MESSAGE FROM THE DIRECTORS

In the five years since our launch, the Cambia PCCE has grown and developed with outstanding contributions from our clinical, educational and research programs. Palliative care clinical services have collaborated across UW Medicine, ensuring the quality of and access to palliative care across the health system. Our educational programs now include the Palliative Care Graduate Certificate Program (http://uwpcctc.org), “Train-the-Trainer” sessions for faculty powered by VitalTalk® (http://vitaltalk.org), and communication training programs for internal medicine and pediatrics residents. Cambia PCCE researchers have secured funding for ground-breaking projects from the National Institutes of Health and the Patient Centered Outcomes Research Institute as well as from foundations and other funders. We have also established an NIH-funded palliative care research fellowship for post-doctoral trainees. These and other activities have been made possible through the support of the Cambia Health Foundation and the Frazier Family Foundation as well as support from individual partners, donors, and contributors. Throughout this process, we have received excellent guidance from our Community Advisory Board, which is composed of patients, family members and individuals with a commitment to supporting palliative care throughout our system and region.

In the 2016 annual report, we announced that the Cambia PCCE achieved all four of our strategic goals set forth during the Center’s founding. In 2017, Cambia PCCE leadership partnered with key health system leaders and the UW Foster School of Business to create a collective vision for the future of the Cambia PCCE. That vision includes the following three specific strategic initiatives: 1) developing a population health approach to palliative care through early identification of patients with unmet palliative care needs; 2) enhancing the capacity to deliver palliative care by all providers and caregivers through training in serious illness and goals of care communication; and 3) committing to continual improvement of our specialty palliative care services through strategies such as membership in the Palliative Care Quality Network (http://pcqn.org). These initiatives, underway now, address the changing landscape of healthcare and support our commitment to patient-centered and family-focused care.

This year has seen some exciting changes in the Cambia PCCE leadership, as we were joined by Blair Mills, Operations Administrator and Tami Music, Program Operations Specialist. In addition, UW Medicine appointed Dr. James Fausto as the Medical Director for Palliative Care.

J. Randall Curtis, MD MPH
Director

Anthony Back, MD
Co-Director
In November 2017, Carlos Pellegrini, MD, FACS, Chief Medical Officer for UW Medicine highlighted palliative care and the work of James Fausto, MD in his monthly address to all clinicians at UW Medicine. Funding of palliative care leaders and public declarations of the importance of palliative care by health care executives are crucial to the success of comprehensive palliative care programs. Dr. Pellegrini included in his remarks:

“Perhaps no other area of our work speaks to the need to collaborate with patients and families to incorporate their care preferences in shared decision-making than serious illness and end-of-life situations. Palliative care at UW Medicine has been a care innovator in this area for over a decade. In 2012, this was catalyzed through the creation of the Cambia Palliative Care Center of Excellence at UW, which has advanced research, clinical education and clinical metrics. In 2016, UW Medicine became the first healthcare system in the country to have all of its hospitals achieve Joint Commission Advanced Certification in Palliative Care. This certification recognizes our standardized and high-quality approach to palliative care services. In July 2017, James Fausto, MD, came on as Medical Director of Palliative Care for UW Medicine to assist in care innovation within our delivery system. This new model seeks to improve access to palliative care by adding comprehensive population management tools through screening for unmet palliative care needs, in addition to traditional clinician referral methods. Screening pilots at Harborview Medical Center, UW Medical Center, and Valley Medical Center will help to further iterate these techniques aimed at providing palliative care to the right patients in the right location at the right time. Improved access to palliative care has repeatedly shown that when clinicians know and honor patient preferences, quality of life improves. This alignment also leads to optimized resource utilization, improved outcomes and higher value for all involved. As we continue our focus on value-based care delivery, palliative care serves as a critical partner in these efforts, especially in times of serious illness.”

