Advance Care Planning (ACP) Across the Continuum of Care

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Challenge: Quick, easy access to ACP documents in all care settings

- Multi-stakeholder engagement to reach solution
  - Hospice
  - EMS
  - IPA
  - Providers
    - Hospitalists
    - ED docs
    - Primary Care
    - Hospice/Palliative care
“Flagging” of Patients

If an ACP Document Type is associated with the patient the ACP flag will display.
Click on **Patient Documents** in QHN.
Patient Documents screen opens. Click on Document.
Emergency Response Wishes

Name: Jacque Qwerty Date of Birth 07/09/1982

☐ I want all attempts of resuscitation to be considered in an emergency situation. (Initials: __________)
☐ I want CPR if my heart stops. (Initials: __________)
☐ I want intubation for breathing assistance. (Initials: __________)

☑ I generally wish to decline any medical treatment that does not provide reasonable benefit to my current condition. (Initials: __________)
☑ I do not want CPR if my heart stops. (Initials: __________) DNR
☑ I do not want to be intubated for breathing assistance. (Initials: __________) DNI

The person I appoint to decide my health care treatment if I become unable to make my own decisions (Medical Durable Power of Attorney or MDPOA) is:

Name: Mama Qwerty Phone # 970-123-4567

If that person is unreachable, I appoint:

Name: Daddy Qwerty Phone # 970-234-5678

Your Signature: ☐ Jacque Qwerty Date: 12/14/2016

Power of Attorney if appointed: N/A Date:

Witness #1 (optional): ___________________________ Date:

Witness #2 (optional): ___________________________ Date:

(The witnesses should not be a health care provider or health care employee or a family member or expected beneficiary)

Recommendations:

- Discuss these wishes with your close family members and those persons you will ask to make medical decisions if you are unable to do so.
- Take to your primary physician to sign and upload into Quality Health Network (QHN), the regional health information exchange. Providers note: Instructions for uploading this form are available under the Resources tab, QHN System Tip Sheets, at: www.qualityhealthnetwork.org.
- Keep this in a “butterfly folder” on your refrigerator. This folder is used to notify emergency personnel of your wishes, and may be taken with you if you are admitted to the hospital.
- Complete a Medical Durable Power of Attorney (MDPOA) wallet card with this information. Cards are available at www.hopenwestco.org or at your doctor’s office.

Provider Signature (optional) ___________________________ Date:

NOTE: If patient is in Nursing Home, Assisted Living or Hospital the M.O.S.T. form should be completed.

This form was designed and approved by the Mesa County ACP Project Team 11/2016. Contact HopeWest at 970-257-2388 for more information.
Documents that trigger ACP flag

- Emergency Response Wishes (ERW)
- Medical Durable POA (MDPOA)
- MOST (MOST)
- DNR Order (DNR)
- Power of Attorney (POA)
- Guardianship/Proxy (GUAPProxy)
- Advanced Directive: (a document type that is not one of the above, but is considered an ACP document, e.g.: Five Wishes, CPR Dir., Serious Illness Conversations, etc.)
How to upload documents and naming convention for ACP documents

- ACP Resources and Tip Sheet are located on the QHN website
Emergency Response Wishes form and other Advance Care Planning resources are available here.
Consider the Facts

90% of people say that talking with their loved ones about planning for end-of-life care is important

But

Only 27% have actually done so, or completed advance care planning documents.

60% of people say that making sure their family is not burdened by difficult decisions is “extremely important”

But

56% have not communicated their end-of-life wishes or completed advance care planning documents.

80% of people say that if seriously ill, they would want to talk to their doctor about end-of-life care

But

Only 7% report having a conversation with their provider or completing advance care planning documents.

Source: Survey by the Conversation Project 2013

But this is changing...
A shift in the population and perceptions about the importance of ACP...

