

Power to the People

Patient Education for Advance Care Planning



Power to the People: Patient Education for Advance Care Planning



Background

A northern plains health care system encompassing a 300,000 square mile footprint, embraced an initiative to have 50% of adults place an advance care plan on record by July 2018. The initiative included:

- Adopting a single simplified version of an Advanced Care Plan (ACP) form for approved use in several states.
- Promotion of ACP in primary care offices.
- Training facilitators to assist people in community classes or individually in primary care clinics or hospitals.

Need Identified

A comprehensive guide was needed for use by both the health care team and persons interested in pursuing advance care planning for use across the entire health system.

- Patients received several loose resources to use while creating an advance care plan.
- Facilitators identified a need for more information about medical options for end-of-life care and requested a more streamlined way to present the material.

Goals

As part of the larger initiative, Patient Education will:

- 1) Empower patients to create an Advance Care Plan by:
 - Creating educational materials which better inform patients about end-of-life health care options.
 - Encouraging patients to fill out an Advance Care Plan form by making it readily available.
- 2) Support organizational standards by providing materials that are:
 - Easy-to-read.
 - Affordable as a print resource.
 - Accessible as a web resource.

Methods

- 1) A work team met via Skype and communicated by email between meetings.
- 2) Identified barriers and potential solutions for successful ACP completion.
 - Increased font size to make easier to read.
 - Included ACP form within the book instead of as a separate piece.
 - Provided more health information after receiving feedback from ACP classes.
- 3) Evaluated class curricula and materials from all regions, looking for commonalities and opportunities to standardize written materials.
- 4) Collaborated with Marketing to make the book attractive and inclusive to varied populations.

Results

An ACP booklet was designed to be used in a classroom, in a one-to-one appointment, or be self-directed. The topics covered are shown in the table of contents below.

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Conclusion

The Advance Care Planning booklet has achieved the quadruple aim in these ways:

- 1) Patient satisfaction is enhanced as the booklet empowers them to convey their wishes for end-of-life care.
- 2) Clinical outcomes are strengthened as interventions reflect the person's wishes for end-of-life care as noted in the ACP booklet.
- 3) Staff has easy access to a complete document. Increased satisfaction and decreased moral distress has been realized in their efforts to support the person's wishes.
- 4) Health care costs are decreased when wishes are clearly outlined in the document. Additionally, the ACP booklet can be provided at a cost of less than a dollar.



Acknowledgements

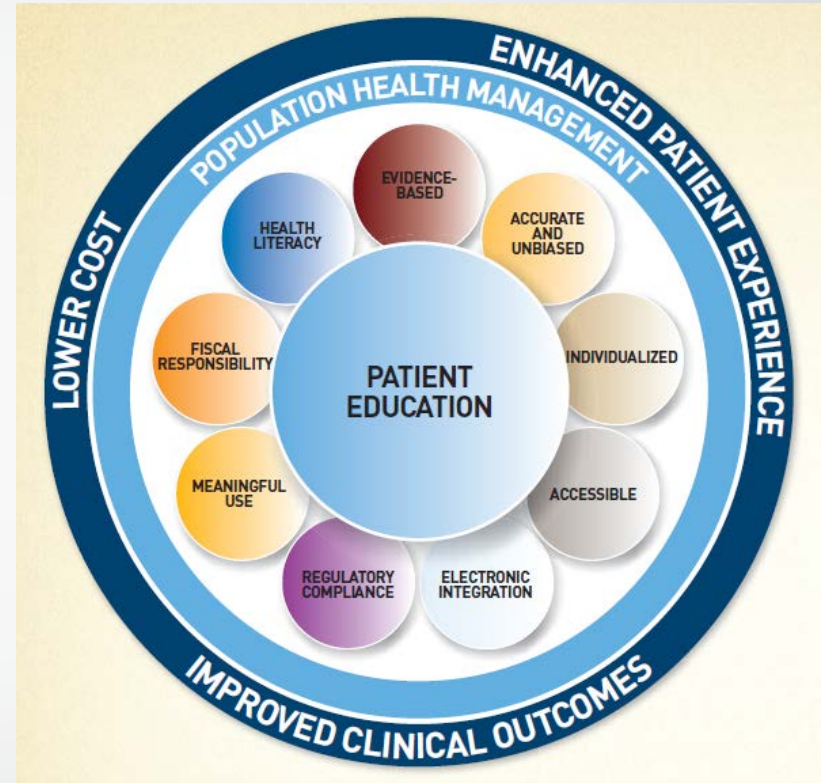
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About Sanford Health

- Northern plains integrated healthcare system primarily in ND, SD, and MN
- 300,000 square mile footprint
- 28,000 employees

Patient Education Sanford Standard

- Enhancing the Patient and Staff Experience
- Strengthening Clinical Outcomes
- Lowering Costs



Patient Education Sanford Standard

- Began as a way to differentiate among
 - Patient Education
 - Patient Information
 - Patient Marketing
- Corporate endorsement at the highest levels

