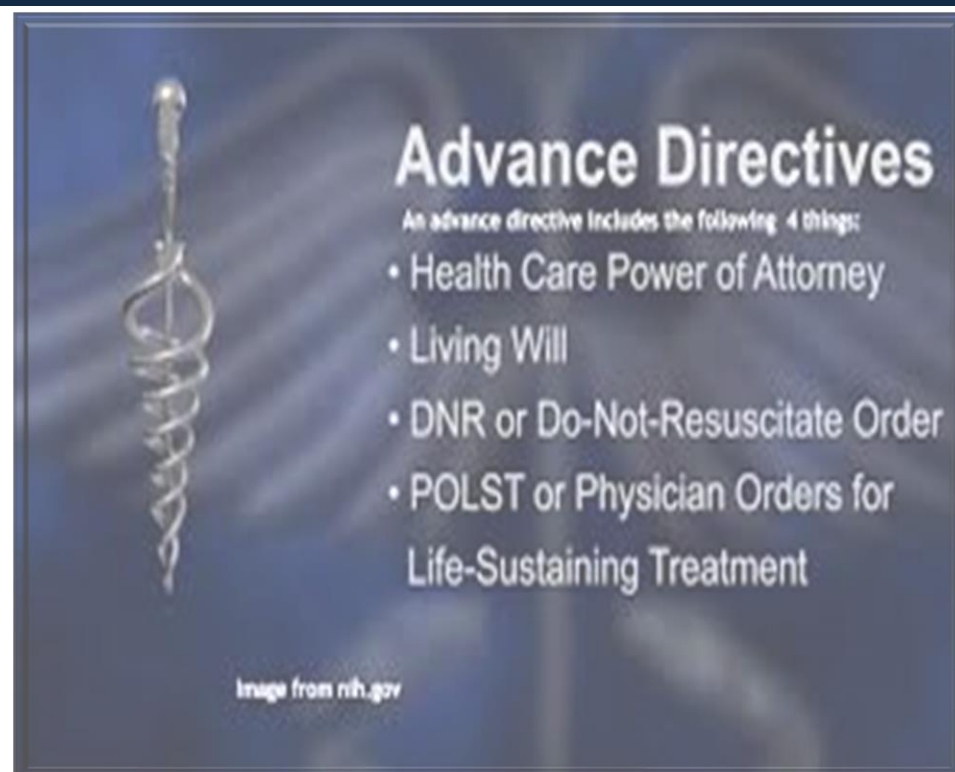


Background and Significance



- Provide autonomy for health care wishes when a person is incapable.
- Lack of advance directives can lead to increased hospitalizations.
- Lack of advance directives can lead to unwanted and ineffective treatments.
- Only 30% of all adults in the United States have advance directives.
- Only 65% of skilled nursing facility residents have an advance directive.
- Only 40% of the residents in a middle TN skilled nursing facility have advance directives.
- 80% of people in U.S. indicate wanting to die at home.
- Only 20% of people in the U.S. die at home.

Purpose of the Quality Initiative

- To educate residents and their families about the importance of advance directives.
- Implement a project to improve completion rates of advance directives.

Methods

Design- Quality Improvement

Setting- Skilled Nursing Facility in Middle TN

Subjects –Inclusion Criteria- Residents without an advance directive

Exclusion Criteria- Residents with an advance directive

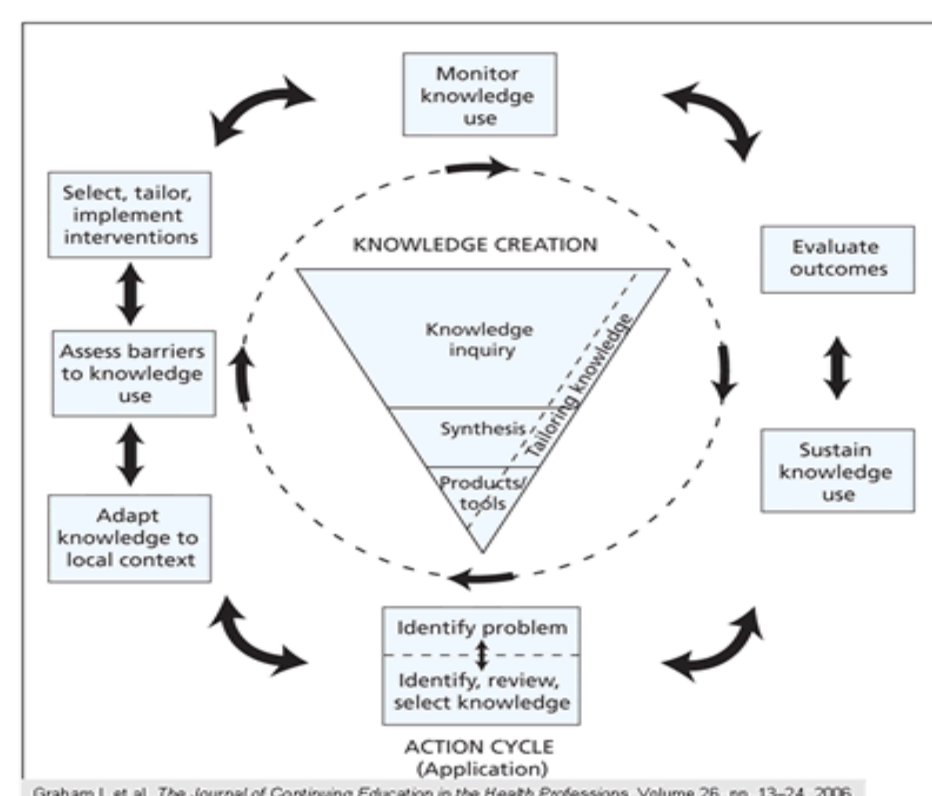
Procedures- Staff education

Intervention- Caring Conversation workbook and Physician's Order for Life Sustaining Treatment (POLST) form

