

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

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Introduction

- Advance care planning (ACP) defines preferences for future medical care
- Limited in acute care due to no structured process for identifying patients who may benefit
- RecPatients with episodic disease trajectory experience high symptom burden and are at increased risk of death
- HF and COPD patients engage in ACP less often despite frequent hospitalizations and willingness to engage in medical decision making

Purpose

Determine if targeting geriatric patients with an episodic disease trajectory increases the frequency of ACP conversations and documentation of preferences in the EHR

The **aims** of the study included:

1. Increase ACP discussions
2. Increase documentation of ACP tools in EHR

Methods

Design and Setting: Intervention and comparison group at a large academic medical center in a metropolitan city in the southeastern United States

Intervention: Provided framework for targeting patients for ACP by utilizing a process already in place to train students in conducting ACP conversations

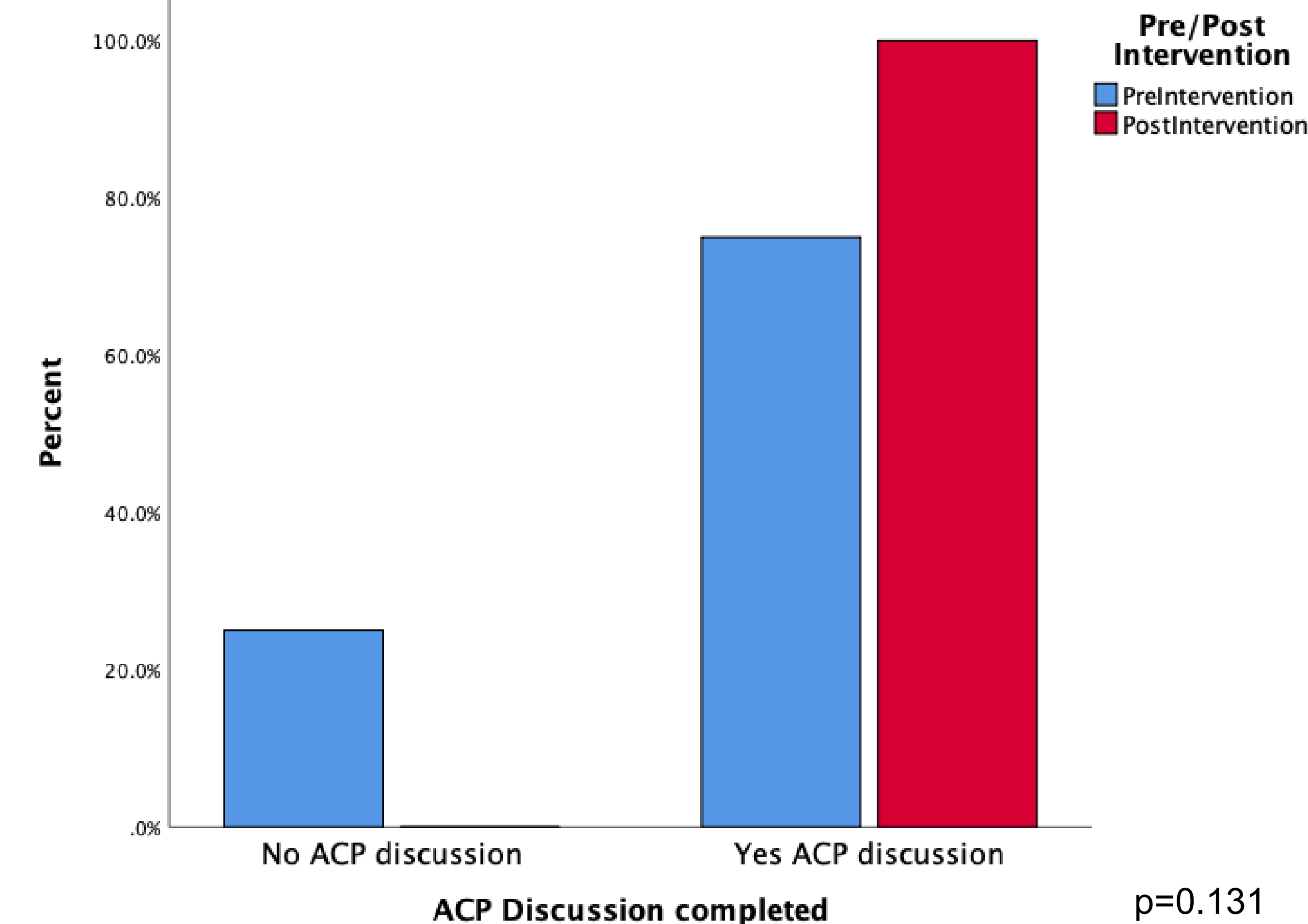
Sample: English speaking adults over the age of 18 on a geriatric unit with a diagnosis of NYHA class III/IV HF and/or GOLD classification III/IV COPD

