# SOCIAL DIMENSIONS IN

# ADVANCE CARE PLANNING (ACP) APPLICATION

從社會層面看「預設照顧計劃」的實踐

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Professional Seminar on End-of-Life Care: Application of Advance Planning in Healthcare and Aged Care Settings, 15 Sept 2023



### **ADVANCE CARE PLANNING (ACP) & ADVANCE DIRECTIVE (AD)**

(預設照顧計劃)

(預設醫療指示)

#### ADVANCE CARE PLANNING (ACP)

- A process of communication among patient, family, healthcare providers
- patient's values, wishes, and preferences for the kind of medical and personal (social) care, advance directive to refuse life-sustaining treatment
- Advance directive is entirely voluntary

#### ADVANCE DIRECTIVE (AD)

- A statement, usually in writing...
- indicates when mentally competent what medical treatment he/she would refuse at a time when no longer mentally competent...
- usually with serious irreversible illnesses via advance care planning



ONE OR BOTH?

End-of-life Care: Legislative Proposals on Advance Directives and Dying in Place, July 2020 <sub>2</sub>



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# ADVANCE CARE PLANNING (ACP) & ADVANCE DIRECTIVE (AD)

(預設照顧計劃)

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Person with End-of-Life Care Needs

> Advance Care Planning

> Advance Directive

- ACP & AD are integral parts of End-of-Life care
- Communication among three essential parties: patient, family, healthcare provider
- Medical and Social Care, and preference of life-sustaining treatment
- AD is one of the tools to record refusal of life-sustaining treatment

### THE CONCEPT OF PLANNING IN ADVANCE (FOR FUTURE)

「未雨綢繆」「臨渴掘井」「生涯規劃」

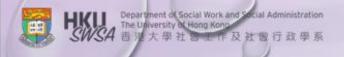
《詩經·豳 (bun)風·鴟鴞 (ci, hiu)》

《黃帝·內經·素問》

"一個深思熟慮的過程,讓人能整全地規劃一生,包括生命中重要的範疇,如工作、學習、人際關係 和閒暇。這過程也要求人在其社會環境中按步驟積極地實施所定的計劃"

(梁湘明, Asian Journal of Counselling, 2005)

**Always Plan Ahead** 事先準備, 防患於未然



#### THE CONCEPT OF PLANNING IN ADVANCE IN ADVANCE CARE PLANNING

#### **EOL Care:**

Always Plan Ahead?



< 1/3 has living will, only 7% involved physicians, 19% understood CPR, 37% not mentioned (Thorevska,2005)



0.2% with formal AD, 1.1% with no-CPR's orders, 5.6% had a formal guardian, 2.8% had an enduring guardian (Nair, 2008)

1/4 patient with severe lung disease had ACP with a physician (Sinclair, 2017)



0.5% population had AD (Chan, 2019)
2012-2018: only 5,561AD recorded by HA
香港特別行政區立法會 - 病人的預設醫療指示 (legco.gov.hk)

Low uptake across places





從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# Pre - Application: Public Health Concept

- Naming
- Normalization

Promoting advance care planning via mediated health resources: A systematic mixed studies review

Svenja Diegelmann 1, Sonja Bidmon 2, Ralf Terlutter 2

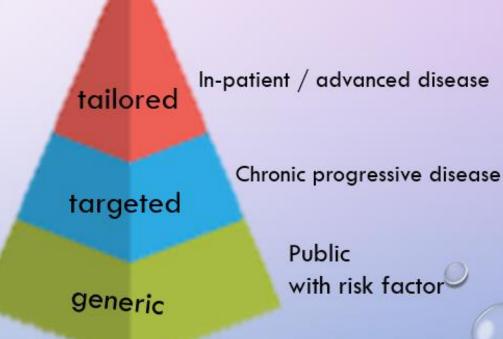
- mediated ACP resources positively impact ACP Process and Action outcomes
- videos, digital channels, print, a combination of channels, and mass media Patient Educ Couns. 2022 Jan; 105(1):15-29



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Pre - Application: Public Health Concept

- Naming
- Normalization
- Strategic
  - o generic
  - targeted
  - tailored



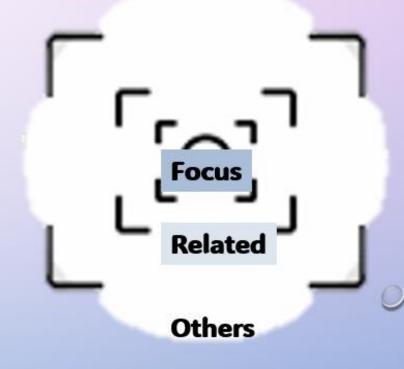
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# **Application: Right Things**

- Contents
  - Focus: medical tx
  - Related: psychosocial factors and impacts
  - Others: non-medical but important

