



# Meta-LARC ACP

## Serious Illness Conversation Training

### Part A

## Module 2

### Why focus on serious illness conversations in primary care?

In this module, we will describe Serious Illness Conversations and why they are important in primary care. We will then discuss the use of the Serious Illness Conversation Guide.



## Early conversations about goals and preferences are linked to better care

- Increased goal-concordant care
- Improved quality of life/patient well-being
- Fewer hospitalizations
- More and earlier hospice care
- Better patient and family coping

Chiarchiaro, 2015; Detering, 2010; Mack, 2010; Wright, 2008; Zhang, 2009

- There is a growing body of evidence showing that early conversations with patients about their goals and preferences is linked to better quality care.
- Patients who have conversations about their goals and preference:
  - are more likely to receive care that is consistent with what is most important to them;
  - have time to consider options, make informed decisions, and fulfill personal goals;
  - And usually have fewer hospitalizations, more palliative care, and earlier hospice care.
- These patients and their families tend to cope better.
- Early conversations often ease the burden of decision-making for families and improve bereavement outcomes



## Patient and family experiences and expectations

- 9 in 10 Americans believe doctors should discuss end-of-life issues with their patients
- Patients expect their clinicians to bring this up

IOM, 2014; Johnston, 1995; DiJulio, 2015

- 9 out of 10 Americans believe doctors should discuss end-of-life issues with their patients,
- And it is important to realize that patients expect their clinicians to initiate these conversations.

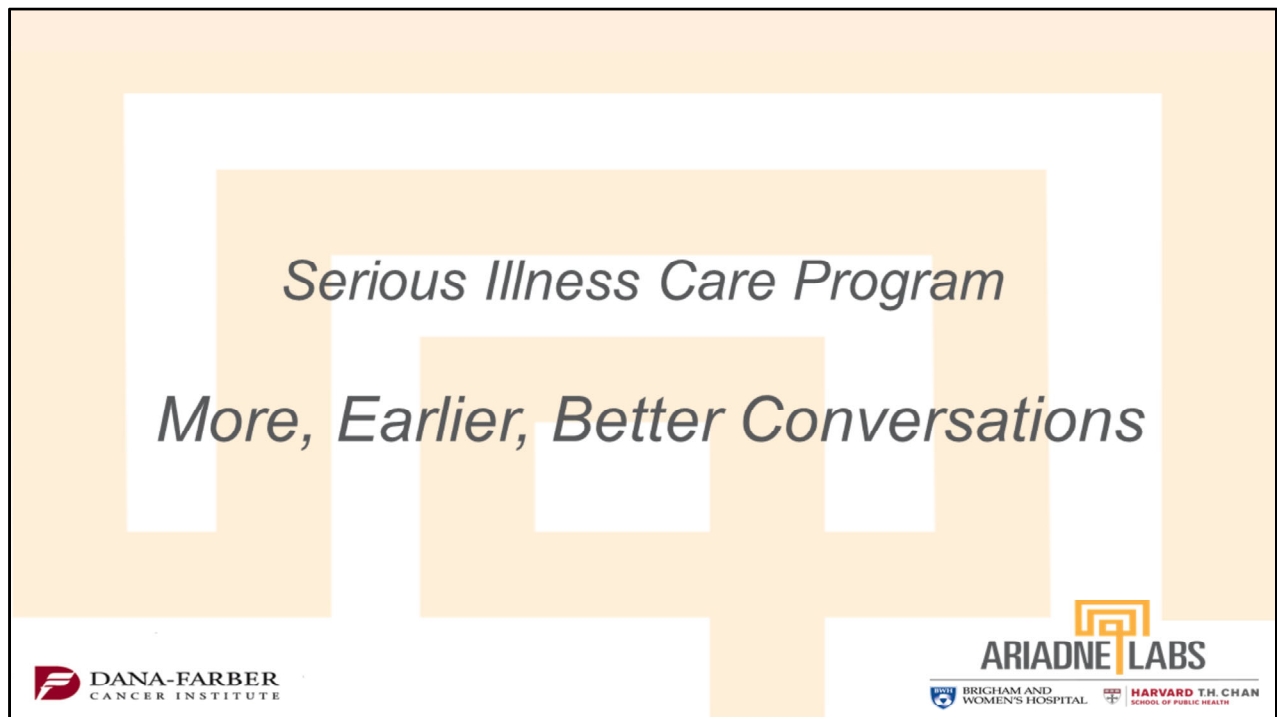


## Benefits of Serious Illness Conversations (SIC) for Clinicians

- Provide care patients want and increase their satisfaction
- Feel connected with patients and reduce clinician burnout
- Reduce medical errors disregarding patients' preference
- Having the conversations is expected and reimbursable
  - US Medicare Billing codes for ACP: 99497 & 99498

Allison, 2013; IOM, 2014; Medicare Learning Network, 2016

- Improving communication about patient values and goals and serious illness conversations have benefits for clinicians, too.
- By having the conversation, clinicians are able to provide the care their patients want and increase patient satisfaction with care.
- Clinicians feel more connected with patients and are less likely to experience burn out.
- Conversations also reduce medical errors from disregarding patients' preferences.
- Having the conversation is now expected by society and the time spent on these conversations and advance care planning is reimbursable.



