

Utilizing Healthcare Navigators to Support Advanced Care Planning (ACP) Documentation in Oncologic Surgery Patients

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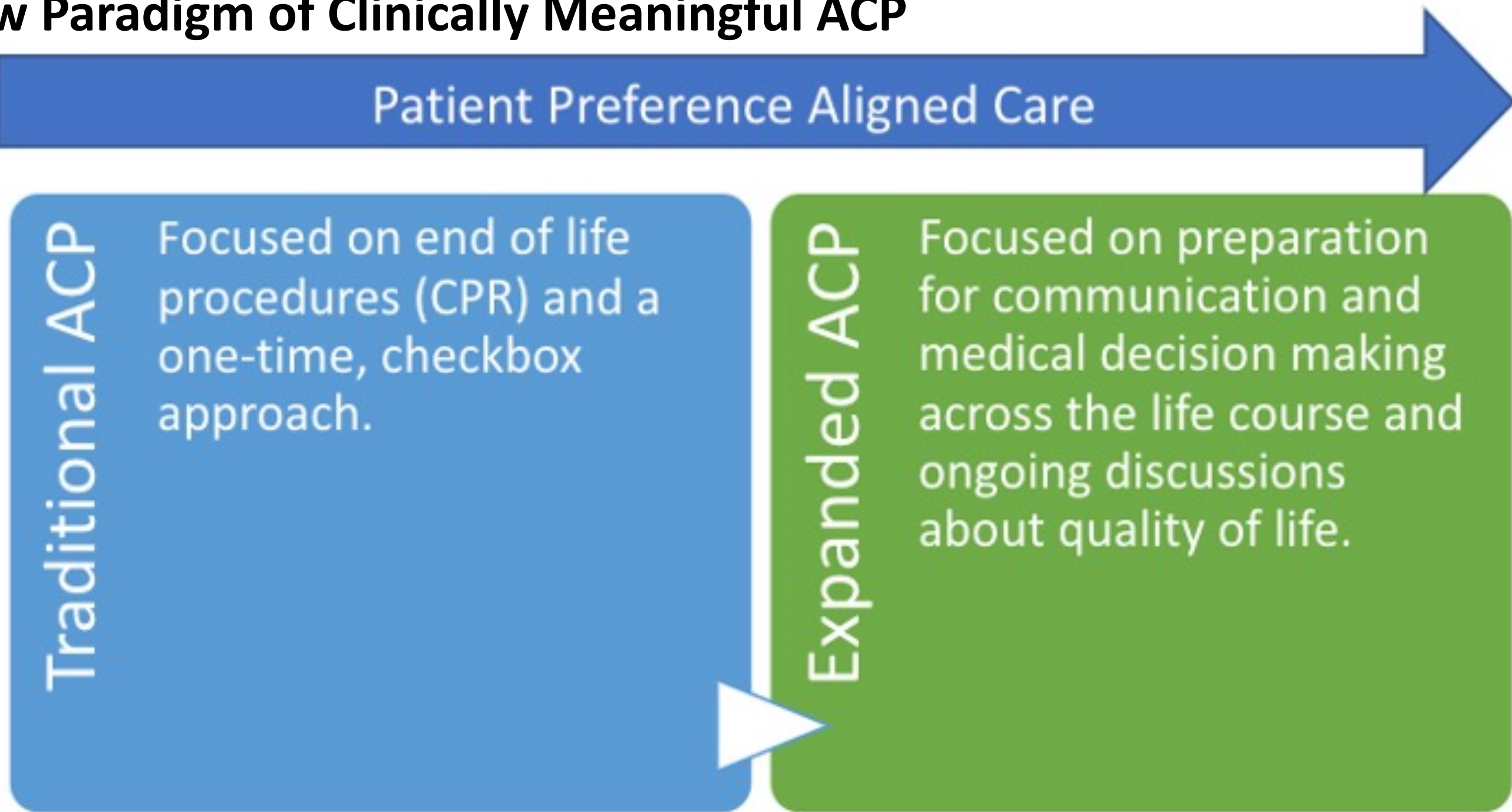
Background

- Advanced Care Planning helps to align care with goals and values
- ACP is broadly recognized as an important quality metric in the field of surgery, yet rates of ACP documentation remain low¹
- The PREPARE for Your Care tool has been shown to be effective in increasing ACP documentation²
- We sought to determine if Healthcare Navigators (HCN) can be used in conjunction with the PREPARE tool to increase the frequency of ACP documentation compared to the PREPARE tool alone
- In addition, we aimed to identify any additional barriers to creating ACP by analyzing the content of HCN conversations via their notes.

Methods

- Study: retrospective cohort study at UCSF using EHR data
- Population: new patients > age 65 included from surgical oncology clinics including colorectal, HPB, endocrine and thoracic.
- 1.All patients were sent a message with a link to PREPARE
 - 2.Two multilingual, ACP-trained HCNs called patients to discuss ACP and documented their visits
 - 3.Primary outcome was new Advanced Directive (AD) uploaded to the EHR within 90 days of message receipt.
 - 5.Content analysis was performed on a subset of 100 HCN notes to identify barriers to ACP.

