

87 **CONTROLLED FOLLOW-UP SURVEY OF QUALIFIED
ADVANCE DIRECTIVES TWO YEARS AFTER
IMPLEMENTATION OF AN ACP PROGRAM**

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Background Implemented in 02/2009, the German regional ACP program *beizeiten begleiten*[®] ('be caring betimes'), based on Respecting Choices[®], has demonstrated a moderate effect on the distribution of advance directives in the intervention region's nursing homes. In a follow-up study, we examined whether the effect was sustained and increasing over time.

Methods Two years after the intervention (04/2011), in a cross-sectional controlled follow-up survey we compared written AD's of all live residents and a random sample of recently (since 1.7.10) deceased residents of the three co-operating nursing homes (n/hs) of our intervention region with corresponding random samples of similar size among the residents of 8 n/hs in our control regions. Primary endpoint is the prevalence of qualified ADs; an AD was regarded qualified if it included a decision on CPR, and carried a physician's signature. AD status of 235 live and 35 recently deceased residents in the intervention region was compared with that of 279 live and 36 deceased residents in the control region.

Results In the comparison between intervention and control region, 56.7% vs. 26.0% had any written AD, 42.6% vs. 1.3% had an AD regarded helpful in case of sudden cardiac arrest, 38.3 vs. 5.7% were signed by a physician, and 37.8% vs. 0.6% fulfilled both criteria ($p < 0.001$ for all comparisons).

Conclusion The data confirm a sustained and relevant effect of the regional ACP program's implementation whereas qualified AD's seem rare exceptions elsewhere in German nursing homes.