

Storing advance care planning (ACP) documents in Best Practice software

Overview

Before initiating a conversation with a patient about advance care planning (ACP), it is suggested to check the patient's My Health Record (MHR) to see if any ACP documents have been uploaded.

- If no ACP documents are identified in MHR and the patient states they have not completed an Advance Health Directive (AHD) or an Enduring Power of Guardianship (EPG), the relevant clinical data fields in **Family/Social history** should be marked as **No**.
- Document all ACP discussions in the patient's health record, including topics discussed and those present during the conversation.
- Completed ACP documents should be stored within the practice software in the patient's health record **and**, with patient permission, uploaded to their MHR.
- Add recall/reminder to completed ACP documents to ensure they are flagged for regular review (suggested annually or as deemed necessary by the health practitioner).
- If a patient visits to complete an AHD, select **Reason for Visit: Advance Health Directive**.

Storing ACP documents in a patient's health record

- Store ACP documents in **Correspondence In**.
- To ensure ACP documents are coded, follow the procedure below:
 - Open **Correspondence In**, click **Add**, select the ACP document (this could include an AHD, EPG, Values and Preferences form, or ACP for a Person with Insufficient Decision-Making Capacity form), click **Open**, which will trigger a pop-up box to appear.
 - Select **Advance Care Planning** from the **Category** drop-down box.
 - **Subject** can be added to specify which ACP document is being imported. **Details** can also be documented, then **Save** (note: this is not coded text).
 - The ACP document is now coded and imported into the patient's health record under **Correspondence In - Advance Care Planning**.
- Update **Social history** clinical data fields and follow the guidance in the fact sheet for uploading an ACP document to MHR.
- Open **Today's notes**, which should state:
 - **Actions: Advance Care Planning imported.**

Completing ACP clinical data fields in a patient's health record

- Open **Social history**.
 - Has the patient completed an AHD? Select **Yes/No** using the drop-down box **Advance Health Directive**, then **Save**.
 - Has the patient completed an EPG? Select **Yes/No** using the drop-down box **Enduring Power of Guardianship**, then **Save**.
- Selecting **Yes/No** for the AHD in **Social history** will self-populate the demographic field **Advance Health Directive** with the same response.
 - This should only be marked **Yes** when an AHD document has been completed.
 - A **No** response is a further trigger to alert clinical staff at subsequent visits to re-visit ACP discussion and offer a follow-up appointment to complete ACP documentation.

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