New Paradigm of Clinically Meaningful ACP



Contact from healthcare navigators is associated with increased rates of ACP

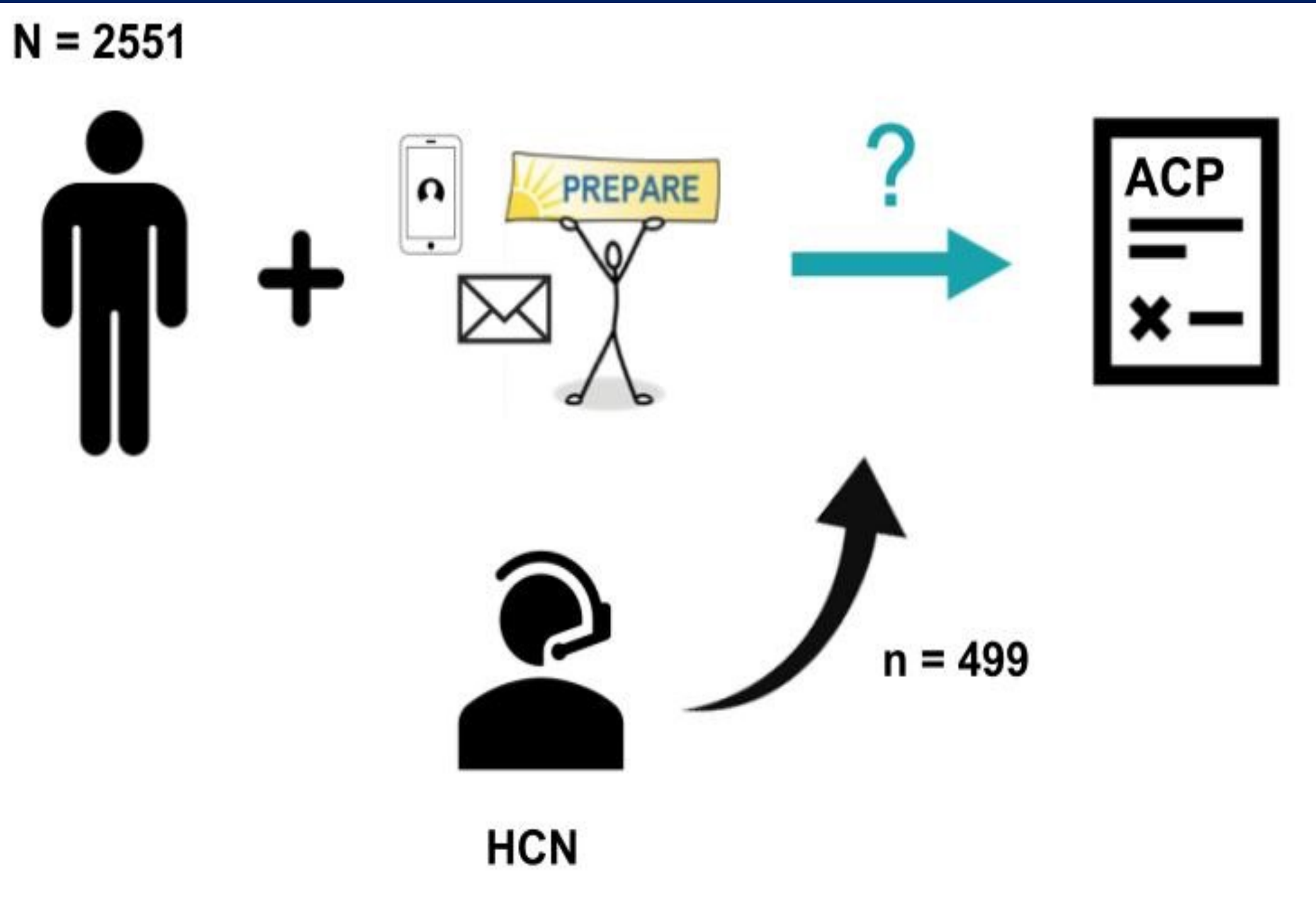


Figure 1. HCN Workflow.



