



Equity of Access: the referral process in Palliative Care – preliminary data from a scoping review

Authors

Andreia Ramos¹; Susana Marinho²; Manuel Luís Capelas³

Affiliation

¹PhD student at the Universidade Católica Portuguesa, Católica Medical School, Centre for Interdisciplinary Research in Health (CIIS), Portugal

²Nurse at the ASFE SAÚDE Palliative Care Unit, Portugal;

³ RN, MSc, PhD, Professor at the Universidade Católica Portuguesa, Faculty of Health Sciences and Nursing, Centre for Interdisciplinary Research in Health (CIIS), Portugal

Background

 Late Referral: Limits quality of life.

 The Gap: Lack of consensus in non-cancer cases.

 Goal: Equitable access for all patients

Aim

To map evidence on the PC referral process for adults, identifying:

- Existing models and instruments.
- Contexts of use and best practices

Methods



Results



Top Identified Tools ✕	Common Referral Triggers
NECPAL : Chronic conditions	? Surprise Question
SPICT™ : Clinical indicators	 Functional Decline (Karnofsky/ECOG)
GSF-PIG : Primary Care focus	 Frequent Hospital Admissions

Table 1. Principal Validated Tools and Referral Indicators for Adult Palliative Care

Discussion

 Oncology Bias: High evidence in cancer; low in dementia/organ failure.

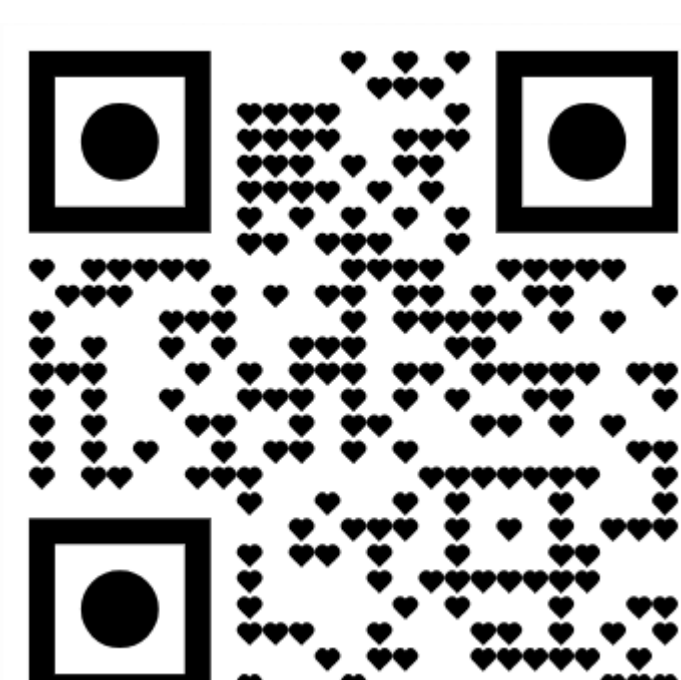
 Setting: Major gap in Primary Care models.

 Trigger: Surprise Question is common but needs objective support

Conclusions

 Standardizing referral triggers is the first step toward universal and equitable palliative care access.

References



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