- Carlos A. Pellegrini, MD, FACS Chief Medical Officer, UW Medicine and Vice President for Medical Affairs University of Washington
Dr. James Fausto was appointed the first Medical Director for Palliative Care at UW Medicine with responsibilities across the entire health system. Dr. Fausto was recruited to the University of Washington Medical Center in 2015 where he assumed the role of Associate Medical Director for Palliative Care at UWMC. Previously, Dr. Fausto led a multi-site Palliative Care department at Montefiore Health System in New York. His quick success at UWMC and his previous experience made Dr. Fausto an obvious choice for this strategic new position.

In this new role, Dr. Fausto has partnered closely with the Chief Medical Office of UW Medicine and has become an active participant in their Transformation of Care initiative. He will be working over the next several months to develop a business case for greater palliative care penetration across the continuum of care in partnership with Cambia PCCE’s Operations Administrator, Blair Mills. Additionally, Dr. Fausto has been closely involved with the Cambia Palliative Care Center of Excellence’s strategic planning. He is leading our effort to systematically identify patients with unmet palliative care needs through the electronic medical record in order to ensure timely access to palliative care.

In November 2017, Cambia PCCE members Drs. Barak Gaster and Randy Curtis, along with Dr. Eric Larson from the Kaiser Permanente Research Institute, published an article in the Journal of the American Medical Association, JAMA (https://jamanetwork.com/journals/jama/article-abstract/2662678?redirect=true) on the importance of advance care planning for dementia. This article presented a first of its kind framework for a dementia-specific living will. This document will serve as a communication tool to help people express their wishes for medical care if they were to develop dementia.

Their vision is to have a document offered to everyone as they age, and is part of standard advance care planning. Filling out such a form and, most importantly, sharing and discussing it with their loved ones has the potential to better align the medical care patients with dementia receive with the medical care they would have wanted.

Dr. Gaster has set up a website to allow the public to freely download a version at www.dementia-directive.org. This received widespread national attention with features in the New York Times (https://www.nytimes.com/2018/01/19/health/dementia-advance-directive.html) and National Public Radio (http://www.wbur.org/onpoint/2018/02/04/a-living-will-for-alzheimers). The directive has now been downloaded more than 50,000 times across the country. Drs. Gaster and Curtis plan additional outreach for this project including links from the website of the Conversation Project, a national platform to promote advance care planning.

The creation of a dementia-specific advance directive is part of the larger program that Dr. Gaster is building to improve care for persons with dementia in general, with a major focus on advance care planning. Dr. Gaster is excited to partner with the Cambia Palliative Care Center of Excellence in this work. To learn more about this dementia program contact Dr. Gaster at barakg@uw.edu.
Palliative care research at the University of Washington has grown significantly since the launch of the Cambia PCCE. Palliative care researchers received $2.1 million in research grant funds in 2012, $2.9 million in 2013, $3.8 million in 2014, well over $7 million in 2015, $10.8 in 2016 and $11.2 million in 2017. The chart below details federal and foundation grant totals from 2012-2017. In 2017, Cambia PCCE Members have published over 125 publications in peer-reviewed journals about palliative care.

Palliative care research is an important part of the Center’s activities, and has included participation in the Pacific Northwest Palliative Care Conference with nearly 30 researchers presenting their findings to local and regional palliative care educators, clinicians and researchers. Our palliative care research fellows have presented their work at monthly Palliative Medicine Grand Rounds, and we have hosted guest lecturers with expertise in palliative care research such as Zara Cooper from the Harvard Medical School, Bob Arnold from the University of Pittsburgh and Steve Pantilat from the University of California San Francisco.