Figure 3. PREPARE Tool Steps

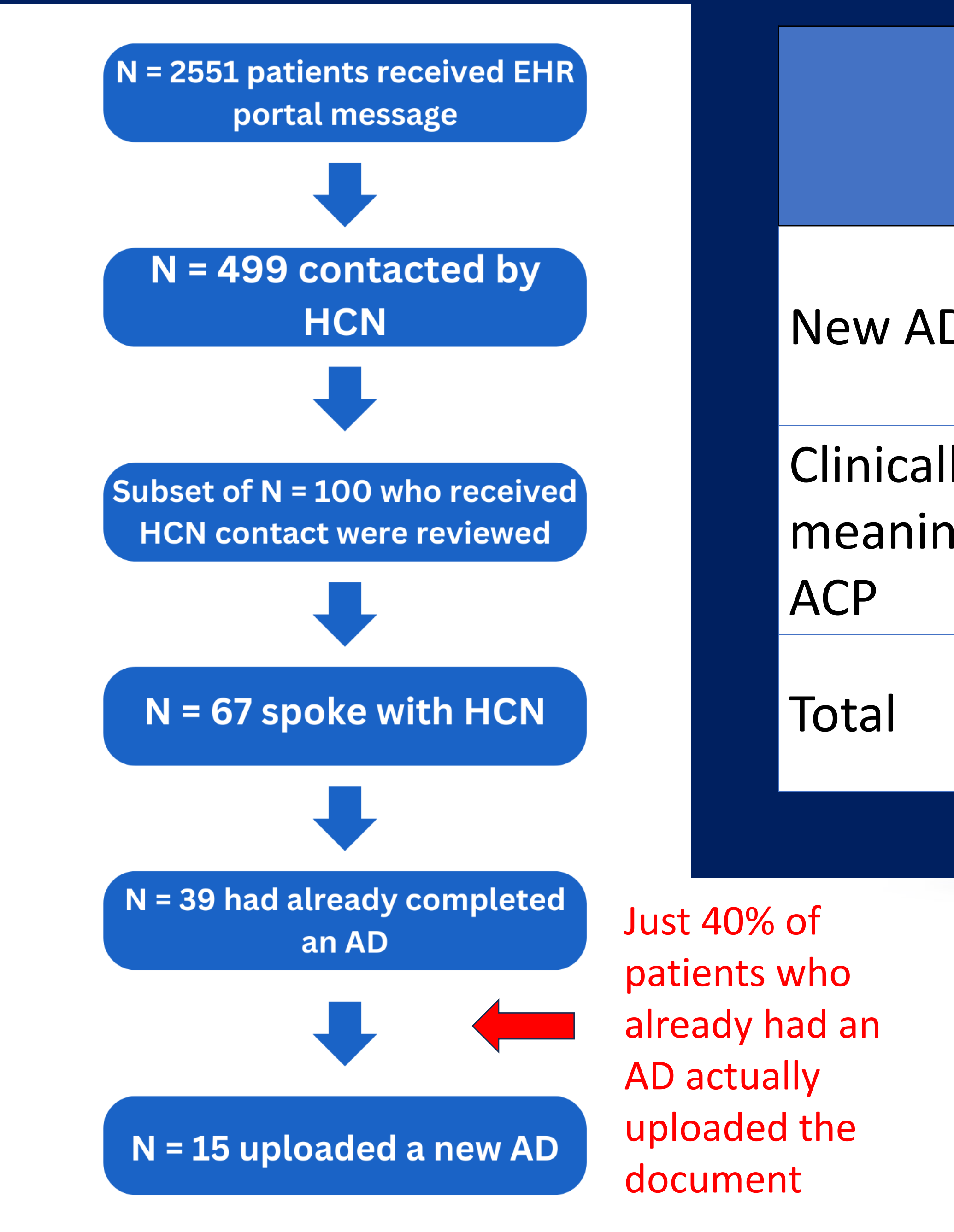


Figure 2. Proportion of patients with pre-existing AD that uploaded ACP documentation.

	PREPARE only	PREPARE + HCN	P-value
New AD	74	47	p < 0.001
Clinically meaningful ACP	311	363	p < 0.001
Total	2051	499	

Table 1. Frequency of ACP by intervention. New ADs are those submitted within 90 days. Clinically meaningful ACP included scanned ACP documentation, ADs, Physician Orders for Life Sustaining Treatment forms, ACP billing codes, and ACP notes



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Results

- 2551 patients received an EHR message about ACP with a link to PREPARE
- Two HCNs made calls to 499 of these patients
- Patients who spoke with HCN were more likely to have newly uploaded Advanced Directives (9.4% vs. 3.6%, p<0.001).
- One year later, clinically meaningful ACP was documented in the EHR more often in the HCN group vs. the message-only group (72.9% vs. 15.2%, p<0.001).
- 58% of patients who did not have an AD within the past 6 months stated that they had completed an AD. However, just 40% of these patients uploaded their AD within 90 days.

Discussion

- Patients contacted by HCNs were more likely to submit an AD, and more likely to have clinically meaningful ACP documented in the EHR at one year.
- HCN's may augment the effects of the PREPARE tool.
- Uploading ACP documentation represents a barrier that should be addressed. This may be especially important at tertiary care centers where patients are often referred from outside healthcare systems.
- One limitation is that HCNs selectively reached out to patients with high comorbidity, therefore they may have been more likely to interact with providers and successfully submit ACP.

Next steps

- Develop ACP documentation upload workflow easing burden on both patients and healthcare system.
- Further investigate these results in a 3-arm pragmatic trial utilizing PREPARE, reminder messages, and HCNs to increase ACP across 3 healthcare systems.

References

1. Colley et al., *JAMA Surgery*. 2022.
2. Sudore et al., *JAMA Internal Medicine*. 2017.

Acknowledgements

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