Implementation of ACP with older persons in primary care

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### Disclosure of speaker’s interests

<table>
<thead>
<tr>
<th>(Potential) conflict of interest</th>
<th>None</th>
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<td>Potentially relevant company relationships in connection with event¹</td>
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<tr>
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<td>Shareholder⁴</td>
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<td>Other relationship⁵</td>
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Today

• Introduction:
  • Setting
  • Research question

• Methods

• Results
  • With which patients?
  • Rise in Advance Directives?

• Discussion

* ACP = Advance Care Planning
ACP in ‘my’ project

• Experiences in West Friesland

• 75 years or older

• Home and Care home (where the GP is still the main physician) ¹

• First conversation: Nurses, certified nursing assistants or practice nurses ²

• Subsequent conversations: GP

¹ GP = general practitioner (or primary care physician), we did not include patients in nursing homes (in which elderly care physicians are the main physician)

² In Dutch: verpleegkundige / EVV’er / POH
Overview of the project

Phase 1
- Exploration

Phase 2
- Implementation to test materials

Phase 3
- Scaling up

Introduction
- Materials in writing
- Training
- Site visits
Research question

With which older patients do primary care providers start ACP conversations?
And does this lead to an increase in advance directives?
Monitor and questionnaire

2 care homes and 10 GP practices

List of patients aged ≥ 75

- Questionnaire
- Monitor

After 14 months update

- Questionnaire

Acp, Age, Sex, Diagnosis.

1 January 1, 2017
2 March 1, 2018
Results monitor

Registered

- 2292 patients (mean age 82 years; 59% female)

ACP

- No offer / conversation: 1696 patients (74%)
- Only with nurse†: 229 (10%)
- Only with GP: 241 (11%)
- With both: 126 (5%)

† Nurses, certified nursing assistants or practice nurses
Results monitor (2)

† P-value < 0.05 for the comparisons on sex, age and diagnosis
Research question

With which older patients do primary care providers start ACP conversations?

And does this lead to an increase in advance directives?
### Results

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<th>Pre</th>
<th>Post</th>
<th>Both</th>
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<tbody>
<tr>
<td>Respondents</td>
<td>1174</td>
<td>1022</td>
<td>649</td>
</tr>
<tr>
<td>Age, mean (SD)</td>
<td>81 (5)</td>
<td>81 (5)</td>
<td>81 (5)</td>
</tr>
<tr>
<td>Sex, female</td>
<td>57%</td>
<td>56%</td>
<td>57%</td>
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<tr>
<td>Married</td>
<td>48%</td>
<td>49%</td>
<td>47%</td>
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Questionnaires; advance directives

Advance Directives

- **no Advance Directive**: 70 pre, 59 post
- **advance euthanasia directive**: 20 pre, 21 post
- **do not recusitate orders**: 13 pre, 17 post
- **form from the GP**: 4 pre, 14 post
- **appointing a proxy**: 3 pre, 5 post
- **refusal of lifesustaining treatment document**: 5 pre, 4 post
- **wish to live statement**: 3 pre, 4 post

Legend: pre - blue, post - orange
Advance Directive in post measurement

Comparison between patients with and without AD; sex

Comparison between patients with and without AD; age

Comparison between patients with and without AD; idea future health problems

P-value < 0.05 for the comparisons on sex, age and diagnosis
Discussion

• Monitor: conversation started with 26%
• More often started with older women with at least one diagnosis
• Rise in Advance Directives from 30% to 41%
• More often older women with an idea about future health problems
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