

Systematic development and adjustment of the German version of the Supportive and Palliative Care Indicators Tool (SPICT-DE)

2018/2/2

Dr. Kambiz Afshar

MHH Institute for General Practice
Head: Prof. Nils Schneider
Hannover Medical School

Background and objectives

Background

- SPICT-DE first translated in 2014/15 by a multidisciplinary expert group of clinicians from Austria (A. Feichtner) and Germany (A. Schnabel)
- first pilot study in 2015 => need for linguistic adaptation

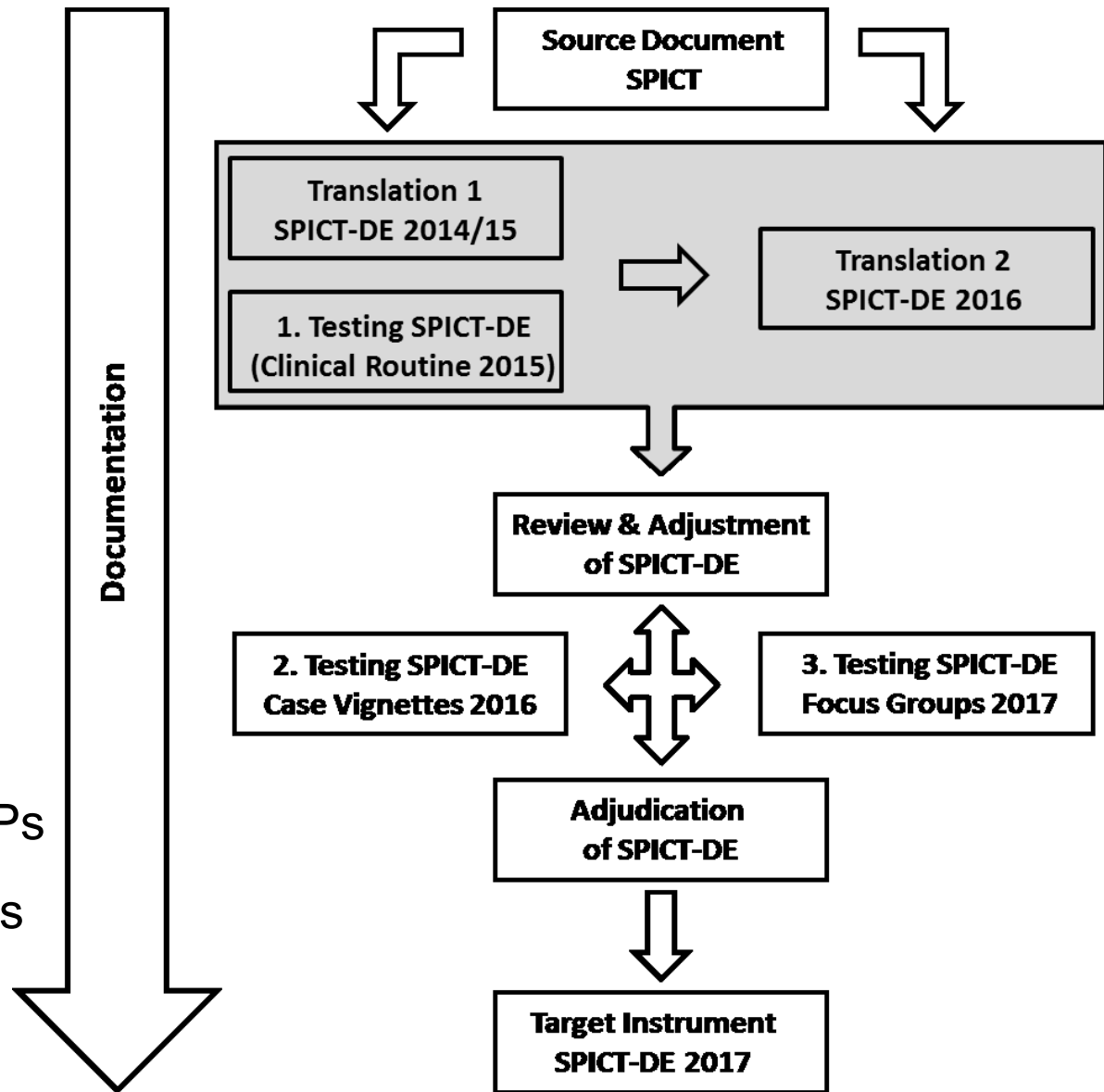
Objectives

- systematic development, refinement and testing of SPICT-DE
- preparation for application in general practice in German-speaking countries



Methods

- multidisciplinary team
- TRAPD² model
 - Translation
 - Review
 - Adjudication
 - Pretesting
 - Documentation
- (Pre-)Testing
 1. Pretest with 5 GPs
 2. Two focus groups with 28 GPs



Results – Focus groups

Focus group rating without and with SPICT-DE

| Focus Group | Case Vignette | “Patient might benefit from palliative care.” | | p-value |
|--------------|---------------|-----------------------------------------------|---------------|--------------|
| | | without SPICT-DE | with SPICT-DE | |
| | | n (%) | n (%) | |
| A (n=15) | Case B | 10 (67) | 12 (80) | n.s. |
| | Case C | 3 (20) | 7 (47) | n.s. |
| B (n=13) | Case B | 9 (69) | 10 (77) | n.s. |
| | Case C | 2 (15) | 8 (62) | 0.031 |
| A + B (n=28) | Case B | 19 (68) | 22 (79) | n.s. |
| | Case C | 5 (18) | 15 (54) | 0.002 |

McNemar-Test compared the groups; $p < 0.05$, significant differences in bold; n.s.: not significant.

Results – Group Discussion

Case vignettes and rating procedures

Participants stated that the indicators of the SPICT-DE are *more detailed and broadly defined* than the subjective criteria. Especially in *ambiguous cases* the structured presentation of these objective criteria for PC needs led to an alteration of the subjective appraisal.

Quality and feasibility of SPICT-DE

Participants considered the *combination of general and clinical indicators with specific recommendations for PC actions* of the SPICT-DE to be especially helpful in supporting improved provision of PC for people with *non-cancer illnesses*, where the timely identification and decision-making is often more difficult.

Using SPICT-DE in routine clinical practice

All participants except two were *enthusiastic* about SPICT-DE and could imagine *using it as part of their daily practice routine* to support them in identifying patients who might benefit from general and/or specialist PC



Conclusions

- a multiprofessional and participatory approach seems particularly suited for the systematic development, refinement, and testing of SPICT-DE whilst increasing its acceptance and application quality
- SPICT-DE is a helpful and practical tool to support the identification of patients who might benefit from PC
- SPICT-DE changes the usual identification strategy
- SPICT-DE increases GP's awareness in providing PC for patients with different chronic progressive diseases
- further research is needed to evaluate the implementation of SPICT-DE in routine daily practice in Germany

