

# Understanding the Quality of Dying and Death for Patients in the ICU

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# If you had a family member that was about to pass away, how would you like their last moments to be?





# **Significance**

It is estimated that around 60% of Americans die in acute care hospitals. Among inhospital deaths, approximately 20 percent occur in the **Intensive Care** Unit (ICU).



Source: MMWR Morbidity and Mortality Weekly Report. 2020;69(19):611. doi:10.15585/mmwr.mm6919a4





#### **Project Overview: PONDER-ICU**

Location: 17 ICUs across 10 hospitals

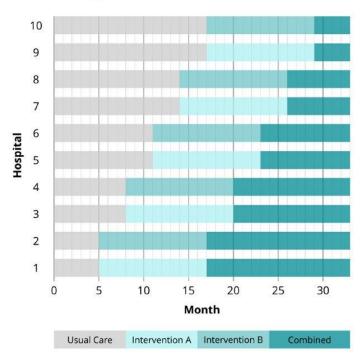
Study Design: Cluster-randomized, stepped-wedge trial

- Hospital pairs assigned in random order to adopt intervention A or B at random

Eligibility criteria Criteria: Patients with  $\geq 1$  chronic life-limiting illness & mechanical ventilation  $\geq 48$  hours (enrolled using waiver of written informed consent)

Prognosticating Outcomes and Nudging Decisions using Electronic Records in the ICU









#### **Enrollment and Outcomes**

Study Population: Launched February 1,

2018

- 3,500 patients enrolled as of 10/31/20

#### Most common life-limiting illnesses:

CHF > COPD > solid organ malignancy

75% intervention adherence

Primary outcome: hospital length of stay

#### Secondary outcomes:

Palliative care process measures quality of death and dying (nurse-assessed)







#### **Research Question**

What are the modifiable factors that influence the quality of dying and death among patients who died in the hospital?





# **Objectives**

Identify factors related to the patient, hospital environment, and nurses that may influence the quality of dying and death in hospital settings in the United States







#### Methods: What is the QODD?

- Nurse emailed a linked to webbased survey to complete QODD
- 632 Completed
   QODD
- 1052 Sent Out
- 60% ResponseRate

"Overall, how would you rate the quality of the patients dying on a 0-10 scale?"





## **Data Analysis**

- Organize the patient and nurse information, i.e. Race, Age,
- Outcome Table of the QODD Scores
- Regression Test to find associations between factors and outcomes

```
lm(formula = as.numeric(godd_1) ~ factor(nurse_experience), data = newdata)
Residuals:
   Min
           1Q Median
                          3Q
-7.8222 -1.0034 0.5745 1.9966 2.9966
Coefficients:
                        Estimate Std. Error t value Pr(>|t|)
(Intercept)
                        7.425532 0.245026 30.305
factor(nurse_experience)3 0.006286 0.320612
factor(nurse_experience)4  0.396690  0.430639
                                                    0.357
factor(nurse_experience)5 0.511968
factor(nurse_experience)6  0.390795  0.418584
Signif. codes: 0 '***' 0.001 '**' 0.01 '*' 0.05 '.' 0.1 ' ' 1
Residual standard error: 2.376 on 625 degrees of freedom
  (1 observation deleted due to missingness)
Multiple R-squared: 0.01715, Adjusted R-squared: 0.009292
```

F-statistic: 2.182 on 5 and 625 DF, p-value: 0.05463







# Preliminary Findings: Patient and Summary Statistics

	Patients (N=632)
Age (Years)	
Median [Quartile 1, Quartile 3]	67.0 [57.0,75.0]
Race White Black	390 (61.7%) 200 (31.6%)
Ethnicity Non-Hispanic Hispanic	561 (88.8%) 18 (2.8%)
Gender Female Male	262 (41.5%) 370 (58.5%)
Marital Status  Married Single* Unknown	287 (45.4%) 332 (52.5%) 13 (2.1%)
SOFA Score Median [Quartile 1, Quartile 3]	9.00 [7.00, 11.0]

Patient to Nurse Ratio ≤2:1 ≥3:1	516 (81.7%) 115 (18.3%)
Death Location ICU Ward Operating Room/Unknown	533 (84.3%) 93 (14.7%) 6 (0.9%)
COVID-19 Status Negative Positive	611 (96.7%) 21 (3.3%)
Treatment arm Control Focusing effect (FE) Accountable justification (AJ) FE + AJ	137 (21.7%) 180 (28.5%) 75 (11.9%) 240 (38.0%)





