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## Background

Outcome measures are tools designed to assess patient concerns, as well as quality and impact of palliative care. Patient-reported outcome measures, such as the Palliative care Outcome Scale (POS patient version), are deemed to be the gold standard, as they capture such issues from the patient perspective. Other measures may be completed by health professionals (e.g. the Support Team Assessment Schedule (STAS) or POS staff version).

Outcome measures are of growing importance in health care interventions and increasingly inform service delivery. However, only a limited number of outcome measures specific for palliative care settings exist, and the purpose of their use varies.

A systematic review of the use of two popular palliative care measures – the POS family of measures and the STAS – published by Bausewein et al. (Pall Med. 2011;25(4):304-13) showed that these outcome measures had been used in various settings, countries and palliative care populations worldwide.

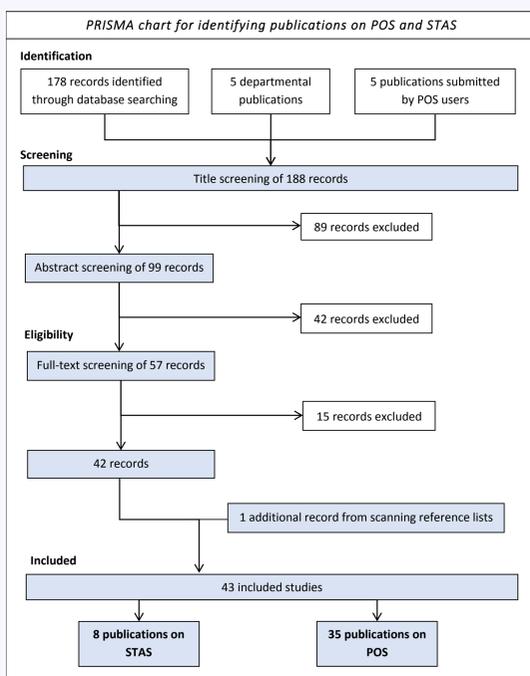
## Aim and design

We sought to determine whether and how the use of the POS family of measures and the STAS has changed since publication of the last review. To achieve this, we updated the previous systematic review to identify studies on the psychometric properties and/or use of POS and/or STAS published since 2010.

## Methods

We carried out a systematic review of the literature published between February 2010 and June 2014. We employed the same search strategy as used by the previous review team, searching five databases (MEDLINE, EMBASE, PsycINFO, British Nursing Index, CINAHL) for studies reporting the validation or use of POS and/or STAS (Pall Med. 2011;25(4):304-13). Studies were categorised by main objective and reason for using POS/STAS. Further data on study design, location, population and results were extracted for analysis.

## Search Results



We identified a total of 43 new publications that reported validation and/or use of POS/STAS (see Figure). The majority (n=31) were observational, with some (n=12) experimental designs. Of the observational studies, thirteen were cross-sectional, sixteen were longitudinal, and two were qualitative. Of the experimental studies, three were randomised controlled studies, one was longitudinal and the remainder were quasi-experimental.

## Results

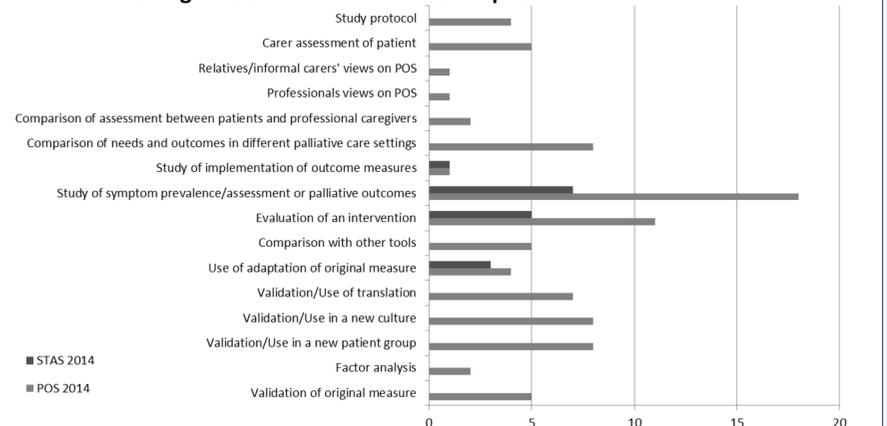
Use of both the POS family of measures and the STAS has increased since 2010. POS measure use has increased particularly in Africa and Europe, reflecting the current international trend towards the growing use of outcome measures in palliative care. STAS is primarily used in Asia (four publications from Japan, two from China).

Twelve new translations of POS have been published in recent years, the great majority being translations of the APCA African POS into a variety of African dialects.

POS and STAS use with non-cancer populations has increased, suggesting that palliative care needs are beginning to be recognised, and outcomes measured, among a variety of populations and disease trajectories.

Patterns of use of these tools have changed, as they are now more commonly used in studies that assess patients' symptoms and needs, rather than validation studies (see Figure).

Categories of use for POS and STAS publications 2010-2014



## Implications

The POS family of measures may be used to compare palliative care outcomes data internationally, as many translations and cultural adaptations exist; however it may also be used to compare different disease groups, particularly those with a non-cancer diagnosis, or different settings, such as inpatient and community palliative care.

## Conclusions

Both POS and STAS have increasingly wide uses in clinical practice and in research worldwide, and particularly POS measures are now available in a multitude of languages. The shift in the focus of publications (from those that seek to adapt and validate these measures, to those that use them to assess needs and outcomes) may indicate that these tools have now been widely accepted as valid and reliable measures. There is advantage in having a brief, valid and reliable tool used across settings, languages and countries – not only to ensure palliative care concerns are addressed and outcomes of care are measured, but also to enable cross-country comparisons of palliative care services in the future.



Visit [www.pos-pal.org](http://www.pos-pal.org) for more information and to download the POS and STAS

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