**SELECT NEWLY FUNDED RESEARCH GRANTS | 2017**

Randy Curtis & Ardith Doorenbos - Building on success: Advancing the Cambia Quality Metrics Program and the Cambia Palliative Care Training Center
Funder: Cambia Health Foundation

Janelle Taylor - Health outcomes for patients with dementia without family caregivers
Funding Agency: NIH

Ardith Doorenbos - Applying technology to problems in pain and symptom management
Funder: NINR

Helene Starks - Implementation evaluation of home-based palliative care ACO pilot program
Funder: Stupski Foundation

Cara McDermott - Care coordination and low value care at EOL among patients with advanced cancer
Funder: Academy Health

Erin Kross, Randy Curtis & Ruth Engelberg - Improving palliative care for older seriously ill hospitalized patients and their families
Funder: NIA

Ann Long - Improving palliative care following patient transfer from the acute care floor to the ICU
Funder: NPCRC

Tatiana Sadak - Promoting caregiver resilience during medical crises of persons living with dementia
Funder: NIOA

**CAMBIA PCCE RESEARCH OPERATIONS**

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**ANNUAL DIRECT COST**
The Cambia PCCE continues its multi-year project to promote the integration of palliative care into the clinical training of medical students at the University of Washington School of Medicine (UWSOM). In addition to studying palliative care content in the Lifecycles and Foundations of Clinical Medicine courses in the pre-clinical phase, all students now complete three active palliative care learning activities with patients during third-year required clerkships. They assess a patient’s pain and make a pain treatment plan during their Surgery clerkship and participate in both the delivery of serious news and advance care planning with patients during the Medicine clerkship. All three exercises have been very well received by students. “I think this is an important and beneficial exercise to have during the Internal Medicine rotation. There are so many difficult conversations being had throughout the course of the clerkship that it becomes a great learning experience,” commented one student who completed the Internal Medicine clerkship this year.

We have also developed a number of new palliative care elective clerkships. There are a number of 2-week basic experiences and 4-week advanced experiences in palliative care and/or hospice care in Seattle at the University of Washington Medical Center, Harborview Medical Center, Northwest Hospital, the Seattle VA, and Providence Regional Medical Center Everett. Across the five-state WWAMI region, there are rotations in Anchorage, AK; Olympia, WA; Billings and Bozeman, MT and Boise, ID. Twenty-one students have completed these rotations thus far and have given them very high ratings – an average of 5.8 on a scale of 1 to 6. One student who completed a two-week elective at Providence in Everett said in her course evaluation: “My objectives of this elective were to better understand the field of palliative care and to be more prepared for the difficult conversations and meetings that lie ahead for me as a physician. Honestly, this elective exceeded my expectations in that regard. I thought my preceptors were more than interested in exposing me and teaching me about their fields, and they were incredibly inclusive when it came to involving me with the care of patients. Finally, the elective allowed me remain focused on why I decided to be a physician in the first place, which was to connect with people and their stories and to remain focused on the entire context of patients.”
Palliative Care Research Fellowship

The Cambia PCCE is entering the 4th year of our NIH-funded T32 fellowship program in palliative care research. We currently have four research fellows in our program, having recently welcomed Dr. Anna Halpern to our program in February 2018.

Anna Halpern, MD is currently a senior fellow and acting instructor in the Hematology Division and a member of the Clinical Research Division of the Fred Hutchinson Cancer Research Center. Dr. Halpern’s research is focused on novel approaches to the care of patients with hematologic malignancies. Her research will focus on investigational questions that, as an overarching theme, aim to improve the outcomes and quality of life of adults with hematologic malignancies via the development and testing of evidence-based and cost-effective therapies that are tailored to individual patients. She is mentored by Dr. Roland Walter at the Fred Hutch and Dr. Gary Lyman at the Hutchinson Institute for Cancer Outcomes Research (HICOR).

Nancy Lau, MS, PhD, is in her second year of research fellowship. She joined us from Harvard University where she completed her Doctorate in Clinical Psychology. Dr. Lau’s research broadly focuses on palliative care in pediatric cancer populations. Specifically, she is interested in family-based models of resilience and treatment moderators and mediators of the Promoting Resilience in Stress Management (PRISM) psychosocial intervention for adolescents and young adults with cancer and their caregivers. She is mentored by Dr. Abby Rosenberg and Dr. Elizabeth McCauley at the University of Washington School of Medicine Department of Pediatrics and the Seattle Children’s Research Institute.

