## Walther Advance Care Planning Systems Integration and Implementation Proposal

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## Abstract:

Goal 1: Integrate ACP documents into electronic health record (EHR) to increase accessibility and facilitate inclusion of ACP documents into Careweb. In order to ensure that patient preferences are honored, it is essential to ensure that current advance care planning documents including the POST (Physician Orders for Scope of Treatment), the Out of Hospital Do Not Resuscitate (OHDNR) form, and advance directives are available to treating clinicians. Research suggests that documentation about patient preferences is missing or inaccurate as often as 70% of the time (Heyland et al., 2013). The Indianapolis Coalition for Patient Safety has a well-established approach for tackling safety issues that will be applied to this issue that will be applied here to achieve integrated ACP documentation. The first step will be to convene stakeholders to identify best practices for ACP documents in EHRs. This will inform the development of a universal standard that will be shared among members for use internally, pilot tested, and refined. This process will also serve to facilitate the integration of ACP into Indiana Health Information Exchange (HIE) by ensuring each system has documents stored in a consistent location and that the system is design to transfer these documents into Careweb. In conversations with IHIE, ACP has been identified as an emerging priority. Once ACP documents are made available in Careweb, educational materials will be developed for use by collaborating health systems with targeted dissemination to cancer care settings. Information about best practices will be disseminated throughout the Patient Safety Coalition network and the Indiana Cancer Consortium membership.

Goal 2: Support tracking of ACP data and outcomes to identify baseline rates and monitor progress over time. In collaboration with the Indianapolis Coalition for Patient Safety, preferred metrics will be identified for health systems to use in tracking the existence of ACP documentation including the legally appointed representatives, POST, OHDNR, and advance directives. Initially, a baseline will be established and then tracked regularly to measure changes over time. These measures will be developed using evidence-based best practices from the literature and national guidelines. Once established, these measures will be shared through the statewide network of Patient Safety Coalitions and the Indiana Cancer Care Consortium.

Goal 3: Develop and disseminate ACP education for providers to support implementation.

ACP educational materials will be adapted and developed for use by health care providers around the state to support high quality ACP implementation. This will include both the development of new materials and the tailoring of existing educational materials for the oncology setting and dissemination to cancer providers in collaboration with the Indiana Cancer Care Consortium network. Additionally, targeted regional training on POST facilitation will be offered for oncology team members and partner clinicians in each community.

Goal 4: Develop and disseminate ACP educational materials for patients and families including tailored materials for the oncology population. An ACP educational video will be developed for patients and families, modeled on the successful POST in Action video for health care providers that was produced by Dr. Hickman through the IU Health Encompass Program. This new video will highlight oncology patients and clinicians. Additionally, culturally sensitive, translated versions of educational materials and ACP documents will be developed to share with non-English speaking populations. Finally, we will develop new and tailor existing patient-oriented resources to oncology populations and disseminate to cancer providers.