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Understanding factors related to Advance Care Planning completion in Eastern Singapore

Changi General Hospital
SingHealth

Ho, E., Tan, H.L.B.M., Chew, S.K.J., & Koh, L.H

Aim

Advance Care Planning (ACP) is a communicative process to help patients and their families make informed decisions about care preferences. Completing ACP increases the likelihood that patients will receive care that is consistent with their preferences in a medical emergency, or at their end of life. However, improving ACP completion rates in Singapore remain a challenge due to a confluence of social, cultural, and organisational barriers. The aim of this study is to determine factors associated with ACP completion and reasons impeding ACP completion.

Methods

We analysed a dataset of 1742 patients referred to the ACP office between Jan 2016 to Dec 2019 at a tertiary hospital. We conducted a logistics regression analysis to estimate the effect of age, gender, decision-making capacity, referral source, or facilitator occupation on ACP completion. ACP completion was defined as the percentage of patients who had completed the ACP discussion and documentation processes. Among patients who had initiated ACP, but had not completed ACP, we performed a content analysis of case records to explore reasons impeding completion.

Findings

- Mean age of patients referred for ACP was 79.6 years.
- 49.4% completed ACP, while 36.3% of patients rejected ACP. 14.2% of patients initiated ACP, but did not complete it.
- Patients were more likely to complete ACP when (Table 1):
  - Family members completed discussion on behalf of patients who lacked decision-making capacity.
  - Discussions were facilitated by a doctor relative to a dedicated facilitator.
  - Patients from the palliative care service and nursing homes relative to Geriatric patients.
- Patients had lower odds of completing ACP when:
  - Discussions were facilitated by a nurse relative to a dedicated facilitator.
  - Referred from surgical departments relative to patients from the Geriatric department
- Key reasons impeding ACP completion (Table 2):
  - Hesitant patients and family members.
  - Perceiving ACP as unnecessary.
  - Patients' unstable or deteriorating medical condition.

Table 1: Key predictors of ACP completion

Decision-Making Capacity	OR (95% CI)	p-value
Yes	Ref	
No	1.5 (1.18 - 1.9)	**0.001**
Referral Source		**0.000**
Geriatric Medicine	Ref	
Surgical specialities	0.66 (0.44 - 0.99)	**0.044**
Palliative Care	1.64 (1.04 - 2.56)	**0.032**
Nursing Home	18.3 (4.02 - 83.8)	**0.000**
Other Clinic/Hospital	8.84 (3.67 - 21.3)	**0.000**
ACP facilitator		**0.000**
Dedicated faciliator	Ref	
Nurse	0.7 (0.53 - 0.91)	**0.008**
Doctor	4.18 (2.44 - 7.17)	**0.000**

Table 2: Reasons impeding ACP completion

Category	Sub-category (n)
Family factors (36.5%)	Undecided, need more time to contemplate options (43) Do not see need (15) Has other priorities (11) Uncomfortable with documentation (10) Uncomfortable initiating topic with patient (6) Absent/ no time (5) Family conflict (1)
Patient factors (36.1%)	Undecided, need more time to contemplate options (22) In poor condition (18) Do not see need (14) Patient and family undecided, need more time (14) Uncomfortable with documentation (12) Too emotional for discussion (9) Patient RIP (1)
Process factors (10.4%)	Case closed/passed on to other institutions (17) Administrative issues (6) Patient discharged (3)
Unknown (16.9%)	

Conclusion

Our findings suggest possible points of intervention to improve ACP completion rates. On the organisational front, ACP capacity-building and better interprofessional collaboration between departments could improve the likelihood of ACP completion. This needs to be complemented by efforts to enhance patient education and develop means of upstreaming ACP awareness-building. This may help to improve patient and family preparedness for ACP when situation calls for it.

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