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Start2Talk

PLANNING AHEAD COMMUNITY AND HOME CARE TOOLKIT

Advance care planning (ACP) continuous quality improvement audit tool

Planning ahead includes planning across a range of financial, health and personal issues including preparation of wills, power of attorney (financial), nomination of substitute decision makers (SDM) for personal and health care , advance care planning (ACP) and lifestyle planning e.g. accommodation, support services, work and driving.

The purpose of this Continuous Quality Improvement Audit Tool is to assist home care and community service providers to assess their current practice and to improve specifically the ACP component of planning ahead. All issues may not be relevant for all organisations. Organisations are encouraged to use the audit tool in a way that best meets their needs. It is also important that staff also have the knowledge and are empowered to prompt and encourage their clients in in other areas of planning ahead or provide information and referral to other professionals who can assist them

Further resources to assist organisation to implement and improve ACP are available in the community and health professionals section of the Start2Talk website at www.start2talk.org.au

How to use this CQI Audit and Action Planner

1. Answer each question and circle “Yes”, “Partial” or “No”
2. Prioritise the questions that have a “Partial” or “No” answer and that require action(s)
3. For the “Partial” and “No” answers, consider the “recommended actions” and who would be the most appropriate person or group to take on the responsibility to carry the work forward.
4. For the “Yes” answers consider how this could be audited/reported to indicate improvement. Templates or systems may need to be developed.
5. Commit to a date to follow-up actions.
6. Consider using the Continuous Quality Improvement For ACP guide in the Community and Health Professionals section of the Start2Talk website to support practice change.

Acknowledgment: Adapted with permission from, My Wishes Advance Care Planning Program, Continuous Quality Improvement (CQI) Audit for Residential Aged Care Facilities. South Western Sydney Local Health District; Sydney, NSW. Please note the original audit tool was developed by the Hunter New England Area Health Service.

Planning Ahead Including Advance Care Planning (ACP) Continuous Quality Improvement Audit Tool

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
1	Does your service have a copy of relevant state or territory government policies and guidelines, including; - *Clinical Practice Guidelines and Principles of Care for people living with Dementia* - Relevant advance care planning policy documents - guidelines for working with culturally and linguistically diverse communities (CALD), Aboriginal and Torres Strait Islander communities and gay lesbian bisexual and transgender communities (GLBTI).	Yes Partial No	Check that your organisation's policies and practices reflect the salient information in these document(s). Check your State or Territory website for any relevant ACP strategy, guideline or policy documents and download these for review and use.			
2	Does your organisation have a policy or guideline that includes planning ahead including identification of substitute decision makers (SDM), and ACP? ACP may also be incorporated into other relevant policies and procedure documents.	Yes Partial No	Check that a review date is included on the documents that these documents are current and they reflect current 'best practice'. Identify appropriate person(s) to develop policy or guidelines and include relevant stakeholders in the development e.g. GPs. Identify and update any other relevant policy and guideline documents to include ACP.			

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
3	Does your organisation have a 'ACP culturally sensitive practice guideline' that includes how culture affects ACP when working with CALD, Aboriginal and Torres Strait Islander peoples and GLBTI communities.	Yes Partial No	Check that a review date is included on the document(s) and that the document(s) been reviewed on that date. Does it reflect current 'best practice' Identify appropriate person(s) to develop the guideline and include relevant stakeholders in the development. Identify and update any other relevant policy and guideline documents to include ACP and culturally sensitive practice.			
4	Does your organisation identify a legally appointed SDM for all clients when they first access your service? Is a copy of the relevant document(s) on the client's file? Is permission sought to send copies of the documents to the client's GP and local hospital medical records.	Yes Partial No	Incorporate discussion of the importance of appointing a SDM into all routine initial assessments. Ensure that the client understands and has input and support into choosing their SDM. Develop procedures for placing document's on the client's care file and sending copies to the client's GP and local hospital.			
5	Are local area GPs aware of and supportive of ACP.	Yes Partial No	Ensure GPs have input into any new policies or forms related to ACP that are developed Encourage GPs to include ACP as part of routine care as well as 75+ health assessment. Engage with and elicit support from local GP or primary health care networks for obtaining or disseminating early planning information aimed at GPs.			

