<table>
<thead>
<tr>
<th><strong>Name</strong></th>
<th>Validation study to evaluate whether prognostic screening tools assess palliative care needs in patients with advanced liver disease.</th>
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<td><strong>Type of project</strong></td>
<td>Exploratory validation study – longitudinal. Single site, UK liver tertiary unit.</td>
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| **Aims/objectives** | 1) To assess if the Bristol Screening Tool (BST) and the Supportive & Palliative Care Indicator Tools (SPICT) tool predicts palliative care needs.  
2) To assess if the BST and SPICT tool predict mortality at 12 months. |
| **Inclusion/exclusion criteria** | **Inclusion criteria:**  
- All patients admitted under Hepatology or Liver Transplant to the Liver Ward at the Royal Free Hospital in the period April – November 2018.  
**Exclusion criteria:**  
- Patients not accepted under the care of Hepatology or Liver Transplant services but admitted to the liver ward.  
- Patient whose notes were not available at the time of audit. |
| **Description of intervention/methodology** | 1) To look through the notes of all patients screened with SPICT/BST to see which patients have palliative care needs, using a specially designed proforma. Referral to palliative care services considered the gold standard.  
2) To look through the notes of patients not screened case by SPICT/BST to know what happens to this cohort of patients.  
3) To follow up screened patients on their survival status 12 months post-screening date.  
4) Statistical analysis: The discriminatory ability of the tools will be assessed using sensitivity, specificity and a receiver operating characteristics curve (AUC). We will also assess the tools’ performances of predicting mortality by plotting Kaplan-Meier survival curves for those identified as requiring palliative care against those who were not identified as requiring palliative care. |
| **Measures used to assess progress** | BST (Hudson et al 2015)  
SPICT (Highet et al 2013)  
Proforma to assess palliative care need  
Survival 12 months post-screening. |
| **Resources required** | No specific funding. Work for this study was conducted by staff from the Marie Curie Palliative Care Research Department, UCL, who are funded from the Marie Curie Core research grant (MCCC-FPO-16-U). |
| **Progress** | Screening data has been collected on 121 patients. |
| **Lessons learnt** | 1) Some tools may disadvantage some patients without liver cirrhosis but with liver related diseases.  
2) Patients with liver related diseases often have complex physical, social and psychological needs. |
| **Future plans** | 1) To use proforma to assess palliative care need in screened patients  
2) To follow up 12 month to check survival status |
| **Resources produced** | n/a |
| **Contact details** | Victoria Vickerstaff v.vickerstaff@ucl.ac.uk  
Cathy Carroll catherine.carroll1@nhs.net  
Joe Low joseph.low@ucl.ac.uk  
Doug Thorburn douglas.thorburn@nhs.net  
Jo Wilson jo.wilson8@nhs.net  
Paddy Stone p.stone@ucl.ac.uk |