Increasing Advanced Directives in Primary Care

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Most patients want to maintain complete control of their choices in their healthcare decisions, yet few complete advanced directives to retain control of how and who makes their end-of-life decisions. The purpose of this quasi-experimental, descriptive project was to develop standardized interventions to increase the number of conversations and the number of patients over the age 18 who complete an advanced directive (AD) with their healthcare provider in a rural, primary care clinic in Western Kansas. The interventions included patient and provider education, development of useful tools for AD completion, and electronic medical record (EMR) reminders. Data was collected at 3 month intervals prior to and following the project initiation to test the intervention outcomes. As this project revealed, most patients desire to have a voice in their end-of-life healthcare decisions, leading to an increased number of conversations patients have with their primary care provider and completion of their ADs.

Introduction/Problem

- Advance directives (ADs) are a document by which a person makes provision for health care decisions.
- Less than 25% of Americans complete ADs (Bern-Klug & Byram, 2017).
- Despite legislation that mandates healthcare providers ask patients if they have an AD, most healthcare providers do not have AD discussions with their patients (Spoolhof & Elliott, 2012).

Purpose

The purpose of this quasi-experimental, descriptive project was to evaluate if multifocal interventions can improve the number of patients 18 years of age and older with completed ADs. Multifocal interventions included: education for patients and health care providers, tools to complete ADs, and EMR reminders.

Review of Literature

- Only 3.6% of patients reported their primary care provider influenced their decision to complete an AD (Roche-Green et al., 2017).
- 97% of patients wish they could discuss ADs with their physician, but only 23% had the discussion (Bern-Klug & Byram, 2017).
- Estimated savings of implemented ADs for all Medicare patients is approximately 5 billion dollars per year (Sonnenberg, & Sepulveda-Pasci, 2018).
- Healthcare providers need to ensure patients have ultimate control of their future health care by having AD discussions (Chrash, Mulich, & Patton, 2011).

Abstract

This project was completed in a large rural health clinic in Northwest Kansas. The clinic had 19 providers and a patient base of over 10,000 patients.

Methods

Setting/Population

The project found interventions of increased AD education and awareness for both healthcare providers and patients, development of easy-to-use resources, and use of the EMR as a reminder tool were successful. Outcomes included: completion of personal ADs by healthcare providers, increased provider comfort with AD conversations, increased conversations and completions of ADs, and access to the ADs in the EMR.

Procedure

The study was a quasi-experimental, descriptive project which implemented multimodal interventions designed to analyze:

- Assessment of the health care providers’ attitudes and knowledge about the importance of discussing ADs in the primary care setting before and after an educational program using a survey with 19 clinic healthcare providers and their staff.
- Additional factors measured: the number of AD conversations between healthcare providers and patients, the number of AD completions, and the number of ADs placed in the EMR for 3 months before and after implementation of multimodal interventions with over 600 patients.

Results

The project found interventions of increased AD education and awareness for both healthcare providers and patients, development of easy-to-use resources, and use of the EMR as a reminder tool were successful. Outcomes included: completion of personal ADs by healthcare providers, increased provider comfort with AD conversations, increased conversations and completions of ADs, and access to the ADs in the EMR.

Conclusion

- It is critical that providers and patients are educated on the need for AD conversations and completions to assure end-of-life healthcare wishes are honored.
- Now is the time to advocate and teach patients and healthcare providers the role of ADs in better healthcare outcomes with decreased healthcare expenditures.
- Ultimately, the future of healthcare will be enhanced by addressing patient’s end-of-life healthcare choices.

References


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