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Improving advance care planning in primary care

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Background:

Patients that received advance care planning encounters are less likely to receive intensive therapies and more likely to receive referrals for hospice services. Advance care planning is also associated with increased patient and caregiver satisfaction due to patients receiving care that is concordant with their goals and values.

Rationale:

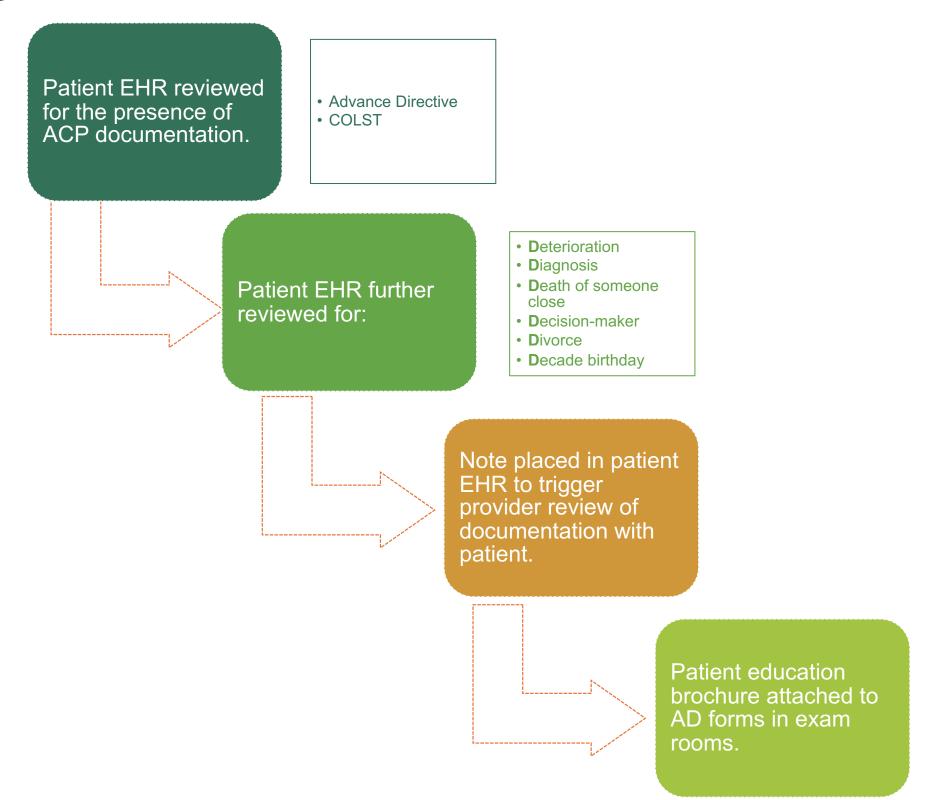
- Improving participation in advance care planning is a process that includes both patients and providers.
- Advance Care Planning should be integrated into routine care.
- Advance Care Planning should be revisited every time a person's medical condition changes.

Specific Aims:

- 1. Improve the process for reviewing Advance Care Planning documentation in primary care.
- 2. Increase access to patient education regarding ACP documentation within the primary care setting.

Methods:

200 primary care charts reviewed, 74 patients met inclusion criteria: identified by ACO as moderate-very high utilizer of health care resources, 65 years or older, and diagnosed with COPD, CHF, and/or DMT2.



Improving Advance Care Planning in Primary Care Margaret M. Jones, DNP (c), RN **University of Vermont**, **Department of Nursing** Project Advisor: Marcia Bosek, DNSc, RN Site Advisor: Margaret Aitken, DNP, APRN

Pre-Intervention Assessment: Conclusions & Implications 98.6% (n=73) of patients met criteria for review of ACP 37.5% (n= 27) had an Advance Directive • 18.1% (n= 13) had a COLST form **IENTATION** nature and longer appointment times. Annual Wellness Visits is needed.

ACP DOCUM	REVIEW	EASONS TO	R
			DEATH OF SOMEONE CLOSE
			DIVORCE
			CHANGE IN DECISION MAKER
			DETERIORATION
			NEW DIAGNOSIS
			DECADE BIRTHDAY
¹⁵ Numb	10	0 5	
4			

Thus, the most common reasons to review ACP documentation were decade birthday (n=34) and deterioration (n=33).

Post-Intervention Results:

- Data collected September 2020-December 2020
- 1.4% (n=1) increase in updated advance directives
- 7.04% (n= 5) increase in updated COLST forms
- 77.8% of ACP patient education took place during Annual Wellness Visits
- 22.2% of ACP patient education took place during chronic disease management visits
- 39 advance care planning patient education brochures were distributed



You might think of it as a ving document—one that ou can adjust as your ituation changes because of new information or a change in your health



HOW TO UPDATE YOUR ADVANCE DIRECTIVE:

- your healthcare provide and healthcare agent

VERMONT ADVANCE DIRECTIVE REGISTRY PO Box 2789 Westfield, NJ 07091-2789

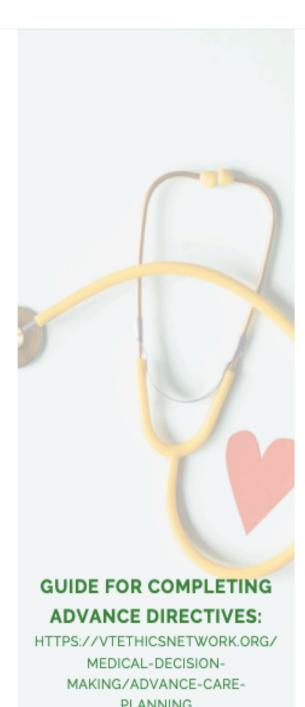
Patient education brochure created during intervention.

er of Patients

Complete your Vermo Advance Directive form . If you are making a change to your Advance Directive attach it to the Authorization to Change

Send your documents to the Vermont Advance Directive Registry. Give updated copies of your Advance Directive t

FAX: 908-654-1919



WHY REVIEW YOUR ADVANCE DIRECTIVE

It is important to review vo time. You might want to change your preferences f care if your health or livi situation changes

WHEN TO REVIEW YOUR ADVANCE DIRECTIVE?

The 6 D's for Reviewing you dvance Directive

- Decade birthdays
- Receiving a new diagnos
- Death of family or friend
- Changes in your designat

National Institute on Aging, 2020, Advance

Select References:

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Chart review for health deterioration and decade birthday, prior to Annual Wellness Visits, are efficient ways to screen patients for the need to discuss ACP. Chart review for signs of deterioration could potentially be conducted by RNs or RN students. Medicare Annual Wellness Visits are an effective time to discuss ACP with patients due to their routine The RN Care Manager, whom participated in conducting Annual Wellness Visits during the intervention period, is a key team member to involve in the creation of improved ACP review processes. More specific documentation of ACP review during Creating community-based ACP education

opportunity for patients may be helpful in increasing access to patient education.