Symptom Assessment Scale (SAS) + Palliative Care Problem Severity Score (PCPSS)

Funded under the National Palliative Care Program and is supported by the Australian Government Department of Health and Ageing
Symptom Assessment Tools

Symptom assessment using the PCPSS and the SAS

- Palliative Care Problem Severity Score
- Symptom Assessment Scale
Palliative Care Problem Severity Score (PCPSS)

Overview

• A **clinician rated** score of palliative care problems

• A summary measure of problems in four domains:
  - Pain
  - Other symptoms
  - Psychological/Spiritual
  - Family/Carer
How to Assess PCPSS

The score for PCPSS are:

- **0**: Absent
- **1**: Mild
- **2**: Moderate
- **3**: Severe
How to Assess PCPSS

Pain
• Overall assessment of the severity of pain

How much of a problem is pain for this patient?
### How to Assess PCPSS

### Other Symptoms
The overall severity of problems relating to symptoms. The following list may be used as a guide:

<table>
<thead>
<tr>
<th>Nausea/vomiting</th>
<th>Confusion/delirium</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anorexia</td>
<td>Dyspnoea</td>
</tr>
<tr>
<td>Itchiness/irritation</td>
<td>Oedema</td>
</tr>
<tr>
<td>Constipation/diarrhoea</td>
<td>Incontinence</td>
</tr>
<tr>
<td>Wound/ulcer</td>
<td>Weakness/fatigue</td>
</tr>
</tbody>
</table>
# How to Assess PCPSS

## Psychological / Spiritual

The overall severity of problems relating to psychological or spiritual problems of the patient.

The following list may be used as a guide:

<table>
<thead>
<tr>
<th>Anxiety/fear</th>
<th>Request to die</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger</td>
<td>Agitation</td>
</tr>
<tr>
<td>Depression/sadness</td>
<td>Confusion</td>
</tr>
</tbody>
</table>
The overall severity of problems relating to family or carer.
The following list may be used as a guide:

Family/Carer

<table>
<thead>
<tr>
<th>Cultural</th>
<th>Family/carer accommodation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anger</td>
<td>Sensory impairment</td>
</tr>
<tr>
<td>Financial</td>
<td>Unrealistic goals</td>
</tr>
<tr>
<td>Denial</td>
<td>Caregiver fatigue</td>
</tr>
<tr>
<td>Non-English speaking</td>
<td>Legal</td>
</tr>
<tr>
<td>Difficult communication</td>
<td>Family/carer conflict</td>
</tr>
</tbody>
</table>
Symptom Assessment Scale (SAS)

Overview

A patient rated tool assessing individual symptom distress

Seven items are the most common symptoms

Symptoms may be added
Symptom Assessment Scale (SAS)

- Appetite problems
- Fatigue
- Pain
- Bowel problems
- Nausea
- Breathing problems
- Difficulty sleeping

7 Symptoms
How to Assess the Symptom Assessment Scale

A score of zero (0) would indicate the symptom is absent.

A score of 10 (10) would indicate you are having the worst possible experience with that symptom.

None at all

Worst possible
How to Assess the Symptom Assessment Scale

Questions and Communicating SAS

“Yesterday you told me that you were sleeping rather well and you gave a rating of 2. Are there any changes today?”

“Are your bowels still troubling you? The last few days you’ve given a rating of 6 or 7. Have the new medications helped ... What is the score today, 0 being not causing distress and 10 being the worst distress possible?”
How to Assess the Symptom Assessment Scale

Proxy assessment

- If the patient experiencing symptoms is unable to rate symptom distress, a proxy can be used.
- A proxy is someone who can answer the SAS items from the patient’s perspective.
How to Assess the Symptom Assessment Scale

Questions and Communicating SAS

“I’m not observing any signs of distress relating to pain from your mother today. Do you feel that a score of 0, being no pain, is correct or have you observed signs of distress that could be related to pain?”
## The Differences

<table>
<thead>
<tr>
<th>PCPSS 0 -3</th>
<th>SAS 0-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinician Rated</td>
<td>Patient Rated</td>
</tr>
<tr>
<td>Summary of problems in 4 domains</td>
<td>Degree of distress relating to individual symptoms</td>
</tr>
<tr>
<td>Identifies overall priorities of care</td>
<td>Identifies patient priorities relating to individual symptoms</td>
</tr>
<tr>
<td>Includes family/ carer assessment</td>
<td>Patient assessment only</td>
</tr>
<tr>
<td>Includes psychological / spiritual assessment</td>
<td>Psychological or spiritual symptoms can be added to the scale and individually assessed</td>
</tr>
</tbody>
</table>
The assessments are undertaken:

- A minimum of daily in the inpatient setting
- At contact in consultative or community settings (phone or face-to-face assessment)
- At phase change
Thank You

For further information please view the resources contained in the PCOC Assessment Toolkit, go to [www.pcoc.org.au](http://www.pcoc.org.au) or contact your Quality Improvement Facilitator

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