Palliative & Serious Illness Care Grantmaking

Foundations Responded: 37

Geographic Focus of Funding:
- Local: 76%
- Regional: 52%
- State: 49%
- National: 18%
- Multistate: 18%
- International: 3%

Financial Commitment over Past 5 Years:
- $0 - $100,000: 12%
- $101,001 - $500,000: 12%
- $500,001 - $1,000,000: 15%
- $1,000,001+:

Strategies Include Focus on Racial Equity:
- Yes: 63%
- No: 31%

Years of Grantmaking:
- Less than 1 year: 3%
- 1-3 years: 18%
- 4-6 years: 6%
- 7-10 years: 24%
- 10+ years: 49%

Better health through better philanthropy
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Support provided by grants from The John A. Hartford Foundation, The Fan Fox and Leslie R. Samuels Foundation, Stupski Foundation, and Gary and Mary West Foundation.
**TOP FUNDER INTERESTS**

### #1

**ACCESS TO HIGH QUALITY, AFFORDABLE, COST-EFFECTIVE CARE**
Funders focused much of this work on low income, vulnerable, and/or under-resourced communities and populations.

### #2

**CARE AND QUALITY OF LIFE FOR OLDER ADULTS**
Funders typically viewed palliative and serious illness care to improve care and quality of life for older adults, with several including it as a strategy to help older adults age in community.

### #3

**PALLIATIVE, HOSPICE, AND END-OF-LIFE CARE PROGRAMS AND INTERVENTIONS**
Funders specified that educating and supporting health care providers was the primary funding strategy of this work.

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**Funding PATIENT-CENTERED CARE, often with attention to seriously ill persons, and FAMILY CAREGIVING were also common frameworks.**

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**TOP 10 ISSUES OR STRATEGIES OF INTEREST TO FUNDERS**

<table>
<thead>
<tr>
<th>Issue</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Connecting Patients with Social Supports</td>
<td>47%</td>
</tr>
<tr>
<td>Policy Advocacy</td>
<td>44%</td>
</tr>
<tr>
<td>Palliative Care</td>
<td>35%</td>
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<tr>
<td>Family Caregiving</td>
<td>35%</td>
</tr>
<tr>
<td>Complex or High Cost/Needs Patients</td>
<td>32%</td>
</tr>
<tr>
<td>Workforce Development</td>
<td>32%</td>
</tr>
<tr>
<td>Improving Health Care Quality</td>
<td>32%</td>
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<tr>
<td>Provider Education</td>
<td>26%</td>
</tr>
<tr>
<td>Social Isolation</td>
<td>26%</td>
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<tr>
<td>Chronic Care Management</td>
<td>26%</td>
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