Analysis: Fisher's exact Aim 1; Chi square Aim 2

References: 1. Centers for Medicare and Medicaid Services. (2018, June). *Advance care planning*. Retrieved from <https://www.cms.gov>. Curtis, J.R., Wenrich, M.D., Carline, J.D., Shannon, S.E., Ambrozy, D.M., & Ramsey, P.G. (2000). Patients' perspectives on physician skill in end-of-life care: differences between patients with COPD, cancer, and AIDS. *Chest Journal*, 122(1), 356-362. doi:10.1378/chest.122.1.356 2. Fahner, J. C., Beunders, A. J. M., van der Heide, A., Rietjens, J. A. C., Vanderschuren, M. M., van Delden, J. J. M., & Kars, M. C. (2019). Interventions Guiding Advance Care Planning Conversations: A Systematic Review. *J Am Med Dir Assoc*, 20(3), 227-248. doi:10.1016/j.jamda.2018.09.014 3. Waldrop, D.P., & Meeker, M.A. (2012). Communication and advanced care planning in palliative and end-of-life care. *Nursing Outlook*, 60(6), 365-369. doi: 10.1016/j.outlook.2012.08.012

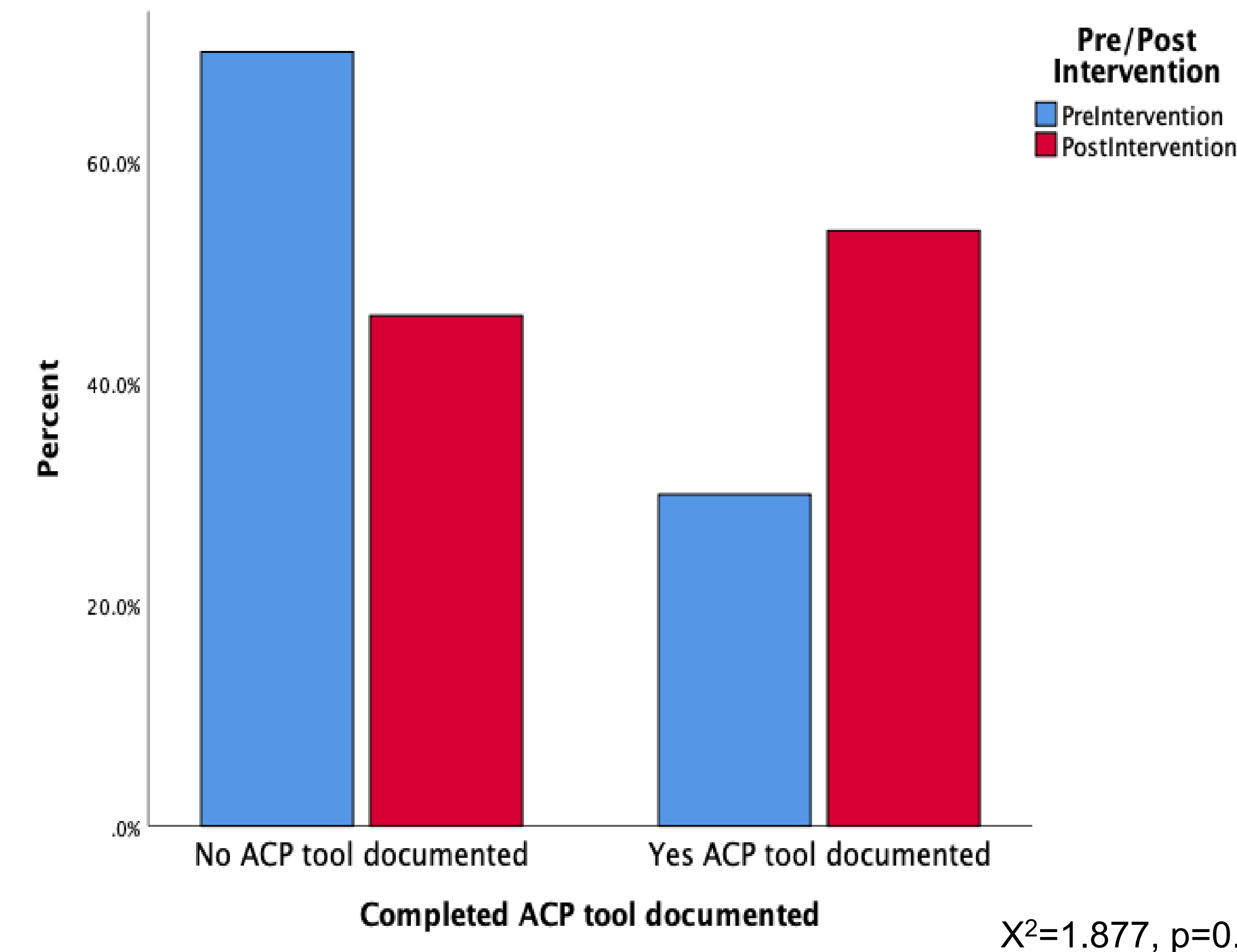
Results

Figure 1. Comparison of ACP discussions conducted pre-and post-intervention



Fisher's exact showed 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% (13/13), compared to 75% (15/20) in the comparison group

Figure 2. Comparison of ACP tools documented pre-and post-intervention



Chi square test showed non-significant increase in the number of ACP tools documented in the EHR when patients with a diagnosis of HF and/or COPD were targeted with a prevalence of 53.8% (7/13), compared to 30% (6/20) in the comparison group

