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How do health care systems evaluate their Advance Care Planning initiatives? Results from a systematic review

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On behalf of the authors:

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- The authors declare that there is no conflict of interest.

- Advance Care Planning (ACP) initiatives are being implemented across healthcare systems around the world
- No consensus on how to assess the impact and effectiveness of ACP implementation



Alberta, Canada:
population ~ 4 million

“What methods have healthcare systems used to evaluate implementation of ACP initiatives?”

P opulation	Patients, family members, healthcare providers within a defined healthcare system
I ntervention	Conversation-based ACP initiatives implemented in a systematic fashion
C omparison	No ACP initiative
O utcomes	All outcome measures used to evaluate the implementation of an ACP initiative
S tudy design	No restrictions

- Academic databases (n=11; e.g. MEDLINE, Pubmed, CINAHL) and grey literature searched to February 2015
- MeSH terms relating to healthcare systems, advance care planning, end of life care, evaluation, outcome measures, quality improvement, etc.
- Hand-searched reference lists of included articles

Inclusion criteria:

Conversation-based ACP initiative

Implementation across a healthcare system

- >1 medical unit/clinic in an institution or geographic area, OR
- multiple units/clinics/institutions across >1 geographic area

Systematic implementation

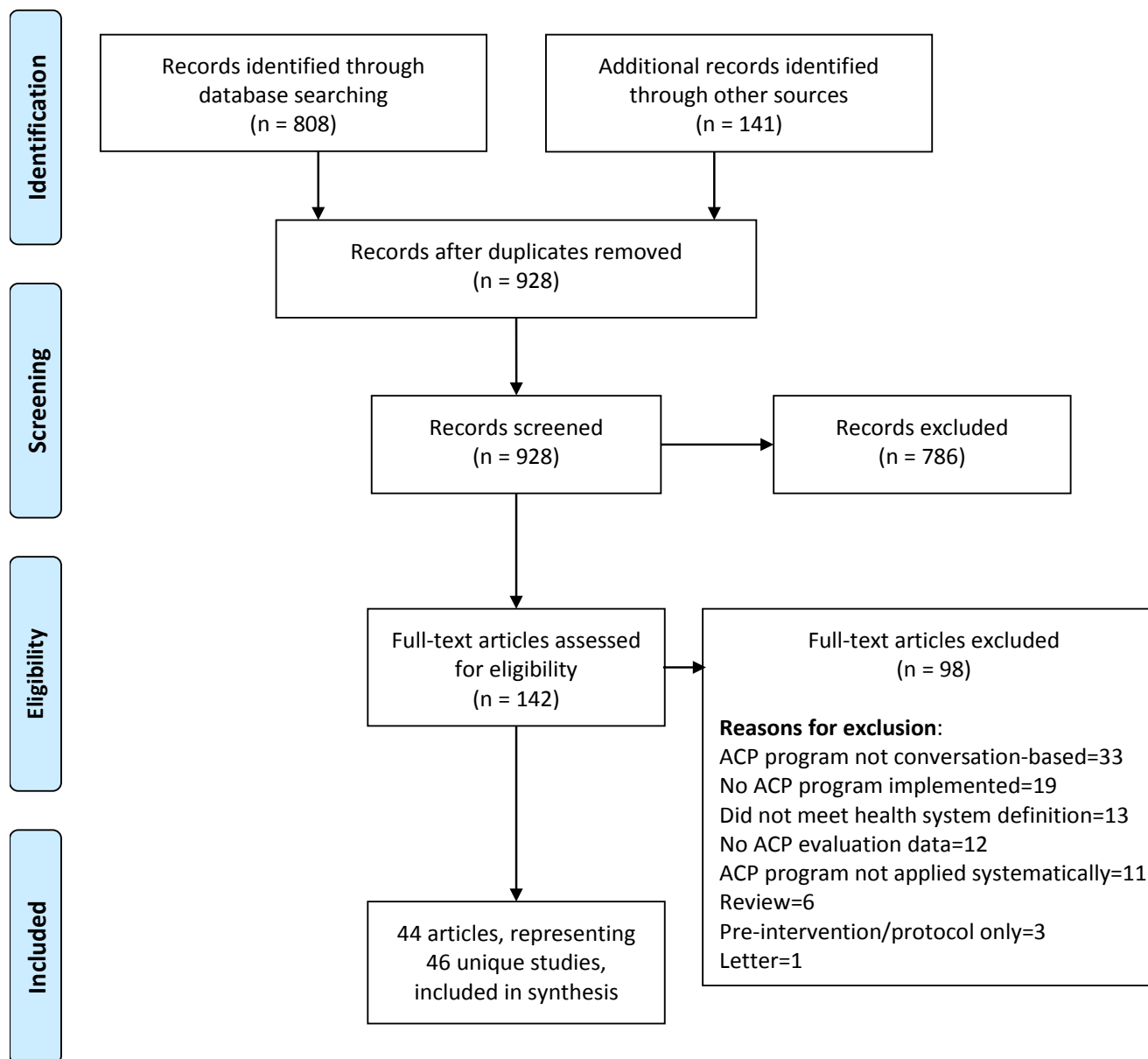
- initiative applied at the institution, unit/clinic, or clinician level

