

Developing an ACP stocktake

What: Undertake a stocktake of ACP across an organisation

Why/rationale: To gain an understanding of the ACP activity being undertaken across primary care, secondary care and aged residential care.

Who: Southern DHB

Benefits/value added:

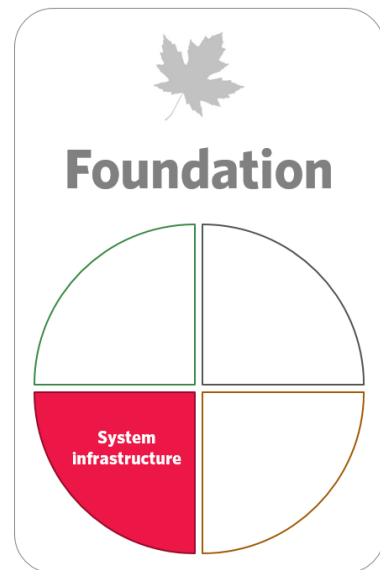
- The ACP facilitator gains an understanding from clinical staff of the training needs for ACP.
- Activity being undertaken can inform the local strategic plan and highlight opportunities for further development and activities.
- Enables a whole-of-system view when considering ACP activity planning.
- Information sharing between providers of ACP activity enhances learning opportunities.

Risks/challenges:

- A poor return rate of the survey.
- Organisations are unwilling to participate as they are not a part of the DHB.

Steps: How this looked on the ground

1. Formed an ACP working group with representation from primary care, primary health organisations, secondary care, NGO's, inpatient units and rural providers.
2. Checked what activity is happening in the region, by using the ACP Planning Deployment Model as a framework:
 - did a stocktake to understand the level of ACP activity
 - considered the cohorts of primary care, secondary care and aged residential care for stocktake, clinicians who have completed L2 ACP training.
3. Developed stocktake questionnaire, for example:
 - What is your work setting? (Please name the service.)
 - Have you undertaken ACP conversations with patients in your setting?
 - Are you aware of any ACP conversations being had in your setting? If so by whom?
 - Is there any structured process and/or support mechanism for having ACP conversations in your work setting with regards to ACP?
 - If yes, please briefly describe it? (Who is involved/how is it communicated/responsibility etc?)
 - Please provide any other comments regarding ACP.



4. Distributed stocktake questions via PHOs, service managers and general managers.
5. Collated information returned and considered which cohort to develop an ACP project with.

Impact: Outcomes to date

Links with WellSouth (PHO) Client Led Integrated Project AND to Acute Respiratory Ward ACP Brief Intervention project to advise what system issues were highlighted from survey responses.

These projects are also being monitored to inform future systems.

Future opportunities:

Use of these models (as above) to inform ACP work across all settings.