

Building Primary Palliative Care Competencies in Long-Term Care Advanced Practice Clinicians

Objectives:

- Describe the core primary palliative care competency needs for advanced practice clinicians in the long-term care setting.
- Describe methods that can be used on a national scale to educate and mentor clinicians on advance care planning, goals of care, discussions, contingency planning and symptom management skills.
- Identify potential outcome measures of a national primary palliative care education program.

Introduction/Background:

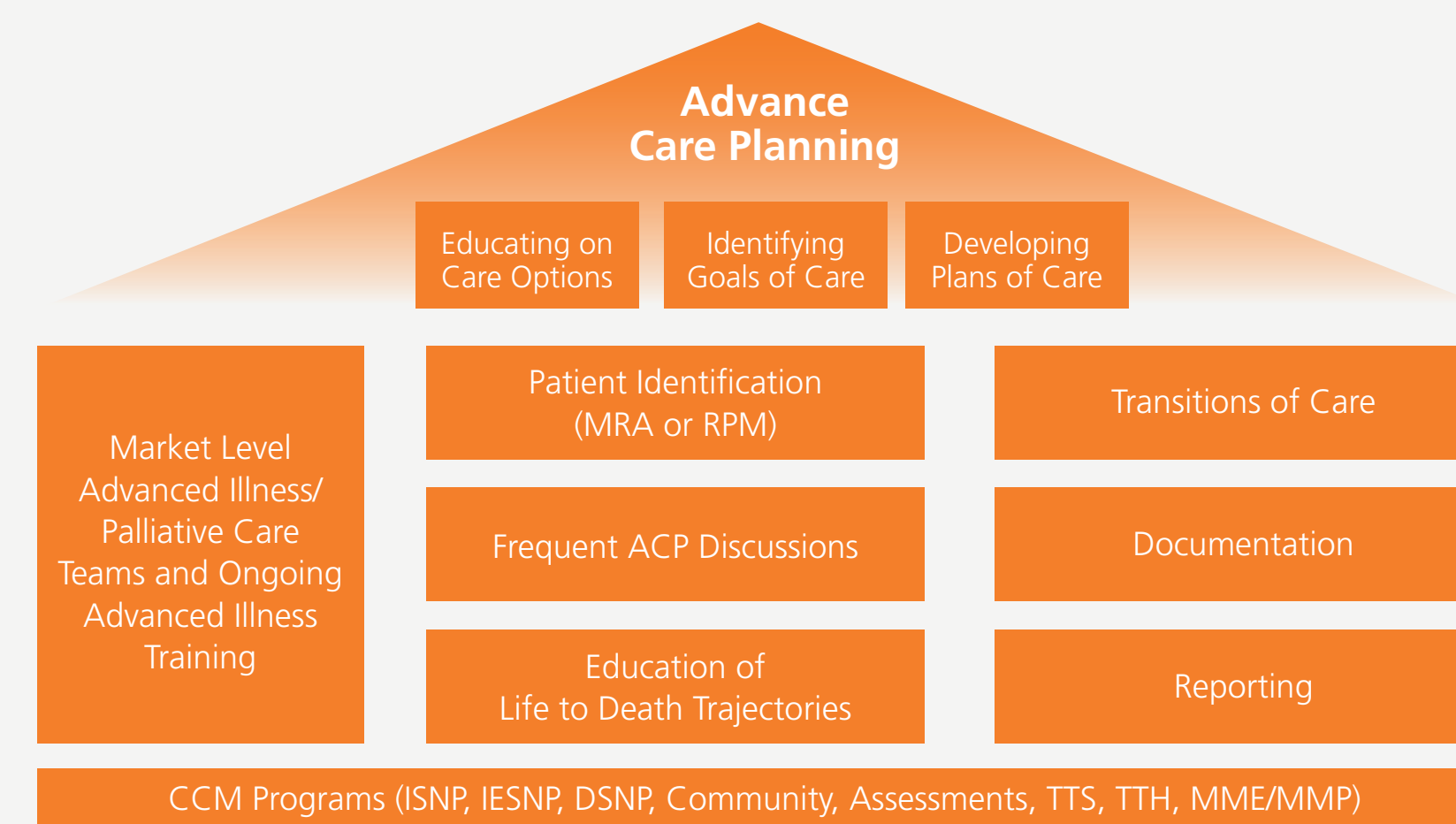
OptumCare CarePlus program is a national program across 27 states serving residents living in skilled nursing facilities (SNFs). The clinicians who coordinate the care for these residents must be proficient in primary palliative care skills including:

- Conducting effective advance care planning conversations
- Identifying individualized goals of care
- Providing appropriate symptom management to treat in place

The purpose of the advanced illness education program and model is to provide ongoing education, mentoring and national oversight in building primary palliative care competencies for all clinicians within the organization.

