The Problem

- The population is aging. Seniors now make up the fastest-growing age group. As people live longer, many with complex medical conditions, they will face difficult decisions about the use of life-sustaining technologies at the end of life.
- The current research evidence suggests that the absence of communication and planning at the end of life is associated with poorer patient ratings of quality of life in the terminal phase of the illness, lower ratings of satisfaction by their families during the terminal illness, increased family ratings of anxiety and depression long-term and wasted health care resources.

The Proposed Solution

- Advance care planning (ACP) is a process of coming to understand, reflect on, discuss and plan for a time when you cannot communicate and make your own medical decisions. Yet, insufficient numbers of people are engaged in ACP.
- We need to better understand the attitudes towards and barriers to ACP so that we can provide the quality end-of-life experience that everyone deserves while making best use of valuable health care resources.

The Initiative

- The ACCEPT Study is a multi-year, multi-centre, prospective audit of current practice related to advance care planning (ACP) in patients who are at high-risk for dying, as well as their families.
- Using validated questionnaires, ACCEPT examines whether patients have reflected about their attitudes towards life-sustaining treatments, have discussed these issues with family members or healthcare providers and have formally designated a decision maker and written a care plan. In addition, using the validated CANHELP questionnaire, patients and families provide feedback on their satisfaction with end-of-life care.
- In the Fall of 2011, we enrolled over 500 hospitalized elderly patients and/or their families from 12 acute care institutions in Canada. Each participating site received a bench-marked report identify their current practice and access to quality improvement tools to help them assist in improving ACP at their site (see resource page www.advancecareplanning.ca).
- We are currently writing up the results of our first audit. In the mean time, we are planning our next audit in January 2013 and are recruiting additional sites to be a part of this quality improvement collaborative.

Join the Collaborative!

Benefits of joining the collaborative include:

- Receive a benchmarked report of ACP activities in your institution, enabling you to see your strengths and opportunities for improvement.
- Enhance end-of-life communication and decision making for patients and their family members.
- Contribute towards improving health care policy and practice in ACP.

Responsibilities of Participating Institutions:

- Collection of institutional demographic information related implementation of ACP.
- Administer the ACP questionnaires to patients and family members (approx. 30 of each).
- Collect data related to ACP participating patients’ medical charts (e.g. documentation of goals of care discussions and decisions).
- All data is entered into a secure web-based database.

What are you waiting for? Join the ACCEPT Collaborative today!

(for more information see www.thecarenet.ca/ACCEPT)

Please note that there is no cost to participate in this quality improvement initiative. If you would like further information or would like to join The ACCEPT Collaborative please contact: Janet Overvelde, Project Leader

overvelj@kgh.kari.net or Tel: 613-549-6666 x6241