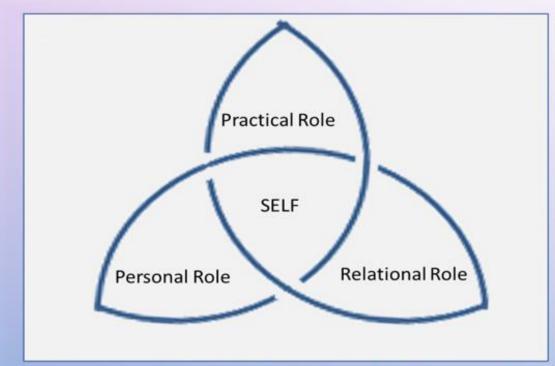


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#### The Dying Role



Emanuel, Bennett, and Richardson, 2007

# **Advance Care Planning**

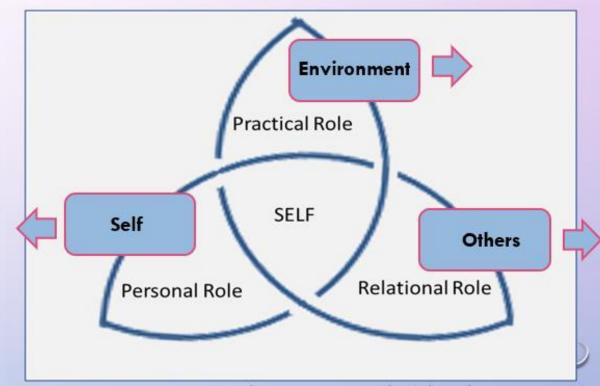
- Practical
- Relational
- Personal



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

#### **Social Dimensions**

- ➤ Self with the Environment (衣食住行)
- ➤ Self with Others (關係倫理)
- ➤ Self with Self (自我實現)



Emanuel, Bennett, and Richardson, 2007

Death is NOT a single person's business

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從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

#### **Social Dimensions**

➤ Self with the Environment (衣食住行)

- Financial Legacy (assets & properties)
- ➤ Place of care
- Mode of care (who & how)
- ➤ Place of Death



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

#### **Social Dimensions**

Self with the Environment (衣食住行)

➤ Self with Others (關係倫理)

- ➤ Last goodbyes
- Passing the mantle
- ➤ Giving permission
- ➤ Placing a legacy capstone
- Caring for dependents



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#### **Social Dimensions**

■ Self with the Environment (衣食住行)

5all aith Others (關係倫理)

- ➤ Self with Self (自我實現)
  - Own Wish list
  - ➤ Closure



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# **Application: Right Channel**

- Medical domain with Social dimension
  - Decision making & Family Dynamics
  - Treatment Choices and Caregiving Burden
- Medical domain with Psychological dimension
  - Subjective interpretation of pain and suffering
  - Mortal distress

Always inter-related, pre-exists and impacts



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# **Application: Right Time**

- Subjective Readiness
  - o 'Early'
  - o 'Not to Early'
- Objective Readiness
  - Clinical indication (investigation)
  - Signs of Physical deterioration (functioning, hospitalization)
  - Expression of caring difficulties (worries, distress)

Always the Right Time to Explore



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# Application: Right Persons

- Dyadic or Triadic
  - o patient & family

o patient & healthcare provider

patient, family, & healthcare

Always involve other person(s)



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# **Application: Right Persons**

- Dyadic or Triadic
  - o patient & family
  - o patient & healthcare provide
  - patient, family, & healthcare
- Which family member(s)
  - Practical function
  - Emotion function

Capable & Willing

Decision function

Always defined by the patient



從社會層面看「預設照顧計劃」的實踐 - 關係、倫理

# **Application: Right Persons**

- Dyadic or Triadio
- Which family member(s)
- Which healthcare provider

#### Burden to Others Cultural Characteristics **SKILLs** Readiness to handle Emotions Family Dynamics Person to Lead Attitude ✓ Trust Personal Belief ✓ Caring Previous EOL Experience ✓ Listening Relationship √ Address concerns √ Coordinated Care Responses of Others Social Support Suen, ACP-I 2023

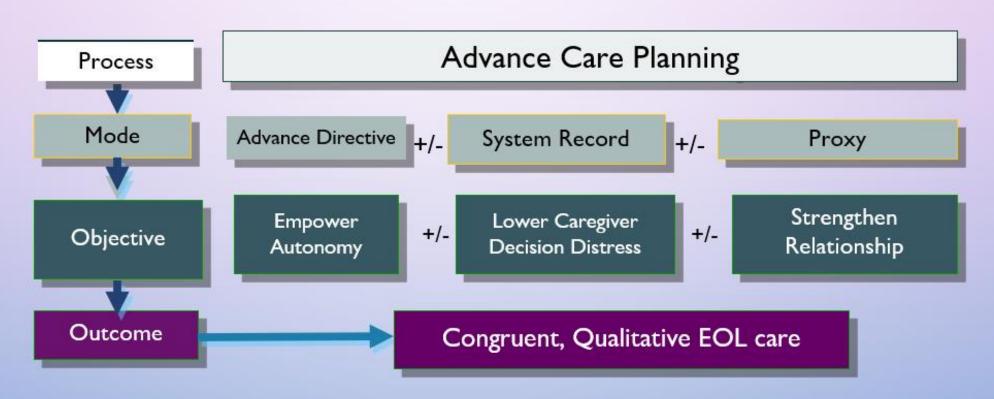
Always not the skills but Attitude

System Support



# **SUM UP**

# Social Dimensions of Advance Care Planning





# SUM UP

# Social Dimensions of Timing(天時、地利、人和)

# Preparation:

- ☐ Physical warm up
- ☐ Psychological what will be discussed
- ☐ Context relevant to the situation

# Follow up:

- Coordinated care
- ☐ Continuity of care



# SUM UP

# Social Dimensions in the Medical Dimension(你中有我、我中有你)

- In ACP on Medical Options, not limited to medical concerns:
  - □ social factor (社交因素)
  - □ quality of life (生活素質)
  - □ functional status (活动能力)
  - □ personal value(個人價值取向)
- In ACP on Decisions, not only the choice
  - □ facts / feelings (客觀利弊、主觀感受)
  - □ distress / strengths (憂慮、潛能)
  - □ resources / relations (資源、關係)

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# **Thank You**