

09 **AN INNOVATIVE APPROACH TO IMPROVE ADVANCE CARE PLANNING: CATALYSING ACTIVE PATIENT DECISION MAKING AT END-OF-LIFE**

H D. Blank¹ *¹Director of Clinical Counseling, Vital Decisions, LLC; ²Bioethics Advisor, Healthcare Foundation Center for Humanism and Medicine, UMDNJ-New Jersey Medical School, Newark, New Jersey; ³Adjunct Professor of Bioethics, Stevens Institute of Technology, Hoboken, New Jersey*

10.1136/bmjspcare-2012-000250.9

Vital Decisions' Living Well Program is a nationally recognised patient-centred, telephonically delivered counselling program for end-of-life patients. A growing consensus in the literature notes that advance care planning may best be understood as a "health behaviour" and that the most effective intervention to increase patient participation is to provide custom-tailored information and counselling matching

the individual's readiness for engagement. Our unique behaviour change Prochaska model, motivational interviewing, and counsellor neutrality, catalyses patients to become pro-active in their advance care planning and improves the communication and decision making processes. Using proprietary algorithms, patients are identified six to nine months prior to anticipated death to foster informed decision making. Engaging the patient "upstream" allows counsellors to work with the person while they are undergoing life prolonging therapies and have a relationship in place when care plan shifts become appropriate. The intervention, delivered over three to six sessions, focuses on helping patients reach the stage where they are ready, willing and able to discuss future quality of life priorities. This typically results in a Living Well Progress Plan that aligns with patient goals of care. Our rigorous outcomes measures indicate an enhanced quality of life, increased satisfaction and lower costs in advanced illness patients. The primary driver of savings is increased self-selection of palliative and hospice care earlier in the disease trajectory for longer periods. In conducting over 15,000 cases, our results demonstrate that patient activation during this time results in informed advance care planning with decreasing demand for non-beneficial treatments.