

Improving Documentation of Advanced Care Planning in the Family Health Clinic: Quality Improvement Project

Desai T.¹, May, L.¹, Davila A.¹, Montanez M.¹, Ross J.^{1,2}, Nadeau M.¹, Weed C.¹, Wood R.¹
1.University of Texas Health Science Center in San Antonio, TX
2.South Texas Veterans Healthcare System San Antonio, TX GEC and GRECC



Background

- Advance directives are mandated by the Patient Self Determination act to be offered and explained to patients upon entrance to any hospital facility.
- The benefit of advanced care planning (ACP) have been shown to improve patient autonomy¹, prevent unnecessary procedures¹ and prevent unwanted hospitalizations.² Despite the benefits, advance directive completion in a clinic setting is low.
- Previous research has shown that lack of time, limited physician training and patients hesitance to discuss the issue contribute to low completion rate. ^{3,4}
- Due to the importance of ACP in patient care, our goal is to increase awareness for patients and residents at the Family Health Center (FHC).

Methods

<u>Setting</u>: Family Health Center (FHC), a residency training site consisting of 37 residents in an urban, low income, minority section of San Antonio, Texas. FHC serves approximately 1600 patients on a yearly basis. Patient demographics are Hispanic 69.5%, Anglo 14.2%, African American 9.6%, Asian 2.1% and Native American 3.4% respectively.

Methods: Pre and Post-intervention data is collected by electronic medical record review of patient charts from specified clinic visits. During our enrollment period, patients > 55 years old were identified and given a patient questionnaire. The patient questionnaire identifies patient's knowledge concerning advance directives and their interest in speaking with their doctor. Questionnaires were made in a yes/no format to easily compute statistics by excel spreadsheet by using the value of 1 for circled answers.

Intervention:

- · Patient education
 - Patient questionnaire to determine patient knowledge base and encourage physician discussion
- · Resident education
- Informed on types of advance directives
- Cause and effect of having an advance directive
- How to communicate with a patient concerning advance directives
- Internet resources for patients
- Cultural influences on end of life wishes
- Advance directive completion
- Created specific clinic visits with increased time length for advance directives
- Created protocol for documenting advance directive completion and discussion on EMR
- Resident gift card incentive for highest completion rates

Results

- Patient Questionnaire Preliminary Results
 - Data based on n=100
- Discrepancies based on patients not answering some questions

Advance Directive Completion Rates

- Pre-intervention AD completion in August 2013 0 total
- Data for AD completion in March 2014 13 total

Patient Questionnaire	Yes	No
Do you know what an Advance directive is?	32%	65%
Is length of life important to you?	88%	11%
Is quality of life important to you?	98%	1%
Have you ever filled out a form stating what your end of life wishes are?	15%	85%
Would you like to talk to your primary care doctor about these issues?	56%	39%
If you needed to talk to a doctor about these things would you prefer a doctor from your same culture?	50%	48%

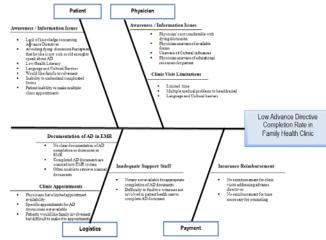


Fig 1. Cause and Effect Fishbone Diagram Analyzing Causes of Low Advance Directive Completion

Conclusion

- Despite interventions, advance directive completion in the FHC remains low
- ullet 2 / $_3$ of patients have a lack of knowledge concerning advance directives
- The majority of patients would like to speak to their doctors about advance directives
- Half of patients would prefer having ACP discussions with a physician of their culture

Future Directions

- Perform EMR review of advance directive completions and discussions
- Provide post-intervention resident survey on their attitudes towards ACP
- Improve logistic obstacles to increase advance directive completion at the FHC