Based on research, evidence, and perceived needs, the Ariadne Labs Serious Illness Care Program aims to promote MORE, EARLIER, and BETTER CONVERSATIONS

How can we do this? The key is to set a new standard for care.

The standard is: Universal access to high-quality, patient-centered serious illness care planning, centered on serious illness care conversations -- with every appropriate patient

- These conversations must be designed to prevent and reduce suffering, improving well-being, and ensuring receipt of care consistent with patient goals and preferences.
- For all patients to have universal access to high-quality serious illness care planning at right time, we need more clinicians with skills that allow them to have these conversations and we need to actively promote conversations at every opportunity.



## Clinicians have a critical role in improving patient care by

- Identifying patients who would benefit most from conversations
- Initiate conversations using best practices in communication
- Document the conversations so that all involved in the patient care can know his/her goals
- Create a care plan with patients and families that matches goals
- Set an example of high-quality communication for colleagues and students

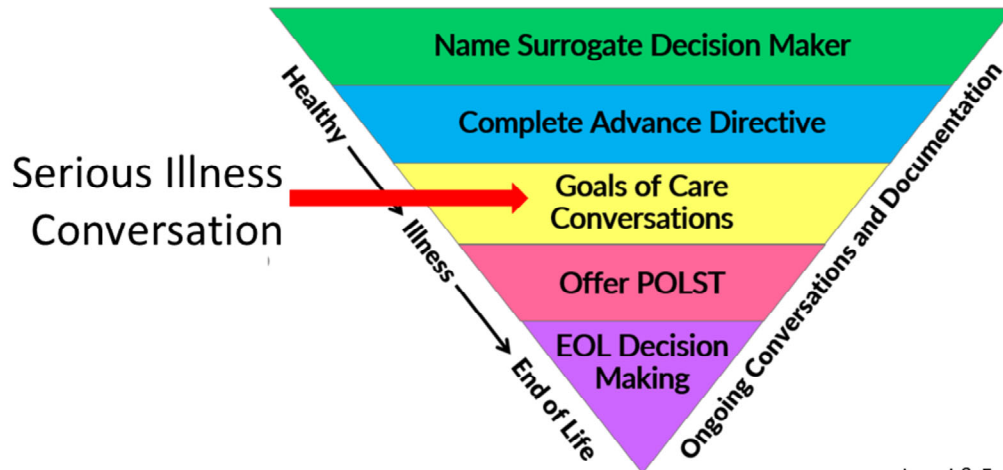
Clinicians have a critical role in improving patient care by acting on this new standard and improving conversations.

Clinicians can:

- Identify patients with serious illness who would benefit most from the conversations
- Initiate conversations using best practices in serious illness communication
- Document the discussions in a retrievable location in the health record so that all healthcare team members can know the patient's goals
- Create a care plan, in collaboration with patients and families so that care matches with patient goals, and
- Set an example of high-quality communication for colleagues and healthcare professional students



## Advance Care Planning Continuum Identifying the right patients for SIC



Izumi & Fromme (2017)

Although having advance care planning conversations is beneficial for patients at any age or stage of illness, having conversations to clarify the goals of care is particularly important when patients face serious illnesses.

Serious Illness Conversations are appropriate when a patient's condition worsens and when death or loss of decisional capacity in the next 1 or 2 years would not be surprising. Serious illness care planning allows patients to reflect on their values and plan for future, given the likely of progression of a serious illness.



## Primary care clinicians' role in serious illness care planning

- Palliative care clinicians see only 13% of 2.4 million patients in the US who die each year
- Clinicians in hospitals often do not know the patients well
- Primary care clinicians are well-suited to engage in SIC
  - They have continuity and established, trusting relationship with the patient, and ability to coordinate care across settings

Munday, 2009; Pantilat, 1999; Stoke, 2005; Tolle, 2015

Primary clinicians have an important role to play in Serious Illness Care planning for many reasons.

- Many people believe that palliative care specialists are trained for and best suited to have serious illness conversations. However, we do not have enough palliative care specialists to meet needs of every seriously ill patient.
- Although many patients with serious illness receive care in hospital settings, clinicians taking care of them in hospitals often do not know the patients well. Also, patients in hospitals are often very sick and families are often stressed or facing a crisis.
- Primary care clinicians often have long term relationships with patients, know the patients well, are trusted by patients and families, and have the ability to coordinate care over time and across many settings.
- Outpatients may be more stable and have time and capacity to reflect and make a plan for the future.
- Primary care clinicians can play a significant, critical role in advanced care planning by having more, earlier, and better conversations with their patients.





