



Palliative care is the relief of pain and suffering for individuals living with serious illness. It's a team-based approach, providing an extra layer of support at any age or stage of illness, often together with curative treatment.

The Patient Quality of Life Coalition was formed to advance the interests of patients and families facing serious illness, including survivors. The Coalition includes more than 30 organizations dedicated to improving quality of care and quality of life for these adults and children. The Coalition has developed a consensus-based agenda aimed at promoting public policy that will improve and expand access to high-quality palliative care.

Member groups represent:

Patients
Survivors
Family caregivers
Hospitals
Health systems
Hospices
Physicians
Nurses
Social workers
Chaplains
Researchers

What is Palliative Care?

PatientQualityOfLife.org

The goal of palliative care is to prevent and relieve suffering and to support the best possible quality of life for patients and their families, regardless of the stage of the disease or the need for other therapies. It focuses on relief of the pain, symptoms, and stress of serious illness and on improving communication with patients and families. **Provided by a team of clinicians and specialists** who work with the patient's regular physicians to provide an extra layer of support, **palliative care is appropriate at any age and at any stage in a serious illness.** It can be provided wherever a patient is seen and can be provided together with curative treatment.

Palliative care holds the potential to transform the U.S. health care system and improve quality of life for the 90 million Americans living today with serious illness – a number that is expected to double in the next 20 years, according to Dartmouth Atlas of Health Care. Despite enormous expenditures, studies show that **patients with serious illness and their families receive poor-quality medical care** that is characterized by inadequately treated symptoms, fragmented care, poor communication with health care providers, and enormous strains on family members or other caregivers.

By focusing on priorities that matter most to patients and their families, **palliative care has been shown to improve both quality of care and quality of life during and after treatment.** Because their needs are met, patients receiving palliative care avoid crises, spend fewer days in the hospital, ED and ICU, and need fewer readmissions. **In fact, studies have demonstrated that high-quality palliative care not only improves quality of life and patient and family satisfaction, but it can also prolong survival.** Palliative care achieves these outcomes at a lower cost than usual care by helping patients better understand their needs, choose the most effective treatments, and avoid unnecessary or unwanted hospitalizations and interventions.

The Patient Quality of Life Coalition urges legislative and regulatory change that will:

1. **Advance patient, family, and public understanding** of how palliative care improves quality of care and quality of life.
2. **Develop a well-trained workforce** to ensure sufficient numbers of health care professionals, with appropriate training and skills, are available to teach and to directly provide palliative care.
3. **Invest in research** necessary to establish a strong evidence base for the delivery of high-quality palliative care.
4. **Expand the delivery of high-quality palliative care** in hospitals, nursing homes and community settings through improved data collection, quality measurement, and appropriate provider payment.
5. **Ensure timely access to prescription medication** necessary for effective management of pain and other distressing symptoms in patients with legitimate need.

In the 115th Congress, the coalition will be working in support of the following legislation:

The Palliative Care and Hospice Education and Training Act [PCHETA], H.R. 1676 / S. 693

PatientQualityofLife.org

ACADEMY OF INTEGRATIVE PAIN MANAGEMENT
ALZHEIMER'S ASSOCIATION
AMERICAN ACADEMY OF HOSPICE AND PALLIATIVE MEDICINE
AMERICAN ASSOCIATION OF COLLEGES OF NURSING
AMERICAN CANCER SOCIETY
AMERICAN CANCER SOCIETY CANCER ACTION NETWORK
AMERICAN PSYCHOLOGICAL ASSOCIATION
AMERICAN PSYCHOSOCIAL ONCOLOGY SOCIETY
AMERICAN HEART ASSOCIATION | AMERICAN STROKE ASSOCIATION
AMERICAN SOCIETY OF CLINICAL ONCOLOGY
ASSOCIATION OF PEDIATRIC HEMATOLOGY/ONCOLOGY NURSES
ASSOCIATION OF ONCOLOGY SOCIAL WORK
C-CHANGE
CALIFORNIA STATE UNIVERSITY INSTITUTE FOR PALLIATIVE CARE
CAMBIA HEALTH SOLUTIONS
CANCER SUPPORT COMMUNITY
CATHOLIC HEALTH ASSOCIATION OF THE UNITED STATES
CENTER TO ADVANCE PALLIATIVE CARE
CHILDREN'S NATIONAL HEALTH SYSTEM
COALITION FOR COMPASSIONATE CARE OF CALIFORNIA
COLON CANCER ALLIANCE
COURAGEOUS PARENTS NETWORK
GEORGE WASHINGTON INSTITUTE FOR SPIRITUALITY AND HEALTH
HOSPICE AND PALLIATIVE NURSES ASSOCIATION
LEUKEMIA & LYMPHOMA SOCIETY
LUNG CANCER ALLIANCE
MOTION PICTURE & TELEVISION FUND
NATIONAL ALLIANCE FOR CAREGIVING
NATIONAL COALITION FOR CANCER SURVIVORSHIP
NATIONAL COALITION FOR HOSPICE AND PALLIATIVE CARE
NATIONAL PALLIATIVE CARE RESEARCH CENTER
NATIONAL PATIENT ADVOCATE FOUNDATION
NATIONAL POLST PARADIGM
ONCOLOGY NURSING SOCIETY
PARTNERSHIP FOR PALLIATIVE CARE
PEDIATRIC PALLIATIVE CARE COALITION
PHYSICIAN ASSISTANTS IN HOSPICE AND PALLIATIVE MEDICINE
PREVENT CANCER FOUNDATION
ST. BALDRICK'S FOUNDATION
SUPPORTIVE CARE COALITION
TRINITY HEALTH
VISITING NURSE ASSOCIATIONS OF AMERICA

*For more information about the coalition or how to become a member, please contact:
Auda Martinez at 703-399-0202 or auda.martinez@advocacysmiths.com*