

Effectiveness of an Advance Care Planning patient navigator on advance directive completion by electronic versus staff-based referrals at a major cancer hospital

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BACKGROUND

Advance Care Planning (ACP) is a central component of patientcentered care, helping ensure patient values and preferences guide clinical decisions. Patient navigators have been utilized effectively in healthcare for numerous roles. More recently City of Hope National Medical Center (COH) has piloted the utilization of a Navigator specifically for advance care planning (ACP) to support patients, families, and staff with Advance Directive (AD) notarization and primary ACP conversations.

METHODS

The Department of Supportive Care Medicine at COH with significant institutional collaboration and administrative support created a patient-centered ACP program and marketing campaign, called "Plan Today for Tomorrow." In 2016, an ACP navigator joined the team to continue institutional culture change and facilitate an increase in AD completion. Referral to the ACP navigator occurred either through staff endorsement and/or the institution's technological screening platform deployed in a majority of COH outpatient clinics. Staff referrals came from physicians, clinical social workers, nurses, or from the Sheri & Les Biller Patient and Family Resource Center. Concerted efforts were made to increase AD completion at key entry points, including New Patient Services, the Pre-Anesthesia Testing Clinic, and pilots in a variety of patient populations in Medical Oncology and Hematology. Prior to the ACP Navigator, all referrals were addressed by Clinical Social Workers (CSWs).



Staff button for National Healthcare Decisions Week events

PLAN TODAY FOR TOMORROW



CityofHope

Testimonial poster from AD Navigator



TO SHARE YOUR WISHES AND EASE YOUR MIND











Sheri & Les Biller Patient and Family Resource Center Department of Supportive Care Medicine



City of Hope advance directive information poster

INNOVATIVE ACP BUILDING BLOCKS

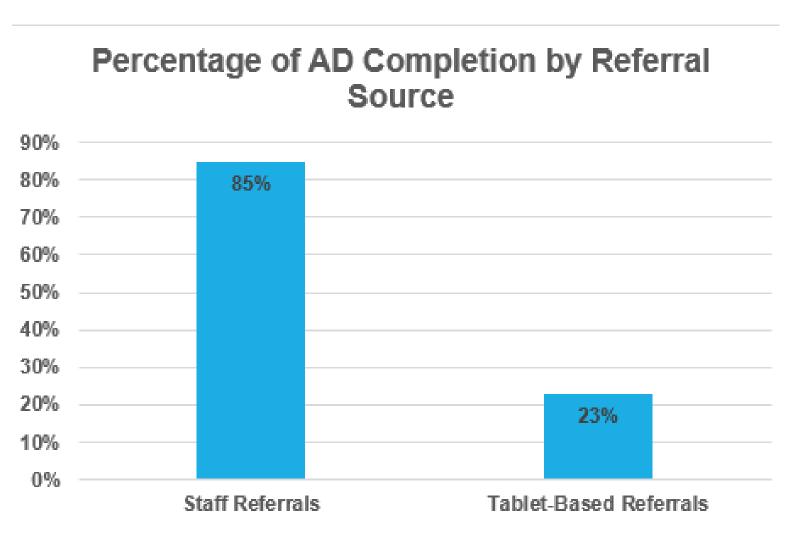
- complimentary patient/caregiver and staff notarization for ADs
- a culturally sensitive branding campaign, "Plan Today for Tomorrow"
- new educational materials
- an Advance Directive Patient Navigator/Notary position to support patients, families, and staff
- disease-specific workflows
- multi-lingual AD workshops and events
- leveraged the electronic medical
- deployed AD specific screening questions in SupportScreen
- recruited and trained multi-lingual staff to provide notary services
- * funded by the Sheri and Les Biller Family Foundation

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RESULTS

In a review of 16 months of data, the ACP navigator followed up on 1,275 referrals, 619 were from staff, while 656 were from the institutional tablet-based screening platform. Follow-up on staff referrals resulted in an 85% AD completion rate. Follow-up on tablet-based screening resulted in a 23% AD completion rate.

Between 2015 and 2016, the rate of AD completion for new COH patients increased from 19.5% to 25.17%. In that same time period, the rate of AD completion for transplant patients increased from 45.3% to 69.5%.



CONCLUSION

Availability of an onsite ACP-focused navigator was more effective in facilitating AD completion of staff generated AD referrals as compared to AD completion of tablet-based patient screening AD referrals.

The presence of an ACP navigator to facilitate AD completion decreased workload for CSWs, creating increased opportunity for CSWs to work at the top of their professional license, and provided staff with the tools to have AD conversations and complete their own ADs, increasing staff's overall comfort level with the ability to have AD conversation. Opportunities exist to increase the effectiveness of AD completion from tablet-based screening referrals



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