

Practitioner practice; Maori patients in a medical ward; Assessment Treatment and Rehabilitation Service; Aged Residential Care Facility. Clinical staff in the pilot areas had ACP conversations with elderly participants. Clinical staff raised ACP awareness with the general public.

Results Of the 82 participants, 75% were interested in continuing ACP conversations (verbal and/or documented) with appropriate people for example, family/whanau; health professionals; lawyers. The pilot evaluation and recommendations identified several key areas, including outcomes and challenges that are being addressed collaboratively across the sectors. These are forming the basis for a Wanganui district wide application of ACP, that are in align with national and regional directions.

Discussion An integrated approach has been a successful way to introduce ACP to Wanganui region stakeholders, and has enabled significant progress in a short period of time.

Conclusion Findings to-date, indicate the Wanganui pilot supports an integrated approach for ACP across the specialist; primary and community services, with a common vision, shared processes and systems to improve end of life health care for the elderly.

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PILOTING AN INTEGRATED APPROACH OF ADVANCE CARE PLANNING FOR AN ELDERLY POPULATION WITHIN A PROVINCIAL CITY

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Background Advance Care Planning (ACP) has been introduced into New Zealand in recent years. New Zealand National ACP Cooperative has developed ACP tools and resources. Wanganui is a provincial region (population 62 000 and above average elderly age group), and took the opportunity to take an integrated approach for piloting and implementing the Cooperatives tools.

Aim To implement ACP within Wanganui region and gain sector-wide engagement and coordination (integration).

Methods The 6 month pilot trialled the National ACP tools in primary and secondary areas; General