Cara McDermott, PharmD, MSc, PhD, is in her second year of our research fellowship. She is a part of the Pharmaceutical Outcomes and Policy Program (PORPP) at the University of Washington. Her research focuses on health economics and health services research. She is working with Scott Ramsey, MD, PhD, Director of the Hutchinson Institute for Cancer Outcomes Research (HICOR) and J. Randall Curtis, MD, MPH, Director of the Cambia Palliative Care Center of Excellence.

Jill Steiner, MD, is in the second year of her research training. She is a senior fellow in the Division of Cardiology at the University of Washington. Dr. Steiner’s research focuses on perceptions and implementation of palliative and end-of-life care in adults with congenital heart disease. She is mentored by Dr. James Kirkpatrick in the Division of Cardiology, and Dr. J. Randall Curtis.

Over the past year, we have had two research fellows graduate from our program. Heather Coats, PhD, MS, APRN-BC, completed a 2 year post-doctoral fellowship in June. She is currently an Assistant Professor in the College of Nursing at the University of Colorado. She has recently been awarded a K99/R00 from NIH/NINR titled “Personalized experiences to inform improved communication for minorities with life limiting illness”. Robert “Bob” Lee, MD, completed a 1 year post-doctoral fellowship in August. He is currently a senior fellow in the Division of Pulmonary, Critical Care, & Sleep Medicine at the University of Washington. He has been awarded an individual NRSA from NIH/NHLBI titled “Goal-discordant care in acute respiratory failure: Risk factors and mechanisms”.

We are currently accepting applications for post-doctoral research positions in 2018 - 2019.

For more details and information about the Palliative Care Research Fellowship, please visit our website at www.uwpalliativecarecenter.org/pallcareresearchfellowship.html or email us at pallcntr@uw.edu.
Cambia PCCE Education Operations

In October 2016 and January 2017, the Cambia PCCE supported training of 21 health care professionals across 7 UW Medicine and affiliate hospitals as VitalTalk faculty. VitalTalk is a national model for teaching serious illness communication skills. One of the main priorities of this initiative is to incorporate VitalTalk training into UW residency and fellowship programs. In just the last few years, our faculty have developed recurring curriculum in the Departments/Divisions of Internal Medicine, Pediatrics, Obstetrics and Gynecology, Family Medicine, Palliative Medicine, Geriatrics, Neurology and Pediatric Critical Care. We also have new programs in development in Cardiology, Neonatology and General Surgery.

These experiential, simulated learning sessions are grounded in deliberate practice learning theory and help meet programmatic core competencies of the ACGME. The Internal Medicine program, which focuses on teaching residents to facilitate family conferences has trained nearly 100 residents, and serves as a model program for UW's WWAMI Institute for Simulation in Healthcare (WISH). Results from a yearlong study were presented at the national American Academy for Hospice and Palliative Medicine (AAHPPM).

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J. Randall Curtis, MD, MPH, Director and Anthony Back, MD, Co-Director of Cambia PCCE have been named top visionaries in hospice and palliative medicine in a recent poll conducted by the American Academy of Hospice and Palliative Medicine (AAHPPM).

J. Randall Curtis, MD, MPH, received the University of Washington School of Medicine Alumni Service Award. Dr. Curtis was recognized for his efforts to establish palliative care as a legitimate scientific and academic discipline and put UW Medicine on the map as a hub for work in this important field.

Anthony Back, MD, was honored with the Inaugural Walther Cancer Foundation Palliative and Supportive Care in Oncology Endowed Award and Lecture from American Society of Clinical Oncology (ASCO).

Ardith Doorenbos, PhD, RN, FAAN, to be inducted into the International Nurse Researcher Hall of Fame by Sigma Theta Tau International Honor Society of Nursing (Sigma). She will receive this award along with 20 other nurse researchers representing countries around the globe.

