Conversations that count: an overview of Advance Care Planning

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Aims:

- What is the problem?...
- Define advance care planning (ACP).
- Consider and acknowledge difficulties and barriers to ACP
- National ACP Cooperative
- Where to learn more.....
What is the problem?

There is a strong call from medical and non-medical groups to improve our communication with patients and let them have a clearly recorded voice when their end of life care is planned.
Barriers to having the conversation?

Cure culture

Specialisation
Communication is key....

I'm sorry Mr. Murphy. You're going to die.

Forever.
Why bother?
Advance Care Planning is...

- A process of discussion and shared planning for future healthcare. It involves an individual, whanau and health care professionals.

- It offers people the opportunity to develop and express their preferences for future health care based on:
  - personal views and values
  - a better understanding of their current and likely future health
  - the treatment and care options available

(ACP Cooperative, 2013)
What does ACP involve?

Conversations....important conversations.....where we aim to seek insight...
“All people in NZ will have access to comprehensive, structured and effective advance care planning”
MoH guidelines for health workforce

Consumer resources

**Making the most of your final years**
Practical and spiritual things to think about and plan for end of life

**Advance care planning**
Preparing for end of life

**Advance care planning guide**
Planning for the medical treatment and care you want in the future

**MY ADVANCE CARE PLAN**

If you have had a chance to think about the care you want towards the end of your life, you may want to write down your thoughts down. Use this plan to write down what you want health professionals, friends and family members to know if you could no longer tell them yourself.

There is a section on medical treatment which is important to discuss with your doctor if possible, before you complete it.

This plan is for you and about you. Complete as much as you want. You can allow it to anyone involved in your healthcare. You can add to it as often as you like and change your decisions as you like. Please take it to your doctors or nurses to discuss it and then you can both have copies. It can be forwarded through your doctor to others who may need it, with your consent.
Where to learn more...

www.advancecareplanning.org.nz

- Resources, tools, literature
- Personal & Health Care Worker sub sites
- Patient stories (videos)
- Level 1 e-learning modules
- Level 2 Communication skills training workshops
- Annual Conversations that Count Day (April)
What you can do...

- View the ACP website
- Spread the word!
- Talk about formulating an ACP with your GP
- Talk with your family about ACP and what is important to you
- Raise awareness in ACP across your networks and in the wider community.
Concluding thoughts..

If to be human is to be limited, then the role of caring professions and institutions - from surgeons to nursing homes- ought to be aiding people in their struggle with those limits. Sometimes we can offer a cure, sometimes only a salve, sometimes not even that. But whatever we can offer our interventions, and the risks and sacrifices they entail, are justified only if we serve the larger aims of a person’s life. When we forget that, the suffering we can inflict can be barbaric. When we remember it the good we can do can be breathtaking.

Thank you!

Questions?