Table 1. Patient Demographic and Health Characteristics

Demographic Characteristics	Comparison Group (N = 20)	Post Intervention Group (N=13)	P value
Age, mean (SD)	77.3 (7.2)	78.3 (7.6)	0.703
Sex, n (%)			0.239
Male	12 (60.0)	5 (38.5)	
Female	8 (40.0)	8 (61.5)	
Race/ethnicity, n (%)			0.215
White	18 (90.0)	10 (76.9)	
Black	2 (10.0)	2 (15.4)	
Native American	0 (0.0)	1 (7.7)	
Medical Diagnosis, n (%)			0.000
HF	5 (25.0)	8 (61.5)	
COPD	1 (5.0)	4 (30.8)	
HF and COPD	0 (0.0)	1 (7.7)	
Neither	14 (70.0)	0 (0.0)	

Conclusion

- Demonstrated the effectiveness of targeting patients with an episodic disease trajectory in the acute care setting
- Resulted in increased ACP conversations and increased documentation of ACP tools in HER
- Providing a framework for targeting patients for ACP advanced the dialogue between patients and providers, allowing for more patients' medical care preferences to be known
- Without these conversations, patients may undergo unwanted medical treatments not in congruence with their care preferences
- Future research should focus more on dissemination of patients' care preferences and less on documentation of the ACP tool itself



ACP conversations up by 25%
ACP tools documented by 23.8%

Clinically Significant

Sustainability

- Target patients of various ages and diagnoses to assess for generalizability
- Disseminate framework to providers as guidance for conducting ACP conversations in the acute care setting

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