Tatiana Sadak, PhD, PMHNP, RN, named one of ten new Sojourns Scholars by Cambia Health Foundation. The Sojourns Scholars Leadership Program is an initiative designed to identify, cultivate and advance the next generation of palliative care leaders.

Melissa Bender, MD and James Fausto, MD, were awarded Fellow Status by American Academy of Hospice and Palliative Medicine (FAAHPM), demonstrating significant commitment to the field of hospice and palliative medicine.

Erin Kross, MD, was selected to participate in the American Thoracic Society’s Emerging Leaders Program in 2017. This program assembled a cohort of 18 individuals to complete a 5-month didactic and experiential curriculum on healthcare leadership competencies.

Ann Long, MD, MSc, received the 2017 Presidential Citation from the Society of Critical Care Medicine. This award recognizes SCCM members who have made contributions of time, energy, and resources to SCCM during the previous year.

Lucille Marchand, MD, BSN, FAAHPM, was recognized with the Humanities Award from AAHPPM, recognizing her work in advancing relationships between humanities and palliative care.

James Fausto, MD received UWMC's Fall 2017 Cares Award. This award is based on UW Medicine’s Service Culture Guidelines, which are: respect privacy and confidentiality; communicate effectively; conduct myself professionally; be accountable; be committed to my colleagues and to UW Medicine.

Robert Lee, MD, received the Patient Safety Hero Award from the University of Washington Medical Center. This award recognizes UWMC faculty and staff who “go above and beyond for patient safety and wellness”.

Cambia PCCE Leadership Achievements
SELECT PEER REVIEWED PUBLICATIONS


J. Randall Curtis, MD MPH
Director
A. Bruce Montgomery-American Lung Association Endowed Chair in Pulmonary & Critical Care Medicine
Professor of Medicine, Department of Medicine

Anthony Back, MD
Co-Director
Professor of Medicine
Division of Oncology
Department of Medicine

Blair Mills
Operations Administrator
Transformation of Care Consultant
UW Medicine

Jim Fausto, MD
Medical Director, Palliative Care, UW Medicine
Assistant Professor
Family Medicine

Wayne McCormick, MD MPH
Chair, Clinical Operations
Director, Palliative Medicine Fellowship Program
Professor of Medicine
Head, Division of Gerontology and Geriatric Medicine
Department of Medicine

Caroline Hurd, MD
Chair, Education Operations
Clinical Assistant Professor
Palliative Medicine & Hospitalist Services
Department of Medicine

Ardith Doorenbos, PhD RN FAAN
Co-Chair, Research Operations
Professor, BNHS, School of Nursing
Adjunct Professor, School of Medicine
Adjunct Professor, School of Public Health
Director of the Palliative Care Training Center

Ruth Engelberg, PhD
Co-Chair, Research Operations
Research Associate Professor
Associate Director, End-of-Life Care Research Program
Department of Medicine

Erin K. Kross, MD
Associate Professor of Medicine
Division of Pulmonary, Critical Care & Sleep Medicine
University of Washington

Heleine Starks, PhD MPH
Chair, Metrics, Quality & Evaluation Core
Associate Professor
Department of Bioethics and Humanities
CAMBIA PCCE OPERATIONS ADMINISTRATOR

Blair Mills accepted the newly formed role of Operations Administrator for the Cambia PCCE in March of 2017. Blair has been involved with Cambia PCCE since 2016 as a part of her work for the Transformation of Care Department at UW Medicine. She continues to split her time between Cambia PCCE and working as a consultant for UW Medicine.

The Operations Administrator position was created to help guide and implement a vision for greater synergy across the three arms of the center: clinical programs, education, and research. She will also be working closely with Dr. Fausto in his new role with the health system. Blair is well suited for the role and uniquely positioned to help us strengthen our relationships and impact within UW Medicine.
THANK YOU TO OUR SPONSORS

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