Patrius Health

ADVANCE CARE PLANNING GUIDE

Initiating a conversation with your patients about advance care planning (ACP) can help them feel comfortable, heard and empowered. Use this guide to begin the ACP process with your patients.

STEP 1

Identify patients who are appropriate for ACP conversations. This includes patients who are:

- Completing Annual Wellness Visits
- Scheduled for surgery
- Recently hospitalized with a serious chronic illness
- Expressing interest in ACP

STEP 2

Start the process with these three ACP purposes in mind:

- **Select and prepare a healthcare proxy.** The proxy should be willing to accept the role and understand the patient's preferences for care by being included in conversations.
- **Create a personalized plan based on the patient's cultural and spiritual beliefs.** Address the patient's prior experiences with death and their influence on his or her goals of care.
- **Discuss goals of care in "outcome-based" situations in preferences for life-sustaining care.** Provide specific examples in order to give more meaning. "If you had less than X% chance of recovery or ability to perform Y, would you want Z intervention?"

STEP 3

Document ACP conversation findings. This should include:

- Names of participants
- Reason for discussion
- Voluntary nature of discussion
- Topics discussed
- Documents discussed and/or completed
- Time element

Conversation Tips

In your ACP conversations, keep in mind that your goal is to understand the patient's values and encourage thinking about the future in a non-threatening way. With these ready-to-go messages, you can guide the conversation to meet these goals.

Ask permission to address ACP. Normalize the conversation. Explain that it is part of your process to ensure best care for your patients.

"Now I want to discuss another topic. In order to make sure we meet our patients' needs and give them a voice in their care, I like to ask some questions about how you would want to be cared for if you could not talk to me. Would that be all right?"

When patients are uncertain, slow down and invest in setting up the explanation. Address uncertainties.

"This does not mean I expect anything to happen to you immediately. This is just one of the ways I get to know you so I can give you the best care possible. What questions do you have for me?"

"If you prefer and are more comfortable having a conversation first with your family or members of your faith community, we can provide you with some materials to help you with those conversations. After that, if it is all right with you, I would like to review this topic with you. You can bring the materials back with you to your next visit."

(See helpful resources on the bottom of Page 2.)

When discussing surrogate decision makers, offering multiple choices can help.

"Many of my patients have a hard time picking someone to make decisions for them. They are afraid of putting that burden on a loved one. Does someone come to mind that you feel would be able to speak for you? Spouse, child or religious leader?"

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Frame ACP as hoping for the best while planning ahead to ensure the patient receives the care tailored to his or her goals and values.

"We always hope that we will be able to make decisions for ourselves and be able to express those wishes. But if something were to happen, having your desires already known will give you control over those decisions and relieve others of not knowing what to do."

Present "what if" scenarios to emphasize potential ACP decisions needed for the future and distinguish it from the present.

"What if you were in an accident? Have you ever known anyone who had a stroke and could not speak for themselves? What if this happened to you?"

For additional information on resources related to ACP, visit these websites:

Advance Care Planning

- PrepareForYourCare.org
- TheConversationProject.org
- FiveWishes.org

Advance Directives

- Vimeo.com/198962172
- AdvanceDirectives.com/Mississippi

Physicians Orders for Life Sustaining Treatment (POLST) Information

- POLST.org/Mississippi

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