



IPAD: An Intervention to Increase Advanced Care Planning Documentation

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Problem

Melanoma Medical Oncology (MMO) advanced care planning (ACP) documentation rates have remained below institutional goal secondary to lack of continued promotional interventions.

Background

ACP documentation for patients with advanced stage cancer is associated with increased quality of life, less aggressive medical care at end of life, less psychological distress and greater patient satisfaction (Curtis et al., 2018).

Aim

MD Anderson Cancer Center's MMO department will increase advanced care planning documentation by the third routine outpatient visit from 64.3% to 75% during the 12-week project period.

Setting

MMO department at MD Anderson Cancer Center. There is a centralized template for ACP documentation in the electronic health record and all clinicians have had mandated training on utilization.

Method

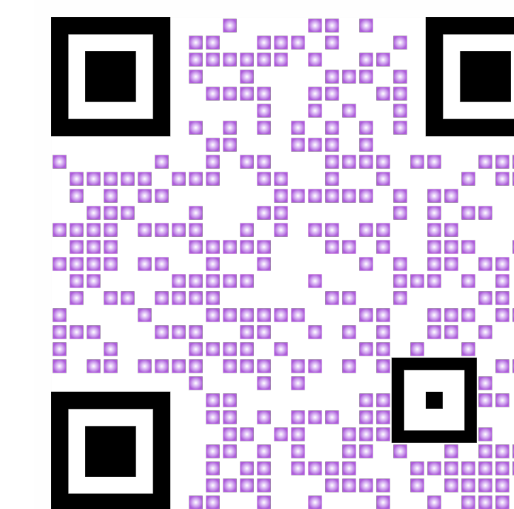
The Plan-Do-Study-Act (PDSA) methodology was used with weekly results displayed on a run chart.

Intervention

IPAD is a self-designed multicomponent quality improvement intervention which stands for:

- **INSTIGATE**
Clinicians are sent an email reminder in advance of an appointment with a patient lacking ACP documentation.
- **PRIME**
Patients without documentation are sent a pre-visit letter in order to better prepare them for the ACP discussion.
- **ASK**
ACP discussion questions are asked during visit.
- **DOCUMENT**
Providers document ACP discussion

Scan QR code for PDF file containing the email prompt and pre-visit letter templates.



References

Curtis, J. R., Downey, L., Back, A. L., Nielsen, E. L., Paul, S., Lahdya, A. Z., ... & Engelberg, R. A. (2018). Effect of a patient and clinician communication-priming intervention on patient-reported goals-of-care discussions between patients with serious illness and clinicians: A randomized clinical trial. *JAMA Internal Medicine*, 178(7), 930-940. <https://doi:10.1001/jamainternmed.2018.2317>

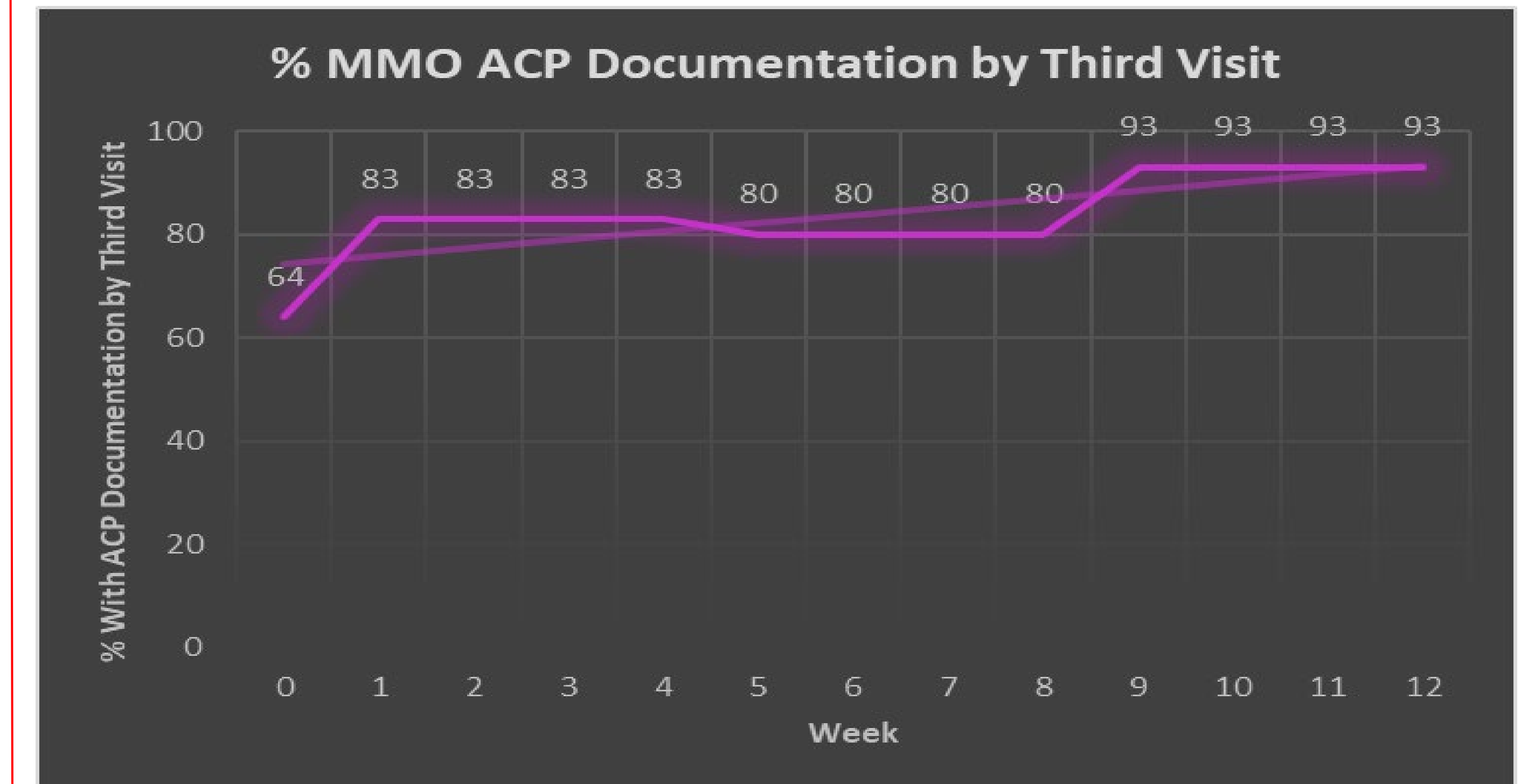


Fig. 1 ACP documentation per week in outpatient Melanoma Medical Oncology department

Results

ACP documentation rates increased from 64.3% to 93% by the completion of the 12 week project. See Figure 1.

Conclusion

A preparatory patient pre-visit letter and clinician prompt system is an effective intervention to improve ACP documentation rates.

Implication

IPAD demonstrates that interventions at the patient and provider levels can effectively address barriers to ACP engagement and highlights the urgent need for quality improvement interventions that do more to assist with integrating ACP into daily practice.