

Palliative and End of Life Care: NQF-Endorsed[®] Maintenance Standards Under Review

Measure			
Number	Title	Description	Measure Steward
<u>0209</u>	Comfortable Dying: Pain Brought to a Comfortable Level Within 48 Hours of Initial Assessment	Number of patients who report being uncomfortable because of pain at the initial assessment (after admission to hospice services) who report pain was brought to a comfortable level within 48 hours.	National Hospice and Palliative Care Organization
<u>0210</u>	Proportion receiving chemotherapy in the last 14 days of life	Percentage of patients who died from cancer receiving chemotherapy in the last 14 days of life.	American Society of Clinical Oncology
<u>0211</u>	Proportion with more than one emergency room visit in the last days of life	Percentage of patients who died from cancer with more than one emergency room visit in the last days of life.	American Society of Clinical Oncology
<u>0213</u>	Proportion admitted to the ICU in the last 30 days of life	Percentage of patients who died from cancer admitted to the ICU in the last 30 days of life.	American Society of Clinical Oncology
0215	Proportion not admitted to hospice	Percentage of patients who died from cancer not admitted to hospice.	American Society of Clinical Oncology
0216	Proportion admitted to hospice for less than 3 days	Percentage of patients who died from cancer, and admitted to hospice and spent less than 3 days there.	American Society of Clinical Oncology

Click the measure numbers to read more about the measure on QPS!

Measure Number	Title	Description	Measure Steward
<u>1617</u>	Patients Treated with an Opioid who are Given a Bowel Regimen	Percentage of vulnerable adults treated with an opioid that are offered/prescribed a bowel regimen or documentation of why this was not needed.	RAND Corporation
<u>1625</u>	Hospitalized Patients Who Die an Expected Death with an ICD that Has Been Deactivated	Percentage of hospitalized patients who die an expected death from cancer or other terminal illness and who have an implantable cardioverter-defibrillator (ICD) in place at the time of death that was deactivated prior to death or there is documentation why it was not deactivated.	RAND Corporation
<u>1626</u>	Patients Admitted to ICU who Have Care Preferences Documented	Percentage of vulnerable adults admitted to ICU who survive at least 48 hours who have their care preferences documented within 48 hours OR documentation as to why this was not done.	RAND Corporation
<u>1628</u>	Patients with Advanced Cancer Screened for Pain at Outpatient Visits	Adult patients with advanced cancer who are screened for pain with a standardized quantitative tool at each outpatient visit.	RAND Corporation
<u>1634</u>	Hospice and Palliative Care Pain Screening	Percentage of hospice or palliative care patients who were screened for pain during the hospice admission evaluation / palliative care initial encounter.	University of North Carolina-Chapel Hill
<u>1637</u>	Hospice and Palliative Care Pain Assessment	This quality measure is defined as: Percentage of hospice or palliative care patients who screened positive for pain and who received a clinical assessment of pain within 24 hours of screening.	University of North Carolina-Chapel Hill
<u>1638</u>	Hospice and Palliative Care Dyspnea Treatment	Percentage of patients who screened positive for dyspnea who received treatment within 24 hours of screening.	University of North Carolina-Chapel Hill

Measure Number	Title	Description	Measure Steward
<u>1639</u>	Hospice and Palliative Care Dyspnea Screening	Percentage of hospice or palliative care patients who were screened for dyspnea during the hospice admission evaluation / palliative care initial encounter.	University of North Carolina-Chapel Hill
<u>1641</u>	Hospice and Palliative Care – Treatment Preferences	Percentage of patients with chart documentation of preferences for life sustaining treatments.	University of North Carolina-Chapel Hill
<u>1647</u>	Percentage of hospice patients with documentation in the clinical record of a discussion of spiritual/religious concerns or documentation that the patient/caregiver did not want to discuss.	This measure reflects the percentage of hospice patients with documentation of a discussion of spiritual/religious concerns or documentation that the patient/caregiver/family did not want to discuss.	Deyta, LLC