Implementation

- Educated the Social Services Director and the Care Plan Coordinator to advance directives and the Caring Conversations Workbook.
- The Social Services Director reviewed the EHR for the presence of an advance directive for current residents.
- Care plan meetings were offered to those without an advance directive and scheduled for newly admitted residents.
- During the care plan meeting the “Caring Conversations” workbook was reviewed with resident’s and their families.
- Physician Orders for Life Sustaining Treatment (POLST) form was reviewed with resident and their families.
- Resident and family members were encouraged to complete the form during the care plan meeting.
- Advance directives will be addressed at all subsequent care plan meetings.

Framework



Results

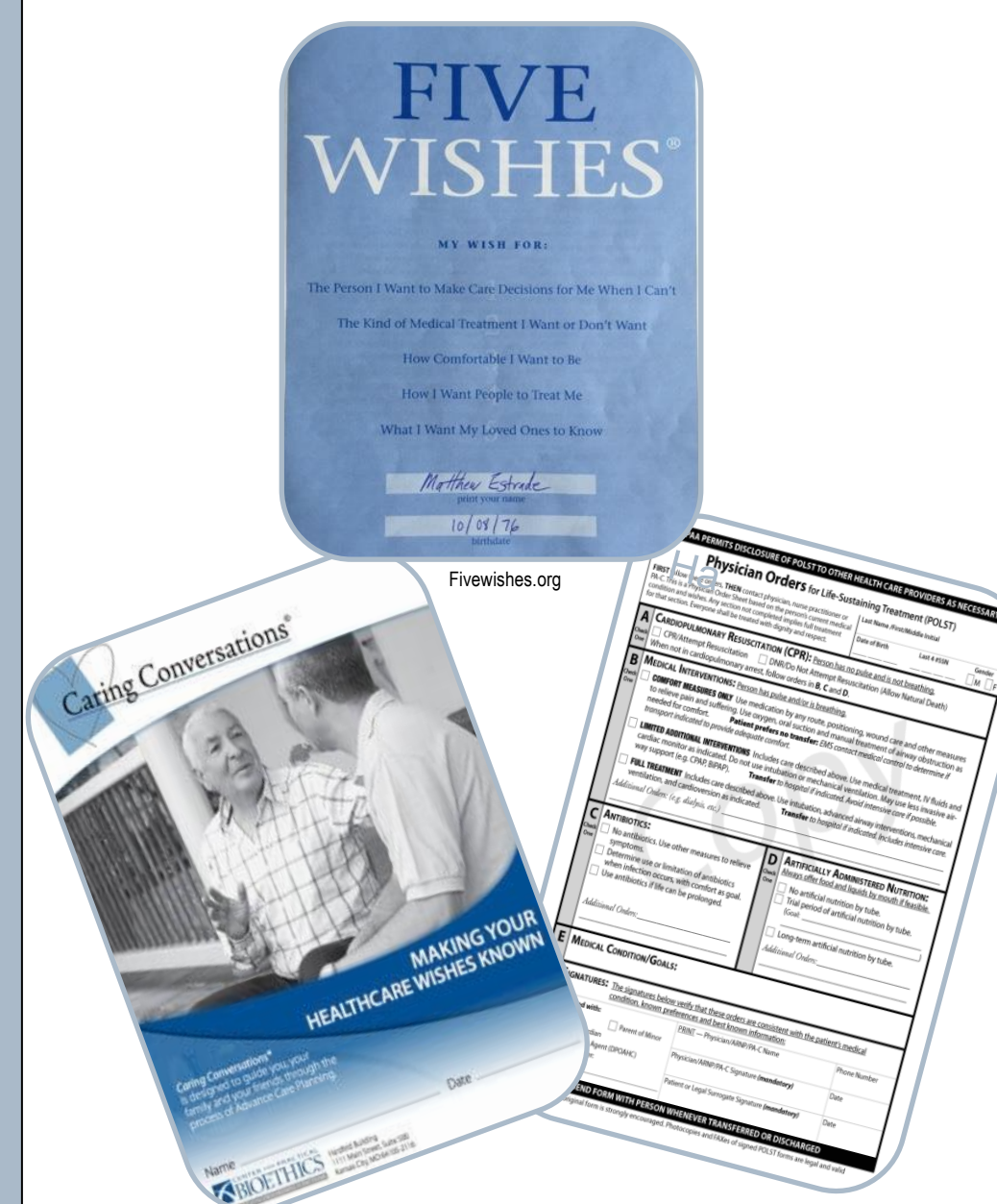
- Results are pending
- Ongoing analysis indicates most residents, and their families are receptive to completing an advance directive.

Limitations

- Some residents and family members were reluctant to discuss death and dying.
- Staff member turnover and having to re-educate staff.

Resources

- National Institute on Aging
- Caring Conversations Workbook
- Five Wishes
- Consumer’s Toolkit for Health Care Advance Planning
- The Conversation Project



Discussion

- Having an advance directive made the resident feel empowered over their care.
- Having the opportunity to discuss health care wishes made the topic more comfortable to discuss.
- Use of the Caring Conversations Workbook was not always consistent but there has been an increase in advance directive completion.

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