ACP education for nursing staff

What: Including ACP education in clinical update days for nursing staff, ie, the days when nurses come together to do yearly updates on fire, CPR, etc.

Why/rationale: To educate nursing staff about ACP using existing education structures, over a 12-month period. The DHB used this approach for update days run by the following specialties:

- medical
- surgical
- oncology/haematology
- rural.

Who: Canterbury DHB

Benefits/value added:

- All nursing staff access ACP education over a defined period.
- ACP messaging is consistent.
- Maximising of opportunity to get 'bang for buck' with education time.

Risks/challenges:

Significant staff commitment in delivering the sessions 2–3 times per month per speciality for the whole year.

Steps: How this looked on the ground

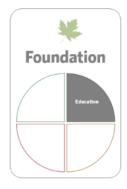
Foundation

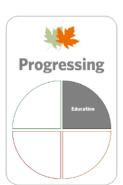
- 1. Liaised with the nurse educators running the training/update days to request a slot for ACP.
- 2. Created a 'master' PowerPoint presentation that:
 - a. introduced the concepts of ACP
 - b. outlined the legalities
 - c. outlined local processes
 - d. encouraged staff to consider the relevance of ACP to their workplace and patient group.

The presentation can be supplemented by relevant case studies for the different specialties.

Progressing

- 1. Delivered sessions across the 12-month period.
- 2. Included slides promoting level 1 e-learning and advertise any upcoming national ACP training (level 1a and level 2).





Embedding

Running update sessions, ie, delivering an ACP update to the same group of nurses 18 months on. This includes a presentation featuring:

- a recap of ACP and legalities
- what's new (such as new national guide, updated IT, regional consistency in the New Year, etc)
- facilitated discussions of shared experiences
- the role of nurses in ACP (brainstorming things like: where is a plan found on the system? Whose role it to identify a plan? How do they make it visible to their colleagues?).

Impact:

Of patients admitted to Christchurch Public Hospital with advance care plans, 81% of those plans are identified by clinical staff without prompting from the ACP facilitator.

Future opportunities:

A similar process has also been used to deliver ACP education at:

- staff orientation
- nurse entry to practice (NetP) nursing group
- resident medical officer education sessions
- allied health education sessions.

Similar examples from others:

ACP integration into undergraduate medical training (Minnesota example)

