In a 2014 study of US adults, “lack of awareness” was the most commonly reported reason for not having an advance directive (AD).

At City of Hope National Medical Center (COH), the Department of Supportive Care Medicine with administrative support and significant institutional collaboration created a patient-and-staff-centric Advance Care Planning program and marketing awareness campaign titled “Plan Today for Tomorrow.”

Medical staff have opportunities to increase AD awareness for patients at key touchpoints in the cancer treatment trajectory.

**METHODS**

Efforts were made to increase staff comfortability with personal completion of ADs. General education was provided through staff in-services, medical grand rounds, and new employee orientations, all with opportunities to complete personal ADs. In addition, education and training were provided to staff at key patient touchpoints, including new patient services and the pre-anesthesia testing clinic. An Advance Care Planning-specific Navigator was available to staff for AD support.

Most recently, during the 2017 National Healthcare Decisions Week, one day was tailored specifically to increasing the number of staff who have completed their own advance directive. A small incentive was made available for non-physician staff who completed their own AD. Free notary services and AD support were made available at multiple locations on the main COH campus and satellite clinics.

**RESULTS**

One day was dedicated to staff outreach and completion of personal ADs during the COH 2017 National Healthcare Decisions Week; **109 staff members completed their own AD.** Staff participants reported greater comfort with the AD conversation, relief of personal burden by completing AD, increased understanding of the document and the importance of completion, and a sense of “practicing what they preach” to patients. Many staff members stated that they had not seen the AD form before the event, and reported increased familiarity with the document. Staff also reported that completing the form was easier than they expected, a sentiment they intended to pass along to patients who were considering AD completion.

**CONCLUSION**

Targeted efforts to engage staff in advance care planning throughout the year can be successful in de-stigmatizing advance directives and increased comfortability with AD conversations. Nominal incentives may be helpful to attract staff to explore advance care planning personally.

Further efforts are needed to embed advance care planning and advance directive completion in the culture of healthcare institutions.

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For further information, contact ACP@coh.org or visit CityofHope.org/advance-directive