



Advance Directives: Supporting Patients Voice Their Choice

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Advance Directives Program Goal

1. Expand the number of community based AD Explainers.
2. Develop a Volunteer AD Explainer program as part of the Community Health Team.
3. Increase the % of adults who have an AD completed.




Steps for Developing a Community Program

- Identify hospital volunteers, medical home staff, and home health staff who have the skill and interest in explaining AD.
- Develop Volunteer AD Position Description.
- Provide 4 – 8 hours of training.
- Develop referral process.
- Develop video to be used in Medical Homes and on websites – click on link below to view:



<http://www.rrmc.org/about/vermont-blueprint-for-health/community-health-team/>

Steps Continued

- Develop marketing materials - flier 
- AD Explainer support is provided at various locations:
 - Centralized Community Health Team office
 - Within a Medical Home practice
 - In subsidized housing complexes.
 - Community Center



Community Health Team offers you Advance Directives Assistance

Planning for end-of-life is as important as all the other life plans you make. Advance Directives Volunteer Explainers are available to assist you with completion and filing of your Advance Directives while you are healthy. A health crisis can happen to anyone at anytime. NOW is the time to do planning for health care decisions for that time when you might not be able to speak for yourself.

Advance Directive forms allow you to give instructions for a broad range of health care decisions and to appoint an agent to make those decisions for you if you become unable to do so. The Advance Directive is a legal document that needs to be shared with your doctor, family members and your local hospital.

Let us assist you. To set up an appointment with an Advance Directive Volunteer Explainer:

Call 802.773.9888, ext 10 or email cht@rrmc.org

Your appointment is at _____ (time) on _____ (date) at the Community Health Team office at 71 Allen Street, Suite 402, Rutland, Vermont.

Why wait...now is the time.

 **Rutland Regional Medical Center**
An Affiliate of Rutland Regional Health Services

VERMONT  **Blueprint for Health**
Smart choices. Powerful tools.

Year 1: 2013 Program Outcomes

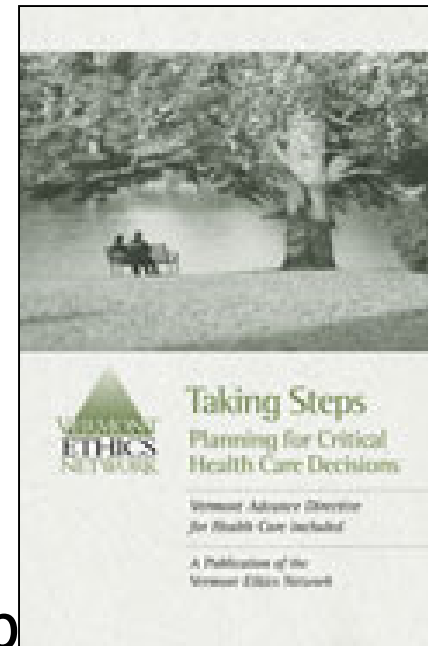
- Training:

29 staff and volunteers trained

- 5 hospital volunteers
- 6 home health staff
- 4 hospital administrators
- 1 MD
- 12 medical home practice staff
- 1 subsidized housing staff

- New sites offering AD Explainer sup,

- Central Community Health Team Office
- One independent medical home practice (referral model)
- 4 Federally Qualified Health Center Medical Homes
- 2 Subsidized housing sites
- Community Center added in 2014



