

# Statewide Office of Advance Care Planning



## Section 1: Introduction

- About the *ACP Train-the-Trainer Guide*
- What is ACP?
- The role of the ACP Champion

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## About the *ACP Train-the-Trainer Guide*

Advance care planning (ACP) is recognised as a cornerstone of person-centred quality care for older persons living in residential aged care facilities (RACF).

To provide quality end-of-life care in line with accreditation standards, it is recommended that each facility should appoint staff to be responsible to embed ACP as part of routine clinical care. This *ACP Train-the-Trainer Guide* (henceforth called *the Guide*) contains all the information needed for you to fulfil the role as an ACP Champion in your facility.

Making ACP part of *routine clinical care* allows all residents to receive the support they need to make their future health care wishes known in order that their values, beliefs and wishes can be respected and honoured; thus improving end-of-life care in their place of choice.

This *Guide* will support your:

- Presentation of an ACP Champion workshop
- Participation in peer support education
- Role in training other staff about ACP
- Role in conducting ACP discussions with residents, families and substitute decision makers
- Ability to find additional information and resources.

ACP Champions support RACF staff to provide quality end-of-life care for residents and appropriate support to residents' families.

Importantly ACP, when implemented in a systematic way in a RACF with leadership from ACP Champions, will support:<sup>1</sup>

- Treatment and health care to be provided in line with a resident's wishes
- Families and/or substitute decision makers to make decisions knowing the resident's wishes
- Decisions about a resident's health care to be made proactively rather than being made in a crisis situation e.g. on admission to hospital.

While the role of ACP Champion may be challenging, we hope you find it immensely satisfying.



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<sup>1</sup> Statement of Choices. Why plan ahead. Available from: <https://metrosouth.health.qld.gov.au/acp/statement-of-choices-form>

**Table 1: Components of the *Guide***

SECTION	TITLE	SUBHEADINGS	CONTENT
Section 1	Introduction	<ul style="list-style-type: none"> <li>About the <i>ACP Train-the-Trainer Guide (the Guide)</i></li> <li>What is ACP?</li> <li>The role of an ACP Champion</li> </ul>	<p>This section contains background reading about Advance Care Planning (ACP) and the role of the ACP Champion.</p> <p>It lists the components of <i>the Guide</i></p>
Section 2	Education resources for ACP Champions	<ul style="list-style-type: none"> <li>Overview of the education resources                             <ul style="list-style-type: none"> <li>Online education modules</li> <li>ACP champion workshop</li> <li>Peer support guide</li> </ul> </li> <li>ACP champion workshop powerpoint</li> </ul>	<p>This section contains information about the education program available to ACP Champions.</p> <p>It contains material to conduct an ACP Champion workshop and activities to ensure ongoing mutual support and development for ACP champions.</p>
Section 3	Delivering ACP training	<ul style="list-style-type: none"> <li>Overview of ACP training</li> <li>Training session 1 for all staff <i>What is advance care planning?</i></li> <li>Training session 2 for nurses <i>See, Say, Do, Write, Review: Responding to cues from residents</i></li> <li>Training session 2 for all staff <i>See, Say, Do, Write, Review: Responding to cues from residents</i></li> <li>Training session 3 for all staff <i>Advance care planning documentation and processes in your facility</i></li> </ul>	<p>This section contains the resources that are needed to deliver short training sessions to staff in RACFs.</p> <p>It includes PowerPoint presentations with notes, suggested teaching activities plus handouts for participants.</p>
Section 4	Resources	<ul style="list-style-type: none"> <li>Example ACP policy and procedure</li> <li>After-Death Audit for RACFs</li> <li>ACP brochure</li> <li>Discussion starters</li> <li>Guides to completing ACP documents</li> <li>Auditing of ACP documents</li> <li>Steps for completed ACP documents to be uploaded to The Viewer</li> <li>Steps for accessing The Viewer via the Health Provider Portal</li> <li>List of useful websites</li> </ul>	<p>This section contains resources that may be useful to ACP Champions in their role in the RACF.</p>
Section 5	References		<p>This section contains the references used for the content of <i>the Guide</i>.</p>

## Aim

The aim of this guide is to offer a package of evidence-based resources developed to support ACP Champions in RACFs to embed a seamless ACP program into routine clinical care to support high quality end-of-life care for their residents.

## Components

*The Guide* has several components.

- Education about advance care planning (online, workshop, short training modules, peer support) for RACF nursing staff nominated as ACP Champions
- Information sheets for residents, families and/or substitute decision maker(s)
- An example ACP policy and procedure to support implementation of an ACP program in an aged-care facility

## What is ACP?

ACP refers to a voluntary ongoing process concerning conversations between a resident, their family and/or substitute decision maker(s), and health care professionals enabling the resident's preferences for future health care to be known should they become unable to participate in decision making. Ideally these preferences will be documented <sup>1</sup>

ACP is an important component of quality person-centred end-of-life care and can improve resident and family satisfaction with care, reduce unwanted transfers to hospital, reduce stress and anxiety for families and/or substitute decision makers, and improve staff satisfaction with the seamless care that can be provided for residents.<sup>2,3</sup>



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<sup>2</sup> Wright AA, Zhang B, Ray A et al. Associations between end-of-life discussions, patient mental health, medical care near death, and caregiver bereavement adjustments. *JAMA* 2008. 300:1665-73.

<sup>3</sup> Detering KM, Hancock AD, Reade MC et al. The impact of advance care planning on end of life care in elderly patients: randomised controlled trial. *BMJ* 2010. 340:1345.

## The role of the ACP Champion

The role of an ACP Champion includes the acquisition of knowledge, skills and confidence to support residents and their families, as well as other staff in the process of ACP. To build this role, this *Guide* offers a package of education and resource materials to get you started:

### 1. Learning and Skills

- Complete five short online education modules about ACP published on PallConsult website: <https://www.caresearch.com.au/eolcareracf/tabid/4664/Default.aspx>
- Study *the Guide* and conduct the half-day ACP workshop included, to train other staff about ACP
- Conduct ongoing training in your facility using resources included in *the Guide*.

### 2. Facilitating ACP discussions with residents/substitute decision makers

- Include ACP Brochure and supporting material in the Welcome Pack of your facility
- After an appropriate interval (say 6 weeks) approach residents/substitute decision makers to make an appointment to discuss ACP, emphasising that this will be a supported voluntary exercise, while highlighting its benefits. It is important to recognise that some individuals may choose not to participate on the initial approach
- Conduct ACP discussions with those residents/substitute decision makers who have agreed to participate
- Document any resulting advance care plans using ACP documents recognised throughout the Queensland health care system
- Liaise with GPs to meet residents and/or substitute decision makers in order for GPs to contribute to the ACP discussions and sign the advance care plan
- Ensure ACP discussion and documentation is systematically shared with appropriate persons e.g. in Queensland, send to the Statewide Office of Advance Care Planning (OACP) for audit and upload to The Viewer.

### 3. Educating and promoting ACP

- Continue to educate and promote the advantages of ACP to facility residents, their families and facility staff.

### 4. Facilitating short ACP training sessions for staff

- Continue to provide short ACP training sessions for your facility staff according to the education calendar of your facility.

### 5. Promoting sustainability of ACP

Consider the sustainability of the ACP processes in your facility, for example:

- How will you ensure continuity of ACP Champions?
- Have you established regular ACP training for other staff?
- Are you informing residents, families and/or substitute decision makers about ACP?
- Have you been able to engage with the GPs that visit your facility?