

Project Title

Advance Care Planning Programme in Tan Tock Seng Hospital

Project Lead and Members

- Dr Raymond Ng Han Lip (Project Director; Palliative Medicine Consultant) -
- Hayley Chau (Operations Lead; Asst Director, Operations Community),
- Roland Chong (Senior Advance Care Planning Coordinator),
- Jessie Eng Ramdat (Advance Care Planning Coordinator),
- Jasmine Tan Shu Zhen (Advance Care Planning Coordinator),
- Amanda Guo (Executive), Operations, amanda_cz_guo@ttsh.com.sg
- Audrey Loke (Senior Admin Assistant)

Organisation(s) Involved

Tan Tock Seng Hospital

Project Period

Start date: 2012

Project Category

Care Redesign, Process Improvement, Process Redesign

Keywords

Care & Process Redesign, End-of-life care, Advanced Care Planning, Care Preferences, Patient-Centred Care, Quality of Care, Increase Patient's Control, Reduce Decision-Making Stress, Decrease Post Bereavement Depression, Strengthened Relationships, Patient-centric Care, Patient Satisfaction, Community Engagement, Patient Support Group, Staff Training, Outcome Measures, Audit & Improvement, Information Capture System, Care Continuum, Tan Tock Seng Hospital, Palliative Medicine, Operations, Agency of Integrated Care

Name and Email of Project Contact Person(s)

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Asian Hospital Management Awards

*Required Fields

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PHYSICIAN LEADERSHIP PROGRAM (New!)

Physicians are at the heart of any hospital. They examine patients, diagnose and specify tests and procedures. The physician evaluates results and decide on what to do with outcomes and prescribe treatment. This award recognizes the central and major role of physicians. The award is for a project or program that improves the patient experience because of the increased, improved or innovative involvement of physicians. Were the physicians involved in the planning of the improvement? Did they participate in the brainstorming of the improvements? Did they agree to make changes that would help the hospital serve the patients better?

Complete All Information Below:

Project Title (Maximum 256 Characters):

Advance Care Planning Programme in Tan Tock Seng Hospital

Date Project Started (Maximum 128 Characters) (i.e. May 24, 2015):

2012

Department Name (Maximum 256 Characters):

Palliative Medicine & Operations (Community)

Names of Key Staff Involved in this Project (Maximum 512 Characters) (Separate names with comma):

Dr Raymond Ng Han Lip (Project Director; Palliative Medicine Consultant), Hayley Chau (Operations Lead; Asst Director, Operations Community), Roland Chong (Senior Advance Care Planning Coordinator), Jessie Eng Ramdat (Advance Care Planning Coordinator), Jasmine Tan Shu Zhen (Advance Care Planning Coordinator), Amanda Guo (Executive), Audrey Loke (Senior Admin Assistant)

1. Please give some background to the project or program including how it originated. Give details of the extent to which the project improves the efficiency or effectiveness of overall service because of physician involvement. Outline any specific goals or targets you had in mind prior to the project being put together. Maximum Number of WORDS – 350

Advance Care Planning (ACP) is a voluntary process whereby patients discuss, state, and document their values and wishes regarding future medical care with their carers, in the event that they are incapacitated from making decisions on their own. ACP helps to better align the treatment received by patients with their care preferences and improve quality of care near the end of life.

The benefits of ACP are manifold:

- Allows the patient to understand and reflect on his/her medical condition;
- Enables healthcare workers to prepare patients and families for the kind of decisions they may face in future;
- Clarify preferences and develop individualised plans of care;
- Enhance the patient's sense of control;
- Reduce emotional and decision-making burden for loved ones as well as conflict in crisis situations;
- Decrease post bereavement depression and anxiety for loved ones;
- Strengthen relationships between patients, their loved ones and healthcare providers.

In 2011, the Ministry of Health of Singapore launched a national Advance Care Planning programme in order to:

- i) increase awareness about ACP among healthcare professionals, community and religious leaders, and the public;
- ii) recruit and train ACP facilitators to conduct ACP conversations in health and social care organizations, and;
- iii) establish and strengthen systems to support ACP implementation including a national ACP IT system.

The TTSH ACP Project team was formed in 2012 consisting of a Clinical lead, Operations lead, ACP coordinators and Administrative team. Clinical leadership is crucial in engagement of stakeholders, training and practice of ACP. The goal of the ACP Project team is to increase awareness and practice of ACP and the vision is to make ACP a standard of patient-centred care.

2. Please give details how the project was beneficial from the patient's perspective and experience and how it improved patient care, patient safety or service? Preferably please present quantifiable information such as "before and after" measurements if any. Maximum Number of WORDS – 250

Research has shown that patients expect their healthcare team to initiate such conversations with them. ACP improves patients' and caregivers' satisfaction with care. There was positive feedback from surveys of patients and caregivers done post ACP

facilitation (Annex 1, Chart 1). In clarifying values, treatment preferences and goals of care, ACP has helped decrease burden of decision making on caregivers and foster better clarity of care when patients present in medical crisis in the hospital.