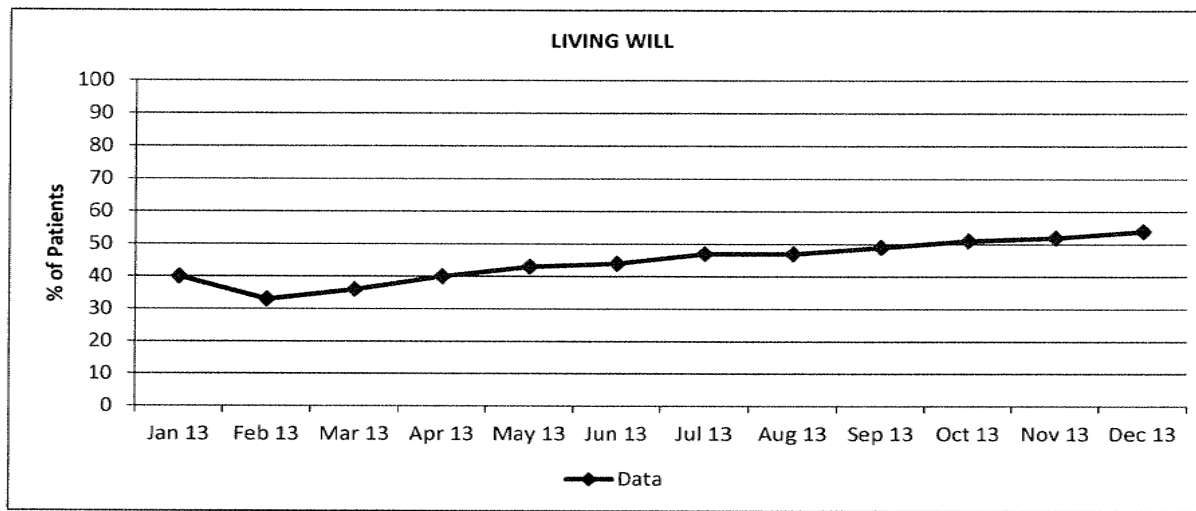
2013 Year End Outcomes

- At Community Health Team central office:
 - 206 patients were referred to a Volunteer AD Explainer
 - 110 completed an AD (53%)
 - 72 are in process of completing an AD (35%)
 - 24 did not complete an AD (12%)
 - 72 referred were between the ages of 51 and 60 (35%)
 - 59 referred were between the ages of 61 and 70 (29%)



2013 Medical Home Outcomes

- Pilot practice used referral process for Volunteer AD
Explainer support:
 - Practice has 2,503 patients over the age of 22
 - 171 patients were referred (6.8% of patients)
 - Practice data tracked completion of AD
 - Over 50% have a completed document



2013 Medical Home Outcomes

- Local Federally Qualified Health Clinic has 4 practice sites serving 23,000 patients over the age of 22.
 - 12 support staff trained
 - 96 AD completed in 2013
 - These practices have not offered the Volunteer AD Explainers – yet!



Program Findings



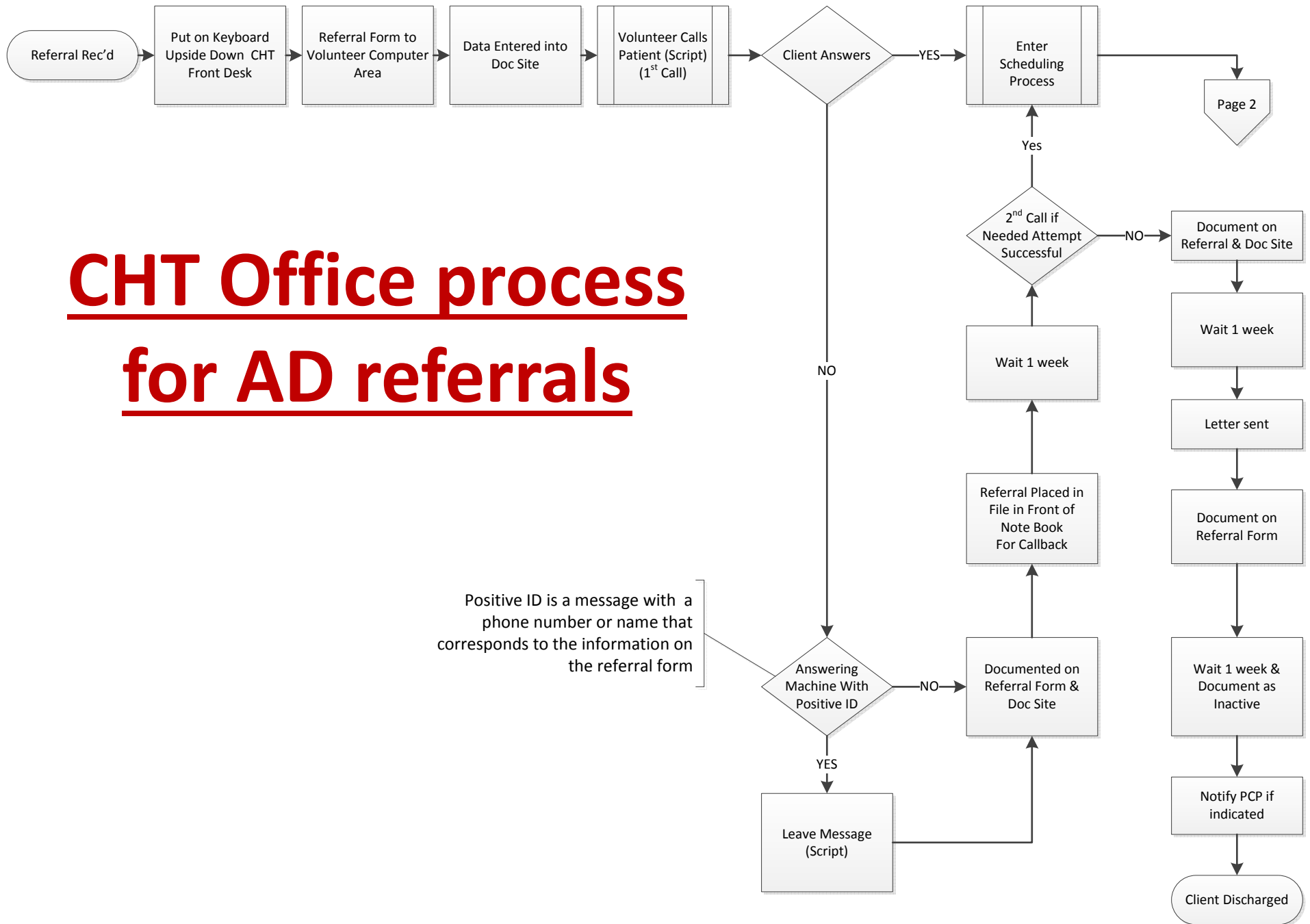
- On average 2 meetings are needed with a patient to complete an AD.
- Use of volunteers is a low cost, effective means to support generally healthy adults complete AD.
- Access to expert AD Explainer is necessary to support new explainers gain competence.
- When referred by a primary care provider, patients are willing to meet with a volunteer in another location to complete the documents.
- It is difficult for a busy primary care office to fit this service into the office workflow.