In early 2015, there was an increase in acute hospital utilization rates in the CarePlus program. An internal review of hospitalizations in Q1 revealed that 26 percent of those hospitalizations occurred in patients who were identified as having primarily comfort goals of care. As a result, an intensive education effort was undertaken to focus on building the primary palliative care skills of the clinicians.

OptumCare Program Pillars – Member Centric Care



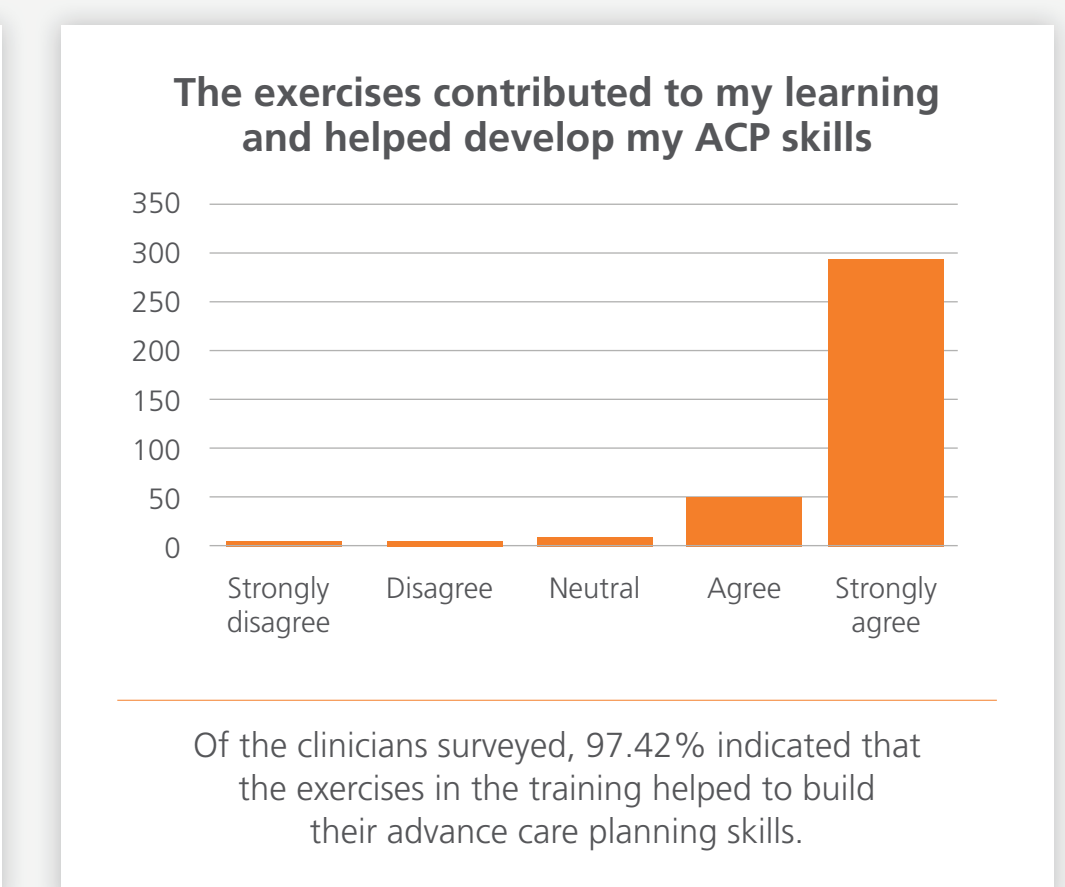
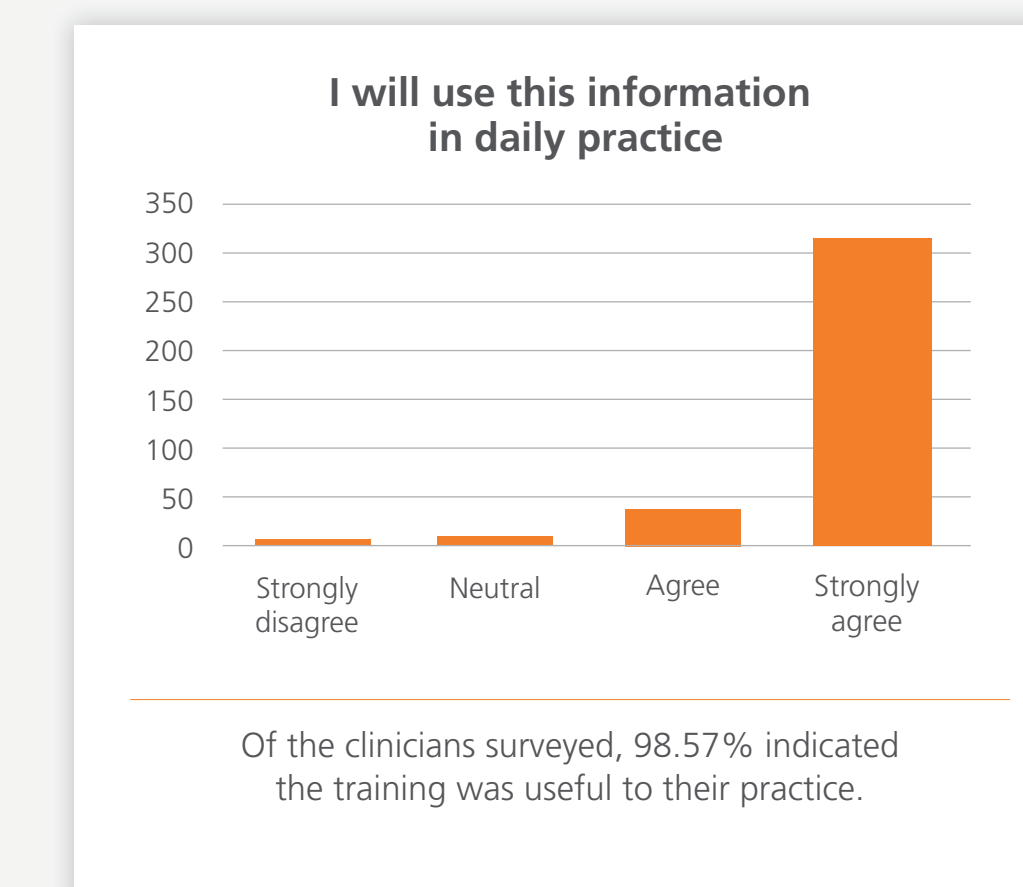
Methods:

Two Approaches to Advanced Illness Training

New or Inexperienced APRNs	Experienced APRNs
<ul style="list-style-type: none"> • One day in person training • Combination of lecture, case studies, role playing, and multimedia presentations • Topics included: <ul style="list-style-type: none"> – Prognostication – Communication skills – Advance Care Planning – Conducting goals of care discussions – Contingency planning – Symptom management • Likert-scale used to evaluate clinician satisfaction with training 	<ul style="list-style-type: none"> • Ongoing train-the-trainer monthly sessions via webex • Focus on contingency planning and palliative symptom management • Each module 15-20 presentation including lecture and case study for discussion • Topics included palliative management of: <ul style="list-style-type: none"> – COPD – CHF – Delirium – CVA – End of Life

Results:

Over 350 APRNs in seven states were trained as part of the one day advanced illness education program.



- Hospital admits/1000 improved throughout the year to a final year total of 262 admits/1000 for the ISNP program.
- Number of hospitalizations for comfort focused goals of care patients decreased from 26% in Q1 to a year-end total of 18%.

Conclusions:

Focusing on training and support for building primary palliative care skills in advanced practice clinicians can:

- Increase confidence in conducting advance care planning and goals of care conversations
- Reduce unnecessary hospitalizations in patients who desire a comfort focused plan of care

Implications:

Building primary palliative care skills in clinicians needs to be an ongoing process, utilizing a variety of strategies and methods. Further outcomes and measures from the education program and advanced illness model could be explored to gain visibility into the impact on patient care, patient satisfaction and clinical outcomes.