Advance Care Planning in Chronically Ill Patients with an Episodic Disease Trajectory in the Acute Care Setting

Molly T. Williams

Johns Hopkins School of Nursing
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Abstract

Background and Purpose: Advance care planning (ACP) is a fluid discussion between patients and providers to define preferences for future medical care. In the acute care setting, ACP is limited due to no structured process for identifying persons who may benefit from ACP. This quality improvement project aimed to increase the frequency of ACP discussions and documentation of preferences by targeting geriatric patients with an episodic disease trajectory for ACP.

Methods: This project used an intervention and comparison group design to target English-speaking, geriatric adults at a large academic medical center in a metropolitan city with a diagnosis of NYHA class III/IV HF and/or GOLD criteria III/IV COPD for ACP discussions. The intervention group was compared to a group with a range of diagnoses who were approached in a non-systemic way.

Results: A total of 20 participants who met inclusion criteria were recruited on a geriatric unit. Thirteen patients completed the intervention as 7 patients were discharged prior. Results showed a non-significant increase in the number of patients who participated in an ACP discussion when targeted with a diagnosis of HF and/or COPD with a prevalence of 100%, compared to 75% in the comparison group (p=0.131), as well as a non-significant increase in the number of ACP tools documented in the EHR with a prevalence of 53.8%, compared to 30% in the comparison group (x=1.877, p=0.171).

Conclusions: This project demonstrated the effectiveness of targeting patients with an episodic disease trajectory for ACP conversations.

Implications: By providing a framework for targeting patients for ACP, the dialogue between patients and providers was advanced, allowing for patients’ medical preferences to be known.

Keywords: Advance care planning, HF, COPD, geriatric, episodic disease trajectory
References


