

PROVIDENCE
Health Care

**Creating a Culture for
Concordance**

Inpatient care at Providence Health Care in
eastern Washington
Kellie Durgan RN, BSN
Manager, ACP, PHC

The image shows a slide with a white top section containing the Providence Health Care logo (a blue cross with an orange vertical bar) and the text 'PROVIDENCE Health Care'. The bottom section has a dark blue background with a light blue curved shape at the bottom right. It contains the title 'Creating a Culture for Concordance' in orange and white, followed by the subtitle 'Inpatient care at Providence Health Care in eastern Washington' and the speaker's name and credentials 'Kellie Durgan RN, BSN Manager, ACP, PHC' in white.

Objectives



- Identify partners to create culture of concordance
- Develop strategies that can lead to identification of legal surrogate
- How to encourage communication with legal surrogate when patient lacks capacity
- What data points might be important when auditing charts for concordance

Five Promises of an Advance Care Planning System

PROMISE #1

We will initiate the conversation

PROMISE #2

We will provide assistance with advance care planning

PROMISE #3

We will make sure plans are clear

PROMISE #4

We will maintain and retrieve plans

PROMISE #5

We will appropriately follow plans

ELEMENT 4

Presented at Honoring Choices PNW Design & Implementation
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Respecting Choices®
PERSON-CENTERED CARE

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Why is this important?



- Big push in Providence St Joseph Health for “shared decision-making, whole person care”
- Must have confidence that patient voice will be heard, and wishes followed
- Makes financial sense in the long term – Silver Tsunami is coming!

Link to common mission



The Mission

As expressions of God's healing love,
witnessed through the ministry of Jesus,
we are steadfast in serving all,
especially those who are poor and vulnerable.

Mission & Mentoring | Providence St. Joseph Health Formation Institute

The graphic features a central white box with a colorful, abstract background of overlapping circles in shades of green, yellow, orange, red, and blue. The text is centered within this box. In the top right corner of the box is the Providence St. Joseph Health logo. At the bottom of the box, there is a small line of text: "Mission & Mentoring | Providence St. Joseph Health Formation Institute".

Link to like initiatives



CARING
RELIABLY
Be Compassionate. Be Safe. Be Reliable.

Leadership matters



Educate!



- Nursing
- Social Workers
- Patient Access
- Employed Hospitalists/Intensivists

Finding documents



Advance Care Planning

Advanced Care Planning Report

Health Care Agent	Advance Directive	Code Status	Notes
Yes 10/14/2015	Yes	See prior hospital	Yes ACP Name Soul of Care Note: 1/30/2018

Health Care Agents
There are no health care agents on file.

Patient Wishes
Advance Care Plan - Patient Wishes
Patient's **GENERAL** preferences for treatment: Continued intensive medical treatments to prolong life
Patient's **SPECIFIC** wishes for treatment:
CPR: Yes
Mechanical Ventilation: Yes
Dialysis: Yes
Medically Administered Nutrition or Fluids: Yes

Patient Knowledge
Advance Care Plan - Patient Knowledge
Handouts: ✓
Videos: ✓
Advance Care Planning Scenarios: ✓
Community Resources: ✓

Tools to leave behind

Does my patient have
CAPACITY
to make medical decisions?

Yes → Great! They can decide on a plan of care, sign consents & name someone they trust to be a DPQA for Health Care.

No → Find out who their surrogate may be (see hierarchy below)

Not Sure → Ask a provider to evaluate the patient for decision making capacity

Documents

1. Legal Guardian
2. DPQA for Health Care
3. Spouse
4. Adult Children
5. Living Parents
6. Adult Siblings

No Documents

Surrogate Hierarchy

Did you know?
Patients who leave **AMA** must have capacity.

Need Help?
Providers can type `phcapacity` or `phcapacityquestions` in an EPIC note for more info!

If there is no one available from the above list & patient lacks capacity, ask **social work** for help

Assessing Capacity

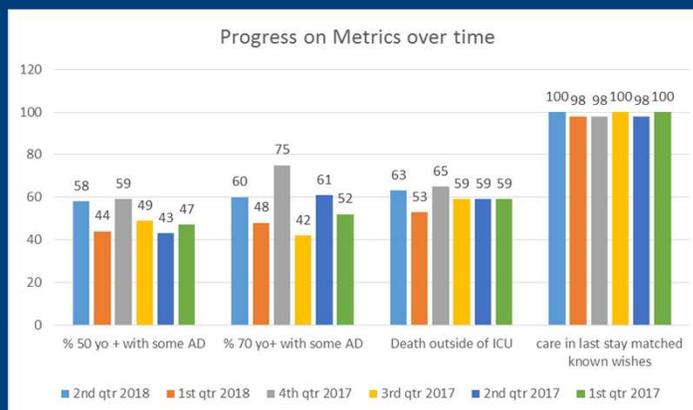
- How to assess
- How to document
- It takes a village – having the legal surrogate identified when decisions need to be made (surgery, code status, etc)
- Working with providers, nurses AND social workers

Elements of Chart Audit



- ACP Documents – when signed, scanned, contents
- Interventions in terminal hospitalization
- LOS, Age, Sex, unit where died, Dx, Palliative care consult? GOC convo documented?

Reporting Graphs



Wishes not followed is Medical Error



- Clear support from Medical Executives
- Culture to involve Ethics/Palliative Care when way forward isn't clear
- Champions in hospitalist and intensivists group to encourage conversations
- Firm support in conversations happening "upstream" in PCP offices

Opportunities continue



- Transfers to higher level of care – rarely come with ACP documents
- Code in progress from the community – care once we confirm identity/wishes
- When no documents, we look to care conference with legal surrogates
- Training providers to document conversations when decisions are made

Questions?

