

SERIOUS ILLNESS CONVERSATION INITIATIVE IN BRITISH COLUMBIA

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THE ISSUE: Patients with Serious Illness are waiting for healthcare providers to initiate conversations about their goals and priorities for care.

Only **10%**
have talked about their
health-care wishes with
their doctor.

(Public Opinion Poll: Mustel
Research Group. October 2016)

THE AIM: To engage the system and train clinicians to initiate more, earlier, better conversations with individuals diagnosed with a serious illness and their families to enable person-centred care.

THE SERIOUS ILLNESS CONVERSATION INITIATIVE: Launched in November 2016 in BC to embed the Serious Illness Conversation in care for all persons with serious illness in the last one year of life. This best practice initiative was started by the Serious Illness Care Program of Ariadne Labs at Harvard Medical School and early results have shown:

- more, better, and earlier conversations
- clinicians find it effective and feasible
- patients report significantly reduced anxiety & depression.

(Bernacki, R. et al. Development of the Serious Illness Care Program: a randomized controlled trial of a palliative care communication intervention. *BMJ Open* 2015)

EDUCATION & COACHING of clinicians, coaches and facilitators with one of two Continuing Professional Development (CPD) accredited Workshops:

- 8 hour Train-the-Trainer Workshops train Facilitators to lead Clinician workshops.
- 2.5 hour Clinician Workshops provide clinicians with structured, best practice education and coaching, incorporating role plays, for all aspects of a Serious Illness Conversation.
- A one-hour online module is being developed to facilitate implementation in rural and remote settings.

RESULTS

OVER **450** CLINICIANS WERE
TRAINED IN 2017

64% WERE NURSES

24% WERE PHYSICIANS

12% ALLIED HEALTH PROFESSIONALS

A post-workshop survey found that 97% of workshop attendees agreed or strongly agreed that the workshop enhanced their knowledge of Serious Illness Conversations.

THE INTERVENTION



TOOLKIT DEVELOPMENT

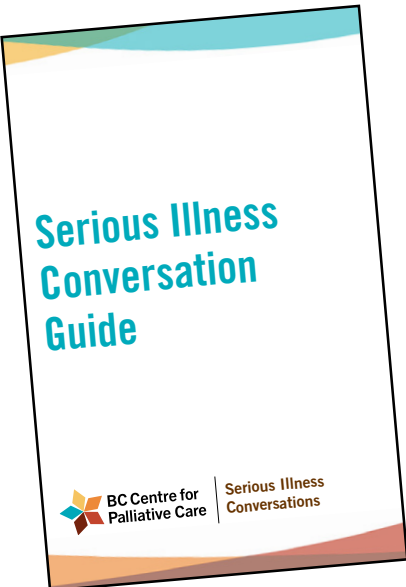
Adaptations exist for Substitute Decision Makers (SDMs) and for Nurses and Allied Health professionals. Current pilots are in disease-specific groups (e.g. renal); various care settings (primary care; residential care; First Nations communities) and for various populations (e.g. pediatric palliative care).

ONGOING EVALUATION

to collect implementation data and revise Serious Illness Conversation tools based on clinician feedback.

SUSTAINABILITY

Master Facilitators in all BC Health Authorities will continue to train others and to develop toolkits for specific needs to facilitate province-wide rollout of the initiative. There is national interest in moving this work forward to support person-centred care across Canada.



THE SERIOUS ILLNESS CONVERSATION GUIDE

is a structured approach to identify goals and priorities, trade-offs and implications for person-centred care in the context of a prognostic disclosure.



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