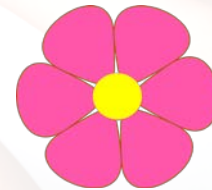
Advance Care Planning Sanford Standard

- Goal: 50% of adults with an ACP in place by July 2018 using a 3-pronged approach
 - Physician and staff education
 - Building the EMR to better use ACP
 - Patient and Community Education

Overall ACP Education Plan

- Promote ACP conversations in primary care by developing a CBT for providers
- Train facilitators to assist people in community classes or individually in primary care clinics
- Create an ACP form and booklet that includes instructions for use throughout the enterprise

An ACP Gives
Health Care
Power to the
People



Need for New Materials Identified

Facilitators in each region identified challenges in filling out the ACP

- ACP forms varied from state to state
- Supportive materials varied
- Patients received several resources to use while creating an ACP
- Patients asked for more treatment option information

Goals for Patient Education

- 1) Empower patients to create an Advance Care Plan by:
 - Creating educational materials which better inform patients about end-of-life health care options
 - Encouraging patients to fill out an Advance Care Plan form by making it understandable

Goals

- 2) Support organizational standards by providing materials that are:
 - Easy-to-read
 - Affordable as a print resource
 - Accessible as a web resource

Happiness is



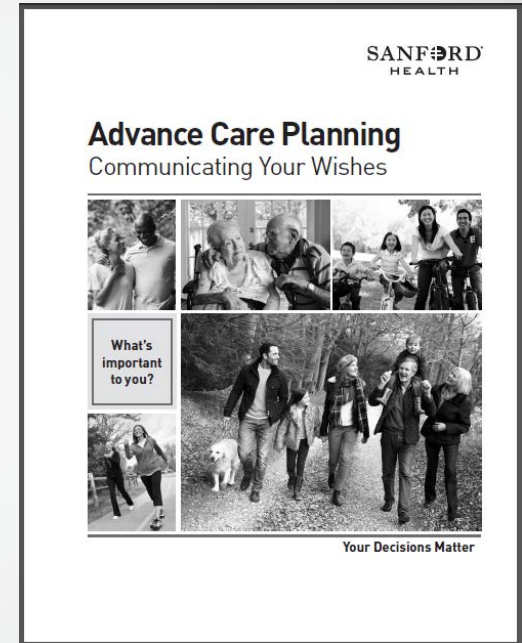
an ACP

Methods

- Evaluated class curricula and materials looking for commonalities, opportunities to standardize, and any potential barriers
- Skype meetings with enterprise members
- Collaborated with Marketing to make the book attractive and affordable

Results

- An ACP booklet was designed to be used in the classroom, in a one-on-one appointment, or be self-directed.



Having an

ACP is

GROOVY!

Conclusion

- Patient Satisfaction is enhanced as using the booklet empowers them to convey their wishes for end-of-life care

Conclusion

- Clinical outcomes are strengthened as interventions reflect the person's wishes for end-of-life care as noted in the ACP document

Conclusion

- Staff has easier access to a complete document.
 - Increased satisfaction and decreased moral distress has been realized in their efforts to support the person's wishes
 - Staff without special training can use the book to assist patients with questions about ACP

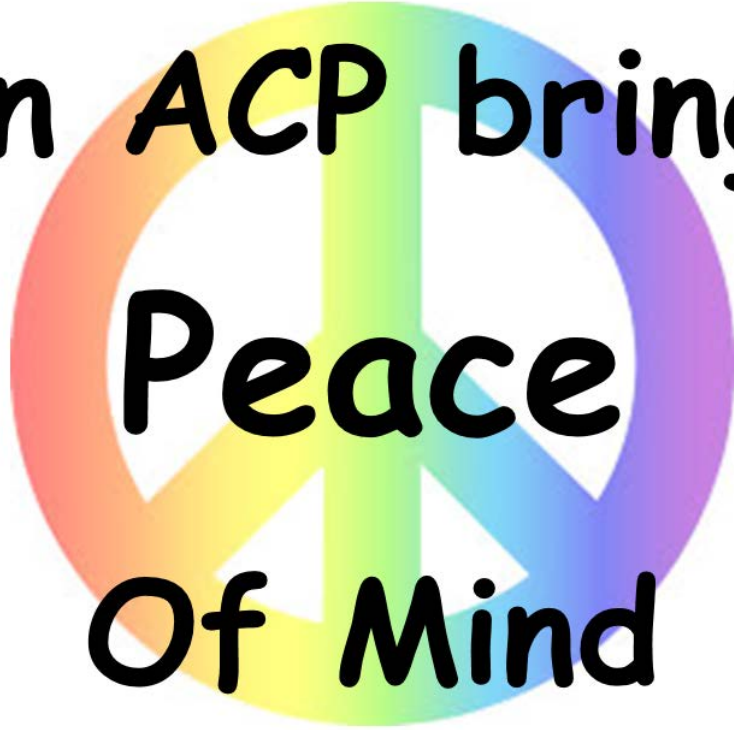
Conclusion

- Health Care costs are decreased when wishes are clearly outlined in the document
- The ACP booklet can be provided at a cost of less than a dollar and is available online as a PDF

An ACP brings

Peace

Of Mind





Having fun presenting the tough topic of Advance Care Planning

