Advance Care Planning

Routine care in general practice

Start having the conversation about ACP...

During a health assessment

Have a conversation about ACP and provide printed information as a part of a health assessment.

701; 703; 705; 707

- People between the age of 45 and 49 (inclusive) who are at risk of developing a chronic disease
- People aged 75 years and older
- Permanent residents of a Residential Aged Care Facility

715 – Those who identify as First Nations.

These can be claimed on both PN and GP time.

As part of everyday care

During a longer appointment consider discussing ACP.

23; 36; 44 – Community patients

90001; 90035; 90035; 90043; 90051 – Residential Aged Care patients.

As a part of chronic disease management

Chronic management discussions that include ACP promotes collaborative decision making with the patient and then can be shared with other health professionals engaged in care.

721; 723; 729; 732 – Community patients

731 – Residential Aged Care patients

10997 – Service provided by PN or First Nations health practitioner.

As part of your practice team care

Practice Nurse Incentive Program funding (PNIP) can allow for ACP support, follow-up, and interventions by a PN and First Nations health practitioner.

As part of a case conference

735; 739; 743 – Where GP organises and coordinates for community and Residential Aged Care patients.

747; 750; 758 – Where GP participates for community and Residential Aged Care patients.

This can include pain management and palliative care specialists.

Did you know

Advance Care Planning minimises complex grief for family members.

Would you be surprised if this patient died in the next 12 months?

If the answer is NO, discuss Advance Care Planning.

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What is Advance Care Planning?

Advance Care Planning is a way for patients to communicate to health professionals and services the healthcare treatments the patient would like to have or refuse, in the event the patient is seriously ill or injured and is unable to make or communicate decisions about their care and treatment.

Why do it?

An Advance Care Plan is a valuable and timely asset to ensure patient wishes and preferences are upheld when they are unable to self-advocate.

It can include:

- An instructional directive with legally binding instructions for future medical treatment the patient does and does not consent to.
- A values directive which documents patient values and preferences for their substitute decision-maker to consider when making decisions on the patient's behalf.
- Details of the patient's enduring guardian(s) or person(s) responsible.

When to have the conversation?

If the patient:

- Raises ACP with a member of the general practice team.
- Has a 45-49 year health assessment (introduce topic and provide information).
- Has an advanced chronic illness (e.g. COPD, heart failure).
- Has a life limiting illness (e.g dementia or advanced cancer).
- Is 75 years or older, or 55 years or older for First Nations people.
- Is a resident if, or about to enter a RACF.
- Is at risk of losing competence (e.g. early dementia).
- Has a new significant diagnosis (e.g. recent or repeated hospitalisation, commenced on home oxygen).
- May anticipate decision-making conflict about their future healthcare.
- Does not have anyone who could act as a substitute decision maker.

ACP Resources

'Making an advance care directive' NSW Health

The package provides an Advanced Care Directive form and information booklet that will answer the following:

- What is an Advance Care Directive?
- Why an Advance Care Directive is important.
- How to prepare for making an Advance Care Directive
- How to make an Advance Care Directive
- When it applies and when it is valid.

health.nsw.gov.au/patients/acp/Pages/acd-form-info-book.aspx

Murrumbidgee HealthPathways

The web-based portal contains condition-specific 'pathways' aimed to assist practitioners with assessment, management and local referral information.

mphn.org.au/health-pathways

NSW Civil and Administrative Tribunal

To access 'Person responsible fact sheet' and 'Substitute consent information'

ncat.nsw.gov.au

NSW Trustee and Guardian

The agency's purpose is to protect, promote and support the rights, dignity, choices and wishes of the people of NSW. The agency supports the Chief Executive Officer and the Public Guardian in servicing the NSW community.

tag.nsw.gov.au

RACGP: Advance care planning

To access general practice information and resources from the Royal Australian College of General Practitioners, visit

racgp.org.au/running-a-practice/practice-resources/practice-tools/advance-care-planning

For current MBS item, eligibility criteria and service requirements, please visit mbsonline.gov.au

Murrumbidgee Primary Health Network would like to acknowledge North Western Melbourne Primary Health Network as the authors of the original resource 'Make Advance Care Planning part of routine care'

nwmphn.org.au/resource/advance-care-planning-mbs-items