## **Nurse Summary Statistics**

	Nurse (N= <u>479)*</u>
Age (Years)	
Median [Quartile 1, Quartile 3]	29.5 [26.0,36.0]
Race White Black Other**	400 (83.5%) 39 (8.1%) 38 (7.9%)
Ethnicity Non-Hispanic Hispanic Unknown	441 (92.1%) 24 (5.0%) 11 (2.3%)

Gender Female Male	407 (85.0%) 71 (14.8%)
Nurse Degree High School Diploma Associates Degree or greater	4 (0.8%) 474 (98.9%)
Year in Practice Less than 1 Year 1-5 Years 6-10 Years Greater than 10 years	66 (13.8%) 230 (48.0%) 96 (20.0%) 86 (17.9%)





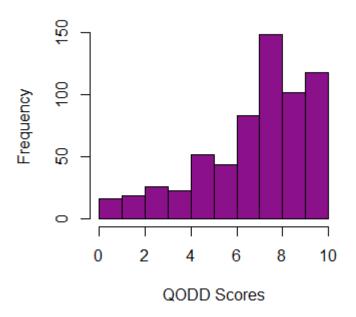
<sup>\*</sup>Data may not add up to 100% due to missingness; n=1 missing for Patient: Nurse Years of Experience, Nurse Degree, and Gender, and n=2 missing for Race.

<sup>\*\*</sup>Other race category includes Asian, Multi-Racial, Unknown, American Indian or Alaskan Native, Native Hawaiian or Other Pacific Islander

# **QODD Results**

	Outcomes (N=632)
QODD Score	
Terrible Experience	9 (1.4%)
>1	7 (1.1%)
>2	19 (3.0%)
>3	26 (4.1%)
>4	23 (3.6%)
>5	52 (8.2%)
>6	44 (7.0%)
>7	83 (13.1%)
>8	149 (23.6%)
>9	102 (16.1%)
Almost Perfect Experience	118 (18.7%)

#### **Histogram of QODD Scores**







#### Limitations

- Potential non-response bias
- Study population diversity
- QODD relies on proxy respondents and evaluations
- Preferences for death and dying are individualized





#### **Next Steps**

- Evaluate relationships between patient, nurse, and hospital factors with QODD score
- Compare completed characteristic of patients with completed QODD survey and those without





#### **Acknowledgments & Thanks**

- Dr. Kate Courtright
- Joanne Levy
- Erich Dress
- Casey Whitman
- Nate Apathy





## Thank you!

**Questions?** 







# Youth Caregivers Study Project

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Mentor: Joanna Hart



# **Significance**

An estimated 1.4 Million Caregiving Youth in the United States which receive lack of acknowledgement and support

Primarily impacting low-income youth and

families

- Impacts include:
- Depression
- Anxiety
- Poor Outcomes in School
- Social Isolation





# Why is this an important topic







# Who are Young Caregivers?

- Under the age of 18
- Children with ill, frail, disabled, or substancedependent family members may provide support to these adults.







#### Aim of Study

Identify Youth (Ages 8-18) who give informal care and support to older adults such as family members





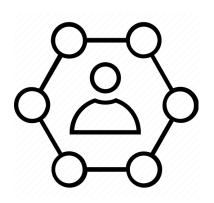


# **Project Overview**

Recruited Stakeholders in community

Conducted hour long interviews

Created surveys for Mastery Teacher and Administrators











#### **Mixed Method Research**

#### Qualitative Methods

 Recruiting stakeholders in the community such as pediatricians, teachers, and social workers

#### **Quantitative Methods**

Sending out
 Qualtrics Survey to
 teachers and
 administrators in the
 Mastery School
 System





#### **Mastery School System**



#### Mastery Charter Schools Excellence. No Excuses.

14,000 Students at 24 Schools In Philadelphia and Camden





#### What I learned

- Lack of information about YCG
- Stakeholders have trouble identifying and describing them/their roles
- Interviews
- Coding interview transcripts
- Research is a slow process, but that is okay!





#### **Next Steps**

- Present at one Mastery School to introduce project
- Collect surveys from Mastery School
  - Find interview subjects from there
- Code the data





#### Acknowledgments & Thanks!

- Dr. Joanna Hart
- Joanne Levy
- Amy Summer
- Mercedes Fernandez
- Erich Dress





## Thank you!

**Questions?** 