3. Please give some background to the project team or involved physicians who originated, studied and developed the project or program. Maximum Number of WORDS – 200

The ACP movement in Singapore originated when Dr Angel Lee, then chairperson of National Healthcare Group's end-of-life taskforce invited Respecting Choices, an ACP faculty from Wisconsin, USA, to Singapore to train healthcare professionals in their model of ACP. The programme was subsequently developed in TTSH by Dr Raymond Ng, currently a consultant in Department of Palliative Medicine, under the mentorship of Dr Wu Huei Yaw and Dr Mervyn Koh, who are the previous and current Heads of Department of Palliative Medicine. The work would also have not been possible without high level support from our Group Chief Executive Officer, Professor Philip Choo and Chief of Medical Board, A/Prof Thomas Lew as well as various physician clinical champions from the different disciplines.

Ms Hayley Chau, the operations lead and Mr Roland Chong, the senior ACP co-ordinator have also been instrumental in developing the programme.

4. Please demonstrate if and how the project produced sustainable results? Maximum Number of WORDS – 150

Over the years, TTSH ACP team has continuously shown its ability to exceed the national targets set by the Agency of Integrated Care (AIC), an agency appointed to oversee the implementation and running of ACP nationally.

Table 1 (Annex 2) shows a summary of the number of ACP done between the FY2012 to 2015.

The results show that the number of completed and documented ACP rise with each year. Of the patients referred to the ACP team for discussion, almost 100% would complete the ACP form. The team also displayed high responsiveness to the needs of patients by responding to all patients who have expressed interest in ACP discussion.

To date, ACP pilots have spread to 14 clinical departments.

It is noted, in regular audits of medical records, that almost 100% of medical treatment preferences (regarding CPR and extent of care) of patients are adhered to (Annex 2, Chart 1).

5. Was the process and means by which the project was conducted adequate to meet its goals? Was the composition of the team about right? Did physicians participate fully? Were appropriate analysis tools used? Explain why it was not just a matter of throwing money at the problem?

Maximum Number of WORDS – 200

The project worked by applying the 4 principles of successful ACP implementation as taught by Respecting Choices:

- a) Engaging stakeholders and community engagement — regular awareness talks were held hospital wide as well as in various departments and patient support groups.
- b) ACP training — regular ACP facilitation courses were held to train doctors, nurses, social workers and allied health staff in ACP facilitation.
- c) Regular audit and quality improvement — the ACP project team regularly audits outcomes of ACP facilitation and embarks on quality improvement initiatives.
- d) Improving systems in ACP information capture — a workflow for submission of ACP documents and capture in electronic medical records was crafted, including alerts in emergency department when patients with ACP come through.

The team consisted of the Clinical Lead and Operations Lead as well as the ACP coordinators who were involved in training and direct ACP facilitation. The team is supported by an administrative executive and an assistant. The team meet regularly every month to discuss plans. The team regularly audits number of ACP facilitations, number of facilitators trained as well as outcomes of ACP facilitation and rate of treatment preferences honoured.

As described above, there is significant work involved in planning, engagement and training.

6. Please give any other information, including third party testimonial regarding your project which you think would help convince the judges that this project (or program) should win this category. **Maximum Number of WORDS – 300**

“ACP is a very important part of the care continuum in the current landscape of a rapidly growing and aging population with increasing chronic diseases and multiple encounters with the healthcare system. The ACP Team has facilitated countless patients and families in having these important yet difficult conversations to establish their healthcare preferences. This has led to better patient-centred care and guided many healthcare teams in honouring the patient’s wishes for their care. They have also engaged the medical fraternity as well as the community by sharing about the role of ACP as well as providing training for new ACP facilitators within Tan Tock Seng Hospital, National Healthcare Group and beyond.”

***Dr Mervyn Koh, Head and Senior Consultant, Department of Palliative Medicine
TTSH***

“The ACP team has embodied the values and ethics of our hospital in tirelessly promoting, conducting, training and empowering volunteer healthcare workers to be trained in the sensitive and empathetic art of communicating the need for advance planning and care decisions for patients and their care-givers (e.g., for patients with no mental capacity). This in turn has enabled family and care-givers to take stock of end-of-life scenarios and issues that they or their next-of-kin may face in the foreseeable future. The work is at times emotionally taxing and may involve adversarial challenges from families and NOKs. The

team has assisted / completed 1,996 ACPs since Jan 2012 to now, the team is leading other hospitals in terms of training expertise, workflow development, conference sharing, and systematic rollout to various pilot disciplines. More than 90% of death cases audited had their EOL care preferences met.

The dedication and commitment of the ACP Team is to be congratulated and celebrated. I would like to highly recommend the team with the AHMA Awards.”

A/P Thomas Lew, CMB, TTSH