

Conversations about Advance Care Planning are important.

#WhatCanYouDo

Advance care planning can:

- ensure that a **patient's wishes are followed** when they lose the capacity to make decisions for themselves
- help patients to **die in their usual place of residence** (where appropriate)
- **reduce end of life care costs** to the health service.



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End of Life Care Conversations

We asked clinicians for their first thought before they discussed advance care planning... #EOL

How do I begin? How much time do I have? Stop any interruptions? OMG do not mess this up! Remember your previous advanced communication training.

Anxiety - don't know how to start or know what information to give.

I hope I get this right.

Positive - good to meet patient/family and learn what they know, are thinking and feeling.

Wanting to be empathic

Feeling vulnerable because of lack of confidence.

I feel glad they've brought it up first



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Some healthcare professionals are reluctant to discuss dying with their patients. #EOL

- **25% of GPs say that they have never initiated discussion about advance care planning** – they know ACP discussions are important, but hesitate to start conversations about dying.
- **60% - 90% of patients with life threatening illness report never having discussed end of life care issues with their clinician.**²

¹ http://www.endoflifecare-intelligence.org.uk/resources/publications/what_we_know_now_2014

² Brighton LJ, Bristowe K. Postgrad Med J (2016);92:466-470.



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We asked healthcare professionals whether they had avoided a conversation about advance care planning in the last 3 months.
#EOL

- **Nearly one quarter (24%)** of healthcare professionals said that they had avoided a discussion about advance care planning within the last 3 months. *

* Sample size was 127 and 26 did not answer the question.



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How does SAGE & THYME for Advance Care Planning differ from SAGE & THYME Foundation Level training?

#SAGEandTHYMETraining #NHS #EOL

	SAGE & THYME Foundation Level	SAGE & THYME ACP
Target audience	All levels of health and social care staff (clinical and non-clinical) requiring foundation level communication skills	Senior staff who engage in advance care planning/end of life care conversations (e.g. GPs, healthcare staff, social workers, lawyers)
Previous experience required	None	Experience of advance care planning / end of life care/ Gold Standards Framework
Aims	To provide a structured approach to dealing with concerns	To provide a structured approach to addressing advance care planning issues and dealing with concerns
Duration of workshop	3 hours	3.5 hours
Number of learners per workshop	30	30
Workshop format	Lecture, small group work and interactive rehearsals	Lecture, small group work and interactive rehearsals

SAGE & THYME ACP workshop provides level 2 communication skills training #SAGEandTHYMEtraining

- **Level 1:** all staff
- **Level 2:** health and social care professionals with additional expertise
- **Level 3:** trained and accredited professionals (e.g. counsellors)
- **Level 4:** mental health specialists

From:

NICE (2004): Improving supportive and palliative care for adults with cancer



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Who is the SAGE & THYME ACP workshop for and what does it teach? #EOL #SAGEandTHYMEtraining

The SAGE & THYME for advance care planning (ACP) workshop:

- is designed for **doctors and nurses in the community, hospitals, nursing and care homes** who have ACP experience
- teaches how to:
 - **open a conversation** about ACP
 - **determine patient's preferences around the end of their life**
 - **listen and respond** to patient's concerns.



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The SAGE & THYME for advance care planning workshop lasts 3.5 hours #SAGEandTHYMEtraining #EOL



Group work,
lecture, rehearsals



30 participants



3 facilitators



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What do others say about the SAGE & THYME for Advance Care Planning workshop? #SAGEandTHYMEtraining

“I was reasonably confident about communication in EoL [end of life] (perhaps cocky!), so when I attended the SAGE and THYME workshop last September I smugly thought I didn't have much to learn. I was wrong; it helped me greatly to structure conversations better. I used this structure for the Dying Matters DVD which was well received. The 30 GPs in Morecambe also gave very positive feedback.”

Dr Peter Nightingale, GP

“You think you know how to do this, I've done this for over 20 years and have learnt very useful new skills.”

**Dr Sue Sinclair, Consultant
Anaesthetist, University
Hospitals Birmingham NHS
Foundation Trust**



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The SAGE & THYME for advance care planning (ACP) workshop assumes prior knowledge

Participants attending S&T ACP workshop should:

- have an **understanding of what advance care planning and end of life care involves**
- be **aware of the relevant guidelines and laws**
- know about **relevant ACP documentation.**



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Why choose SAGE & THYME advance care planning training? #DyingMatters

The National Care of the Dying Audit recommends that staff have communication skills training

The SAGE & THYME model is used to demonstrate an advance care planning conversation in a Dying Matters resource

The Palliative and End of Life Care Strategy for Northern Ireland uses SAGE & THYME as an exemplar

SAGE & THYME is referenced in **Advance Care Planning in End of Life Care** (edited by Keri Thomas)



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What is the evidence behind the SAGE & THYME for advance care planning workshop? #SAGEandTHYMEtraining

A study involving **413** healthcare professionals (31% GPs) where 91% completed pre and post workshop questionnaires showed that:

- There was a **significant increase** from pre- to post-workshop in the level of:
 - confidence in **starting** an end of life or advanced care planning (ACP) conversation
 - confidence in **responding** to a patient's or relatives concerns
 - perceived **competence** in conducting an ACP conversation.
- **74%** would **definitely change** their practice as a result of the workshop.
- **88%** would **definitely recommend** the workshop.



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Why is advance care planning training a priority for commissioners? #NHS #CCGs #EOL

Discussing advance care planning facilitates patient-centred care and increases patient satisfaction and allows the patient's wishes to be implemented

RCGP (2009), ACP national guidelines

An advance plan can reduce use of ambulances, emergency departments and hospitalisation rates

NHS England, CQUIN guidance 2015/16

Advance care planning should improve NHS service efficiency

Department of Health (2012), End of Life Care Strategy

NHS England end of life care commissioning guidance encourages commissioning training

NHS England (2016), Commissioning person centred end of life care

Good care of the dying includes complying with the patient's wishes. #EOL

- Research has shown that whilst good care of dying patients includes complying with the patient's wishes, an advance care plan (ACP) is not always completed.
- One reason is that staff find it difficult to initiate such discussions.
- The **SAGE & THYME ACP workshop** teaches healthcare professionals how to:
 - open a discussion about advance care planning
 - manage any concerns that a patient may have
 - ensure that their patients receive the right care, at the right time and in the right place.



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What do participants say about using the SAGE & THYME model to assist with advance care planning and end of life care?

"I feel relieved that I now have more confidence to embark on end of life conversations."

Practice Nurse

"Using the structure will take the stress out of holding end of life conversations."

Nursing Home Manager

"Took away the panic. Gives a structure to work by."

GP Registrar

"I was surprised that by letting the patient talk through things they seem more clear and definite of what they want/don't want by the end of the conversation".

Staff Nurse

"Very useful blueprint for a thorough, patient-centred discussion. Everybody leaving happy with a plan in place."

GP



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