer (patients) and their families is that one can be assured that a loved one in need of skilled care is getting to be as comfortable as possible while learning to manage a serious illness, or while entering the end stages of life. Although there are no estimates available of current spending trends related to Palliative Care because circumstances vary from individual to individual, it should be noted that the value of care is more than just the financial expenditure. Innovations in healthcare can help increase the value of care, products like Grand Care can assist with communication when families are far away, and can also aid clinicians in care for patients that are in a medical home environment [1].

Discussion

Innovation in health care comes out of a variety of circumstances. Sometimes, like with Joseph Lister and Louis Pasteur, the innovation comes from direct clinical research and experience [1]. The data could then go through an early informatics process to determine the best action steps [1], in the case of Lister that was washing his hands between patients, in the case of Pasteur those next steps led to things like pasteurization and the vaccine for Rabies.

For other innovations, they come out of necessity, regulatory compliance, happy accidents, or asking the right question at the right time. Regardless of what sparked the fire for the innovation, the flame is often not appreciated initially. This is especially true for technology innovations in health care, historically healthcare has lagged behind in the adoption of technology. There are numerous reasons for this lag, in some cases it is resistance to change and for others it can be a lack of understand how the change impacts care standards and practices.

The Patient Protection and Affordable Care Act (PPACA), more commonly referred to as the Affordable Care Act of 2010 (ACA), was intended to guarantee health care access to all and to provide physicians with more information [2]. The hope was to create better care coordination between physicians and better quality outcomes for patients via the use of technology, and the creation of groups of physicians (and sometimes other partners, such as laboratories) that form a voluntary partnership to provide coordinated care to patients, also known as the accountable care organization (ACO) [2].

In 2014, 83% of healthcare organizations were using some form of cloud application [3]. In 2016, 59% of those surveyed said they plan to use cloud solutions to their data analysis needs for managing diseases like Diabetes [4].

Innovations in the broader healthcare landscape impact the practice of Palliative Care by impacting the patient expectations, and the tools of the clinicians. Electronic Health Records (EHRs) and

Health Information Exchanges (HIEs) impact the way clinicians take notes and communicate those notes among themselves and with their patients.

Palliative Care is also impacted by innovations related to genomic data and genetic testing of Cancer Tumors. These innovations can give clinicians new tools to treat patients with, and a more informed understanding of pathophysiology. Understanding pathogenesis of disease can lead to more effective treatment options for future patients.

Conclusion

Palliative Care should be included as part of an accountable care organization's (ACO) offerings. Accountable care organizations (ACOs), are groups of physicians that have voluntarily agreed to coordinate care to drive down costs and improve the quality of patient outcomes. Some ACOs include access to specialists in their models, Norton Healthcare even includes access to Pharmacists during hospital stays for patients that meet certain criteria [5].

Other accountable care organizations include access to mental health professionals as part of their model [6]. Harken Health is also providing innovation on the delivery of primary care by incorporating health coaches, health and wellness classes, and unlimited visits to the Harken Health centers [7].

ACOs that partner with Palliative Care specialists can assist with work that still needs to be done to assist patients that are discharged from intensive care units (ICUs) with wearable monitors [8]. Wearable monitors can be used to aid in the monitoring of patients after an ICU discharge, but often these patients remove the device too early [8-10]. This early removal can hurt the application of innovations to the Palliative Care specialty. Palliative Care specialists should be consulted by technology companies looking to provide innovative devices. The specialists can provide assistance to the device manufacturers regarding patient feedback and clinical needs, device companies can take that information and make better products for both clinician and patient.

Palliative Care needs more innovation, not less. It is a specialty rarely thought about until patients need the services provided, and that patient population is growing as baby boomers age into retirement. Palliative Care specialists are practicing in an exciting time within the industry, and innovations will continue to be needed to assist these specialists with their patient caseload.

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