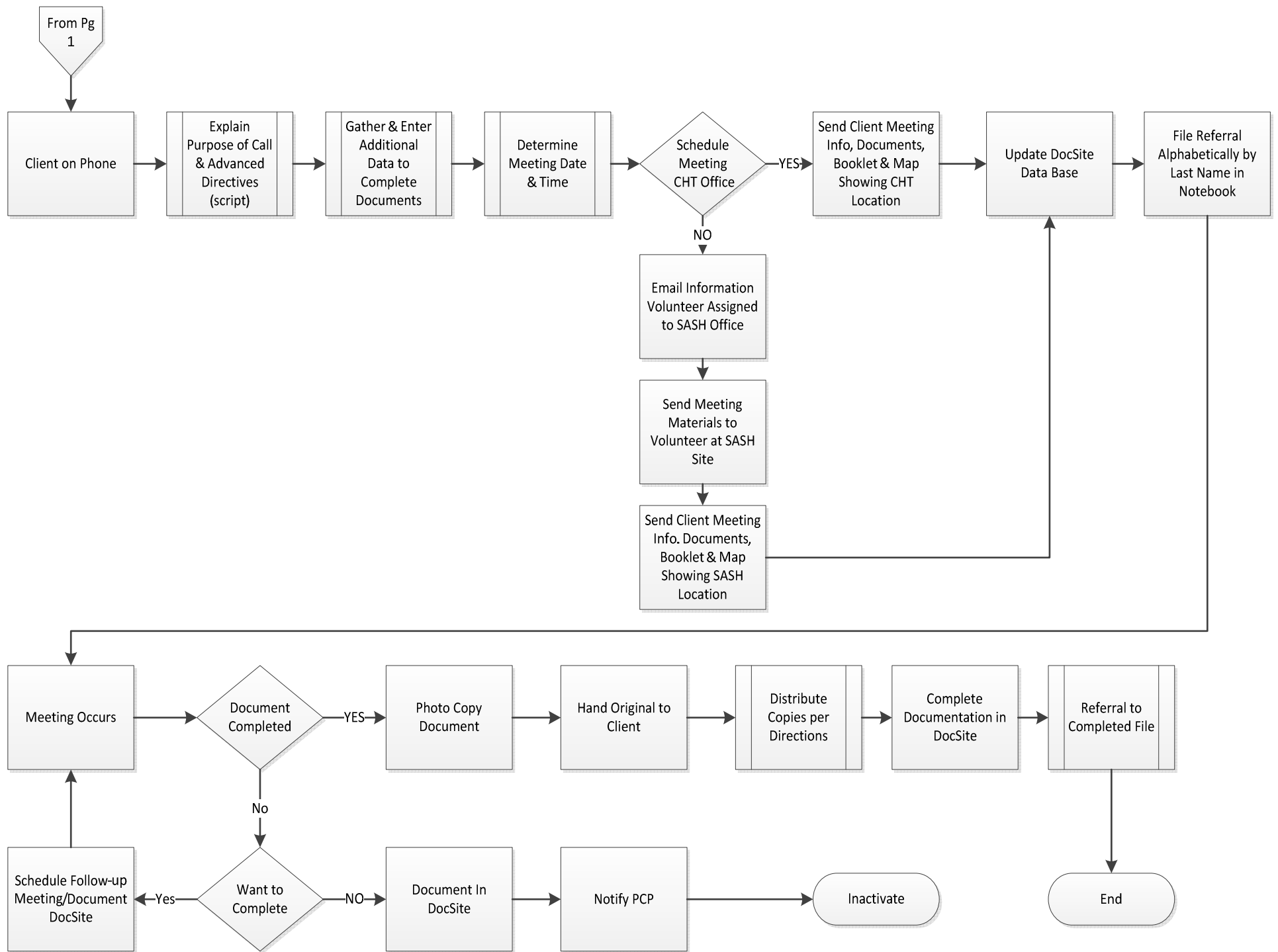
Referral Process for CHT office

- Initiate contact with referred patient:
 - 2 phone calls are attempted, and then one mailing of information.
 - If contact is not made with the patient after 3 attempts, then the patient is listed as ‘inactive’
- Meeting is set up with patient
 - Most patients required two meetings to complete the forms.
- Copies of completed documents are:
 - Given to the patient and family
 - Faxed to the state registry
 - Sent to providers and local hospital



CHT Office process for AD referrals





Contact Information

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