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# Title: End-of-life care capacity building program Meeting the training needs on advance care planning (ACP)

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## A. Background

ACP has the potential to address patients' end-of-life care needs (Detering et al., 2010). ACP is relatively new to the public in Hong Kong, but older adults and patients with progressive and life-limiting illnesses are beginning to embrace the concept. Advance Medical Decision (AMD) will be legislated in early 2024 (HKSAR, 2024). To assist patient and family to complete a valid AMD, it is important to engage them in the ACP process. As such, frontline healthcare professionals need to have a good understanding of the concepts as well as the skills to initiate such conversation. Although the Hospital Authority has guidelines for clinicians in promoting ACP to the appropriate patients, there are barriers from the healthcare professionals.

The end-of-life care (EOLC) capacity-building program of the Jockey Club Institute of Ageing, The Chinese University of Hong Kong, is part of the JC End-of-life Community Care Project since 2016. It has been training healthcare professionals of the public hospitals in the New Territories East Cluster. And since 2022, the training sessions are extended to the Hong Kong West and East Clusters. Through the EOLC program, training sessions relating to ACP have been implemented to enhance the clinician's knowledge and skills. The participants' feedback on the ACP training can be used to enhance the quality of future training.

#### B. Method

#### **Participants**

The **574** participants are healthcare professionals working at the Hospital Authority New Territories East Cluster Hospitals, Hong Kong West Cluster Hospitals, and Hong Kong East Cluster Hospitals.

#### Measurements

Data of the evaluation feedback of the participants from 2022-2023 in ACP are analyzed using descriptive statistics.

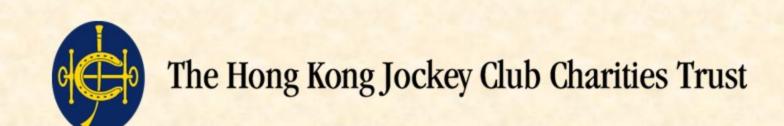




Training sessions on ACP communication for social workers



### **Sponsor**



#### C. Results

The results are categorized in terms of the **quality** of the training, **knowledge**, and **skills** in ACP, and **application** to clinical settings.

Evaluation results of capacity building activities from 2022 to 2023 ( $n=574$ )		
Item	Mean	SD
The training has increased my knowledge in end-of-life care. (Knowledge)	4.07	0.72
The training has improved my skills in communicating with seriously ill patients and their relatives. (Skills)	3.75	0.79
The training has improved my confidence in communicating with seriously ill patients and their relatives. (Application)	3.71	0.80
After the training, I will initiate more serious illness conversations with patients and their relatives.  (Application)	3.68	0.84
The training is relevant, useful, and important to my area of clinical practice. (Quality)	3.90	0.65
I am satisfied with the quality of the training. (Quality)	4.13	0.69

Note. All items were measured on a 5-point Likert scale.

(1 = strongly disagree, 5 = strongly agree)

## D. Discussion and Conclusion

The overall quality and practicality of the ACP training were well received. There is an enhancement in both knowledge and skills in addressing the training needs of healthcare professionals. The two items with the lowest mean scores may indicate a gap exists in translating the knowledge and skills into the work setting. It calls for more action research to close the gap.

#### References

Detering K M, Hancock A D, Reade M C, Silvester W. The impact of advance care planning on end of life care in elderly patients: randomised controlled trial *BMJ* 2010; 340 :c1345 doi:10.1136/bmj.c1345

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