Evaluation framework reported

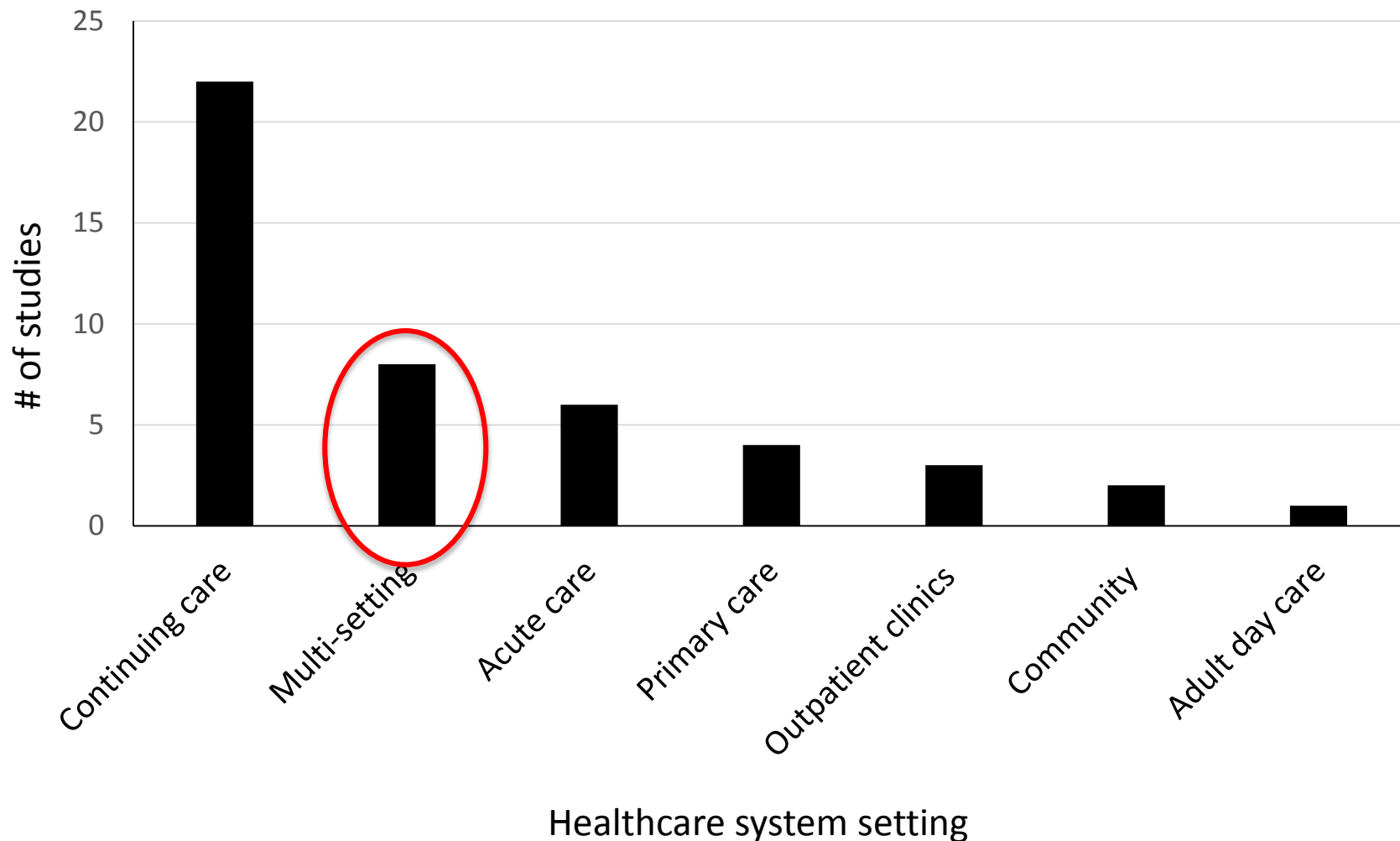
Exclusion criteria:

Non-English abstract

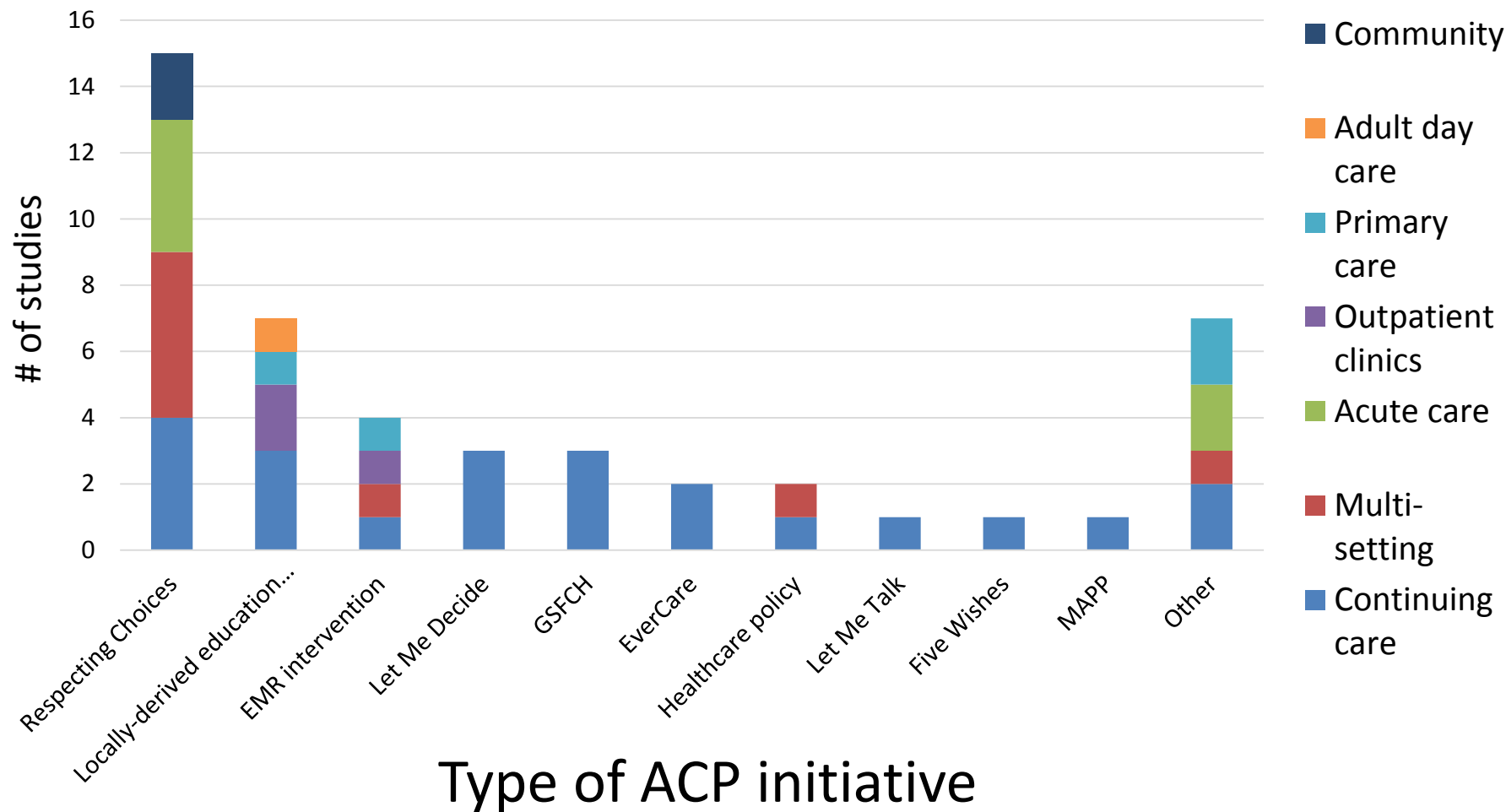
Only pediatric patients



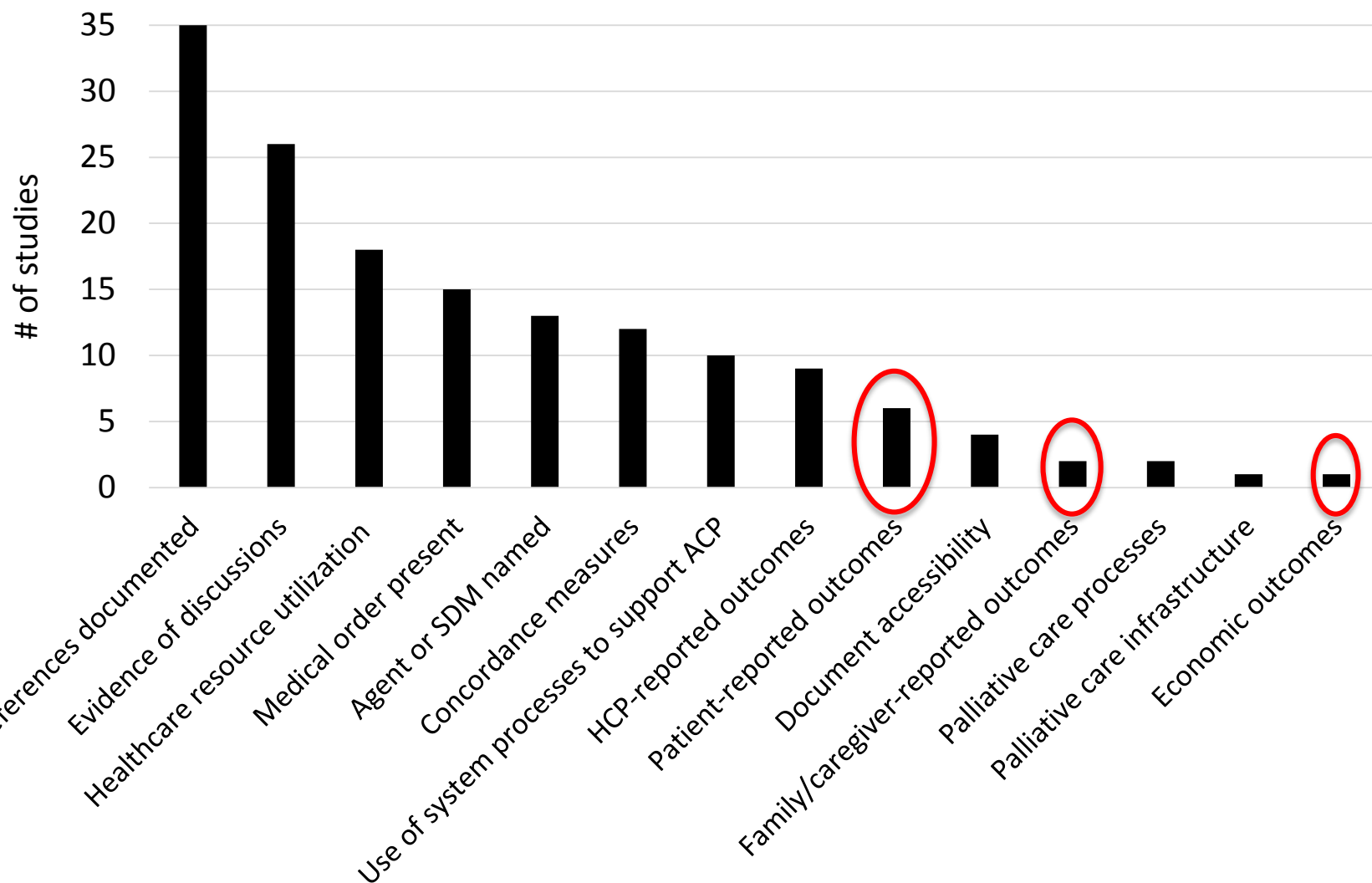
Number of included studies by healthcare system setting



Type of ACP initiative by healthcare system setting



Evaluation outcomes categorized into 14 domains



IOM aims	Donabedian model		
	Structure	Process	Outcome
Safe		A medical order is present in the patient's chart	
Effective	Palliative care infrastructure	<p>Evidence that ACP/AD/EOL discussions have occurred</p> <p>Patient has named an agent/SDM</p> <p>Use of system processes to support ACP</p> <p>Palliative care processes</p>	<p>Concordance measures</p> <p>Patient-reported outcomes</p> <p>HCP-reported outcomes</p> <p>Family/caregiver-reported outcomes</p>
Efficient	Palliative care infrastructure	Document accessibility	<p>Healthcare resource utilization</p> <p>Economic outcomes</p>
Timely		<p>A medical order is present in the patient's chart</p> <p>Document accessibility</p>	
Patient-centered		<p>Patients' EOL treatment preferences are documented</p> <p>Use of system processes to support ACP</p>	<p>Concordance measures</p> <p>Patient-reported outcomes</p>
Equitable			

- Document completion frequently used to evaluate ACP implementation
- Less evaluation across complex, multi-sector healthcare systems
- IOM x Donabedian framework highlights gaps and redundancies
- International dialogue key to developing standards for ACP evaluation

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