### Respecting Choices

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澄雲教育委員會共學小組

### 作法参考-P3

□P1-理解/整理/摘要□P2-分析/比較/檢討□P3-提議/分享/討論

以下本PPT有關介紹Respecting Choices之資料皆引自

: https://respectingchoices.org/

#### Respecting Choices®

is an internationally recognized, evidence-based model of advance care planning (ACP) that creates a healthcare culture of personcentered care—care that honors an individual' s goals and values for current and future healthcare.

# Mission

Guide organizations and communities worldwide to effectively implement and sustain evidence-based systems that provide person-centered care.

# Vision

Transform healthcare culture by integrating and disseminating best practices to achieve personcentered care.

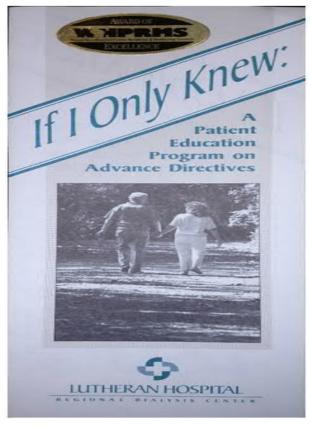
## History

- □ 1985 Bud Hammes/clinical ethicist/<u>Gundersen Health System</u>→發現問題:系統+HP→解決問題:ACP process/system-Lutheran Hospital
- □1986-87 <u>"If I Only Knew…" program</u>→透析中心60病人→病人與家屬的對話→AD量+plans清楚可用+家屬滿意→降低家屬及HP有關是否繼續或終止LST之moral distress
- ■1990 " Why couldn't we do this for the whole community?" →community task force to improve care by ACP → ACP program-Respecting Choices
- □ 1993 The first Facilitator education was offered in 1993 in La Crosse, Wisconsin
- □1995-96 Allina Foundation-<u>La Crosse Advance Directive Study (LADS I)</u>-85%/96%/98%(1998) →引起全美health organizations對RC**的注**意
- □ 1999 <u>Linda Briggs</u>/critical care nurse specialist/clinical ethicist/curriculum development specialist **加入**→ launching the international platform for RC
- ■2000 The first national RC education occurred in La Crosse in Spring-Facilitator

  Certification/Design and Implementation content/Instructor Certification (4天課程)
- □ 2002 Australia/ 2004 Canada/ 2007 Germany/ 2009 Singapore
- □ 2007-08 LADS II 90%/99%/99%
- ■2017 RC program → Coalition to Transform Advanced Care (C-TAC)

### Bud Hammes/Linda Briggs







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### Programs/ Services

- **□**Implementation Services
- 3 stages of planning:

First Steps® (FS), Next Steps (NS), and Advanced Steps (AS) and Shared Decision Making in Serious Illness (SDMSI).

- Consultation Services
- ➤ Implementation Consultation/Leadership Engagement Consultation/Organizational Assessment Consultation/Organization Faculty Certification Program

### 3 stages of planning-ACP時機

Individuals Whom It Would Adults With Progressive Life-Healthy Adults Or Those Who Not Be A Surprise If They Died limiting Illness, Suffering Have Not Planned Frequent Complications In The Next Year First Steps® Last Steps® Next Steps Certified Facilitator Create an AD that Create/update an Create/update an RN/SW/Other) identifies healthcare AD that identifies AD that identifies agent and goals of care healthcare agent and healthcare agent and goals of care if illness identify goals of care, for permanent complications result expressed as medical brain injury. in "bad outcomes." orders using POLST paradigm. Review prior documentation of goals, values Document and create plan to honor decisions Provider Palliative Care Discern goals (or use documented goals from previous ACP conversations) to assist with symptom management and other treatment decisions. Provider Shared Decision Making in Serious illness Discern goals (or use documented goals from previous ACP conversations) when using the decision-making framework for any decision.

#### Curriculum/Certifacations

to support an organization or community transformation to a person-centered healthcare culture

- □ Communication Skills and Education-Building Physician Skills in Basic ACP online course/ Certification programs for ACP Facilitators and Instructors
- **□** Design and Implementation Strategies
- Respecting Choices® Certification Programs
- **□**Stages of Planning

## Key Elements in Designing and Sustaining an Effective ACP program



### 分析

#### □Respecting Choices的演變

- ▶目標:提供一個教育護理人員之全面、有架構系統,以促進病人與家屬之 對話
- →藉由ACP計畫之實施,以改善照護
- →提供藉由ACP之研習、認證及輔導實施,促進person-centered care之healthcare culture轉換及落實。

#### □ACP系統觀

Leadership Matters/ System Redesign/ ACP Education and Facilitator Certification/ Community Engagement/ Continuous Quality Improvement

### 比較/檢討

	Respecting Choices	預立醫療照護諮商
ACP <b>定位</b>	person-centered care <b>之工具</b>	為預立醫療決定之前置 程序
ACP <b>性質</b>	■是一個有關未來醫療照護決定之理解、思考及討論,而持續性以人為中心之溝通過程。 ■ It is a process, not an event.	<ul><li>■ 為預立醫療決定之說明過程</li><li>■ 偏重於一次性及簽署結果</li></ul>
ACP時機/重點	3 stages→HCA、不同因應	2stages/HCA未受重視
ACP system	5 key elements/Facilitator/Instructor Organization Faculty/Coordinator	leadership? 核心講師? 研習課程?
作法	inbound/outbound <b>的研習課程+直接到組織提供</b> redesign <b>服務</b> -grassroots	■ inbound+個人研習 ■ 政府?

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### 提議/分享/討論

ACP定位→建構 person-centered care醫療照護文化之工具

- →非拘限於為預立醫療決定的前置程序
- →ACP之臨床一般化,實踐 person-centered care (臨床倫理面); 非僅立於自主權行使(權利保障面)
- →ACP非限於意思決定過程之程序保障,藉由過程中之對話、討論及溝通,相關主體更易確實理解及尊重本人的想法、意願等
- →建構 person-centered care