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
			Engage GPs in strategic discussions about the role of early planning in home care and community services.			
6	Do staff know how to make a referral to a GP to assist in ACP? This may be for a ‘capacity’ assessment or to sign any legal documents e.g. appointment of a SDM or to discuss and complete an ACP especially in relation to a chronic condition e.g. dementia.	Yes Partial No	Check that the GP feels the current system, including referrals, meets their needs in relation to ACP development for their patients. Develop a system to refer clients to other services including the GP as required e.g. dementia diagnosis if it is considered beneficial.			
7	Do you provide early planning information brochures or similar to your clients at the initial assessment.	Yes Partial No	Check to see if this information is meeting the client and their family’s needs. Develop or download relevant information brochures, flyers or other resource material from your state or territory government health website or visit the health professionals section of the Start2Talk website.			Record verbal feedback Incorporate in client service satisfaction questionnaires.
8	Is a conversation about the benefits of early planning had at the initial assessment covering a range financial, lifestyle and health factors? Is there a system to ensure conversations are followed up at subsequent care review sessions?	Yes Partial No	Check to see if this conversation/information support is meeting the client and their family’s needs. Ensure relevant staff start this conversation at the initial assessment and provide relevant information. Develop a system to ensure follow up occurs at 3, 6 or 12 month routine review session as per your organisation’s service delivery protocols.			Record verbal feedback Incorporate in client service satisfaction questionnaires.

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
9	At the care review session(s): Is the conversation on planning continued and information or specific ACP forms provided? Are staff able to assist the client to complete forms, answer questions or refer the client to another service for information or assistance?	Yes Partial No	Review the conversation/information support process to see if it is meeting the client and their family's needs Ensure staff are; - trained and know how to continue the conversation on the benefits of planning ahead, are to assist the client complete any forms and know how to get more information or where to refer for further information or assistance.			.
10	Has the ACP documentation including SDM been placed on the client's care planning notes in a clearly visible and easily recognisable place?	Yes Partial No	Check relevant staff are aware of where the documents are stored on the client's care plan folder and where to access and download the documents from the electronic records management system. Develop systems for staff to place all relevant documents on the client's care plan and any electronic records management system for retrieval, review and use as appropriate.			Conduct audit of client flies
11	Are ACP conversations and documents reviewed after a health incident, decline in health or after a major life transition e.g. change in place of residence?	Yes Partial No	Review the conversation and information support process to see if it is meeting the client and their family's needs. Ensure staff continue conversation about the values and wishes of a client and encourage			Record verbal feedback at care review sessions. Incorporate in client service satisfaction questionnaires.

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
			the completion of the legal appointment of a SDM and ACP documents. Ensure staff have the skills to assist their clients to complete documents, know where to go for more information and how to refer to other health services e.g. GP for input and assistance in completing an ACP.			
12	Are there systems in place to ensure new planning documents replace older versions?	Yes Partial No	Check if staff are aware of this process and survey or audit if this process is occurring. Ensure that new documents are placed on the client's file and with their permission forwarded to their GP and local hospital medical records.			
13	If the client is transferred to another place of residence, hospital or another health care service does a 'transfer form' identify if an ACP is attached or where it is available.	Yes Partial No	Check if staff are aware of this process and survey or audit if this process is occurring. Develop procedures that will ensure the transfer of documents is done routinely and systematically. E.g. An existing plan is photocopied onto coloured paper or placed in a coloured plastic sleave to make it more obvious. A folder or envelope goes with the client on transfer with all relevant documents including a checklist of included documents.			

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14	Has the organisation identified a person or key people as ‘champion’ for ACP?	Yes Partial No	Ensure staff have the support they require to implement, maintain or improve systems to support planning ahead. Document these supports and how they are provided. Identify a person or people who can take on the role of champion. Determine what their needs may be to take on this role in terms of resources and training. Ensure that systems are in place to support their role.			Staff survey or questionnaire to assess satisfaction, challenges or barriers
15	Do all staff receive an overview of ACP and ACP procedures in the organisation at their orientation or induction session?	Yes Partial No	Check with new staff to see if the information is adequate following the orientation session. Include information on early planning in the orientation sessions as well as any specific requirements pertaining to participant planning roles. Provide contact information for the ‘ACP champion’.			Record any verbal feedback; Evaluation form to include a question on this topic
16	Do all relevant staff e.g. care or case managers receive ACP, dementia specific and culturally sensitive practice training.	Yes Partial No	Check if staff consider that training is meeting their needs and is adequate for them to carry out the duties of this role. Consider ongoing ‘refresher’ training, sessions to discuss case studies and difficult situations. Include formal ACP, dementia specific and culturally sensitive practice training in the organisation’s annual training calendar.			Record any verbal feedback; evaluation form to include a question on this topic

Issue	Question	Achieved	Recommended Action	Person responsible	Due date	Audit process
17	Are staff surveyed regarding issues that arise in regard to the ACP service?	Yes Partial No	Review the outcomes of any staff surveys or questionnaires for quality improvements to organisation policies, procedures, training and staff supports. Develop ACP staff survey or questionnaire for regular annual or biannual review.			Report results of quality improvement initiatives to management and staff