Background

International guidelines recommend Pulmonary Rehabilitation Programmes (PRP) as ideal settings for advance care planning (ACP) education. Despite ten years of experience delivering PRP, health care professionals (HCP) at our centre failed to include ACP sessions in the education programme citing the absence of implementation models and concerns about their own skill set.

Aim of the project

This quality improvement project aimed to introduce ACP information sessions into a PRP. Collaborative from the outset, the project recognised patients as experts living with their condition (predominantly patients with COPD) attend our PRP).

There is a growing recognition that in particular older people already think and talk about aging and mortality issues. PRP patients’ willingness to engage was the starting point, motivator for and corner stone of the project.

What does the literature say?

ACP enhances an individual’s preparation for future loss of capacity by making their values and preferences for medical and lifestyle care known to others.

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ACP is a process of which the first step is the introduction of the topic and the provision of information.

Methods

Preparation Phase:

- Identification of PRP staff’s training needs
- Communication training & reflective practice
- Literature review: ACP & its role and application in PRP
- Site visits (2) where ACP education is taking place
- Engagement with local specialist palliative care service
- Building on experience of ACP with individual patients
- Development of the education session content & delivery skills

Implementation Phase:

- Introducing 1st session (May 2014)
- Feedback & reflections from patients, relatives & health care professionals after each session
- Patient’s expression of living with a life limiting condition & their concerns shaped the session
- Content, delivery & format were adapted according to feedback & reflections – deemed adequate by patients & relatives after 4th session (November 2014)

Sustainability Phase:

- ACP education now offered to all patients attending PRP & their relatives during a rolling programme (one session every 8 weeks)
- Sessions follow this structured approach:

Sharing the learning:

- Our centre now facilitates site visits to other rehabilitation programmes wishing to introduce ACP into patient education

Results

Data collected during 4 session implementation phase:

- 52 patients and 5 relatives attended
- 4 patients opted out
- 0 patients or relatives reported distress

Sharing the learning:

- Sessions follow this structured approach:

### Preparation

- Information at previous PRP

### Delivery

- 1st Respiratory Nurse
- Comfy & live environment
- Non-smoking area
- Written information

### After

- Individual feedback
- RPM for COPD
- Physiotherapist

Discussion

- Our experience to date is that patients and relatives are ready to receive ACP information
- ACP information at PRP is planting the seed for patients to start talking about future health care decisions
- Can be successfully implemented in PRP when patients are included in the improvement process and staff are confident and competent to deliver the material
- Session title has changed to: Planning for your future health care reflecting patient preferences and more person centred language

Conclusion

This quote from a patient with Pulmonary Fibrosis sums up the personal significance the ACP session has way beyond the PRP classroom:

> “Now that I know you are willing to talk about these things, I am reassured that you will be there for me when my darkest hour comes.”