- Number of Americans ages 65+ is projected to more than double by 2060.¹
- The 65+ population will rise from the current 15% to 24%.¹
- 34% of total healthcare expenditures are in the last year of life.²
- Avoiding hospital/ICU admissions, during last six months of life would save an estimated 36% of the nation’s healthcare expenditures.³
- For every $1 spent on ACP there is a $2 savings of healthcare cost.⁴
- Only 17% of all ACP documents are signed and scanned into a EHR.⁴
- January, 2016 CMS finalized Medicare payment rules and began reimbursing providers for two 30-minute ACP counseling visits.⁵

www.qualityhealthnetwork.org
In May of 2016 the Colorado Health Foundation launched a $2.75M ACP initiative

The three-year initiative designed to accelerate existing ACP efforts in Colorado and support innovative ACP demonstration projects

Initiative goal: Increase individual and family health engagement through advance care planning
Mesa County ACP Workgroup

- HopeWest established a broad based community coalition to apply for a two-year CHF grant to increase individuals’ confidence and competence in engaging in the healthcare system through:
  
  • Advancing the practice of physicians in palliative medicine concepts, setting care goals, “having the conversation”, and recording this information so it is widely accessible.
  
  • Motivating individuals to engage in the conversations required to execute the documentation for making their wishes known through appropriate use of advance care planning documents.
  
  • Aligning first responders, ED providers and other provider protocols to support respecting an individuals’ end of life wishes in all care settings.
Community Coalition Partners:

- HopeWest (Hospice, palliative care provider)
- Rocky Mountain Health Plans
- Quality Health Network
- The Mesa County IPA
- Mesa County EMS System
- Attorneys specializing in elder law
- The Mesa County Advanced Care Planning Task Force
- LTPAC providers
- ED providers from all hospitals
- CMOs from all hospitals
- FQHC: Marillac Clinic
- Mesa County Health Care Leadership Consortium
Emergency Response Wishes

Name: ____________________________ Date of Birth: ____________

☐ I want all attempts of resuscitation to be considered in an emergency situation. (Initials: _____)
☐ I want CPR if my heart stops. (Initials: _____) DNR
☐ I want intubation for breathing assistance. (Initials: _____) DNI

I generally wish to decline any medical treatment that does not provide reasonable benefit to my current condition and wish to allow a natural death (A-N-D).

☐ I do not want CPR if my heart stops. (Initials: _____) DNR
☐ I do not want to be intubated for breathing assistance. (Initials: _____) DNI

The person I appoint to decide my health care treatment if I become unable to make my own decisions (Medical Durable Power of Attorney or MDPOA) is:

Name: ____________________________ Phone: __________________________

If that person is unreachable, I appoint:

Name: ____________________________ Phone: __________________________

Your Signature: ____________________________ Date: ____________

Power of Attorney if appointed: ____________________________ Date: ____________

Witness #1 (optional): ____________________________ Date: ____________

Witness #2 (optional): ____________________________ Date: ____________

(The witnesses should not be a health care provider or health care employee or a family member or expected beneficiary)

Recommendations:

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- Complete a Medical Durable Power of Attorney (MDPOA) wallet card with this information. Cards are available at www.hopewestco.org or at your doctor’s office.

Provider Signature (optional): ____________________________ Date: ____________

NOTE: If patient is in Nursing Home, Assisted Living or Hospital the M.O.S.T. form should be completed.

This form was designed and approved by the Mesa County ACP Project Team 11/2018. Contact HopeWest at 970-257-2369 for more information.
IPA- ACP work

- 239 Physicians attended CME session on Advanced Care Planning
- These 239 physicians received a copy of Atul Gawande’s *Being Mortal*
- 190 Physicians attended book club
- Practices submitted policy/procedure on obtaining ACP’s
IPA- ACP work

- CME education on ‘Having the Serious Conversation With Your Patient’
- Emergency Response Wishes (ERW) forms were distributed to practices with education on uploading to QHN
- Butterfly folders which include the ERW were also distributed to practices
Advance Care Planning Across the Life Continuum

18+ Years

- Complete a Medical Durable Power of Attorney (MDPOA) - Emergency Response Wishes form.
  - By Colorado law your spouse or other next of kin has no automatic right to make healthcare decisions for you.
  - Avoid using a Medical Proxy – they tend to be messy!

18-65 Years

- Complete Living Will, Five Wishes other guidelines “Serious Illness” documents.

65+ Years

- Complete MOST form.
- Review ACP documents with care provider

Speak to your care provider about uploading your ACP documents in QHN so medical providers can access them in all care settings.


Link to CMS Advance Care Planning coding Tip Sheet: https://qualityhealthnetwork.org/PDFs/AdvanceCarePlanning.pdf
Questions, discussion…