## Serious Illness Conversations

Dialogue between a clinician and patient with serious illness that:

- Focuses on values, goals, and care preferences
- Offers an honest, realistic assessment of future health and function (if the patient wants to know)
- Starts early in the course of serious illness
- Provides a foundation for making specific decisions in the future
- Should be reviewed/revised over time

So what is a serious illness conversation?

A Serious illness conversation is a dialogue between a clinician and patient with serious illness that:

- Focuses on values, goals, and care preferences
- Offers an honest assessment of the patient's future health status and function—if the patient wants to know.
- Starts early in the course of a serious illness
- Provides a foundation for making specific decisions in the future, and
- Should be reviewed and revised over time as a patient's condition and values may change



# Serious Illness Conversation Guide

CONVERSATION FLOW	PATIENT-TESTED LANGUAGE
<b>1. Set up the conversation</b> <ul style="list-style-type: none"> <li>Introduce purpose</li> <li>Prepare for future decisions</li> <li>Ask permission</li> </ul>	"I'd like to talk about what is ahead with your illness and do some thinking in advance about what is important to you so that I can make sure we provide you with the care you want -- is this okay?"
<b>2. Assess understanding and preferences</b>	"What is your understanding now of where you are with your illness?" "How much information about what is likely to be ahead with your illness would you like from me?"
<b>3. Share concerns about the future</b> <ul style="list-style-type: none"> <li>Frame as a "wish...worry", "hope...worry" statement</li> <li>Allow silence, explore emotion</li> </ul>	"I want to share with you my understanding of where things are with your illness..." Description: "It can be difficult to predict what will happen with your illness. I hope you will continue to live well for a long time but I'm worried that you could get sick quickly, and I think it is important to prepare for that possibility." OR Time: "I wish we were not in this situation, but I am worried that time may be as short as ____ (expresses on a range, e.g. days to weeks, weeks to months, months to a year)." OR Function: "I hope that this is not the case, but I'm worried that this may be as strong as you will feel, and things are likely to get more difficult."
<b>4. Explore key topics</b> <ul style="list-style-type: none"> <li>Goals</li> <li>Fears and worries</li> <li>Sources of strength</li> <li>Critical abilities</li> <li>Traditions</li> <li>Family</li> </ul>	"What are your most important goals if your health situation worsens?" "What are your biggest fears and worries about the future with your health?" "What gives you strength as you think about the future with your illness?" "What abilities are so critical to your life that you can't imagine living without them?" "If you become sicker, how much are you willing to go through for the possibility of gaining more time?" "How much does your family know about your priorities and wishes?"
<b>5. Close the conversation</b> <ul style="list-style-type: none"> <li>Summarize</li> <li>Make a recommendation</li> <li>Check in with patient</li> <li>Affirm commitment</li> </ul>	"You heard you say that ____ is really important to you. Keeping that in mind, and what we know about your illness, I recommend that we ____ This will help us make sure that your treatment plans reflect what's important to you." "How does this plan seem to you?" "I will do everything I can to help you through this."
<b>6. Document your conversation</b>	
<b>7. Communicate with key clinicians</b>	

- Designed to help clinicians have compassionate and effective conversations with patients about values, goals and preferences
- Evidence-based, patients/clinicians tested for impact, and refined to optimize the wording and order

To facilitate serious illness conversation, Ariadne Labs developed a Serious Illness Conversation Guide.

- This guide is designed to help clinicians have compassionate and effective conversations about values, goals, and preference.
- The guide is based on evidence, and includes patient and clinicians tested language and flow.

In following section, we will introduce this Serious Illness Conversation Guide and describe how it can be used with your patients.

The Serious Illness Conversation Guide is available in the Helpful Resources section on the left side tools as well as in Step 5 of this training.



## Structure of Serious Illness Conversation Guide

1. Set up the conversation
2. Assess understanding and preferences
3. Share concerns about the future
4. Explore key topics (goals, fears/worries, sources of strength, critical abilities, tradeoffs, family)
5. Close the conversation

The Conversation Guide includes 5 steps.

- First, set up the conversation
- Second, assess patient understanding and preferences
- Third, Share concerns about the future
- Fourth , Explore key topics (goals, fears/worries, sources of strength, critical abilities, tradeoffs, family)
- And finally close the conversation



## Demonstration

- In the next step (Step 4), watch a video that demonstrates a clinician having a serious illness conversation with a patient
- Take notes while watching the video using the Observation Worksheet
- After watching the video, review the worksheet and debrief about what you have observed, learned, or have concerns about

Let's watch a video where Dr. Fromme has a Serious Illness Conversation with a patient using the Conversation Guide via Telehealth.

First, Go to Step 4, print out or download the Observation Worksheet and review it. Then, watch the video while taking notes using this worksheet.