

Preventive Ethics ISSUES Storyboard Worksheet

DIRECTIONS: The purpose of the ISSUES Storyboard is to tell the “story” of a completed ISSUES improvement cycle. The document can be used to disseminate results to leaders and other interested staff, as well as to inform future ISSUES improvement projects.

VA FACILITY/HEALTH CARE SYSTEM: VA

WORKING TITLE: Shared Decision Making; Completing Advance Care Directives

DATE: 20XX

TEAM MEMBERS *(First Name, Last Name, Title, Role):*

PEC

QM

Admin

Nursing

Physician

Social Work

AD HOC MEMBERS *(First Name, Last Name, Title, Role):*

SME—ethics consultant

Process owners—MD, Nursing, clerk, social work

Identify an Issue

Briefly summarize the ethics issue and the source:

Ethics Issue (who, what, where, when, how much):

Issue: A recent accreditation review of primary care health records found that only a few patient requests for assistance with completing an advance directive were followed up on by clinic staff.

Source of Issue: The Joint Commission survey findings

List the (preliminary) improvement goal:

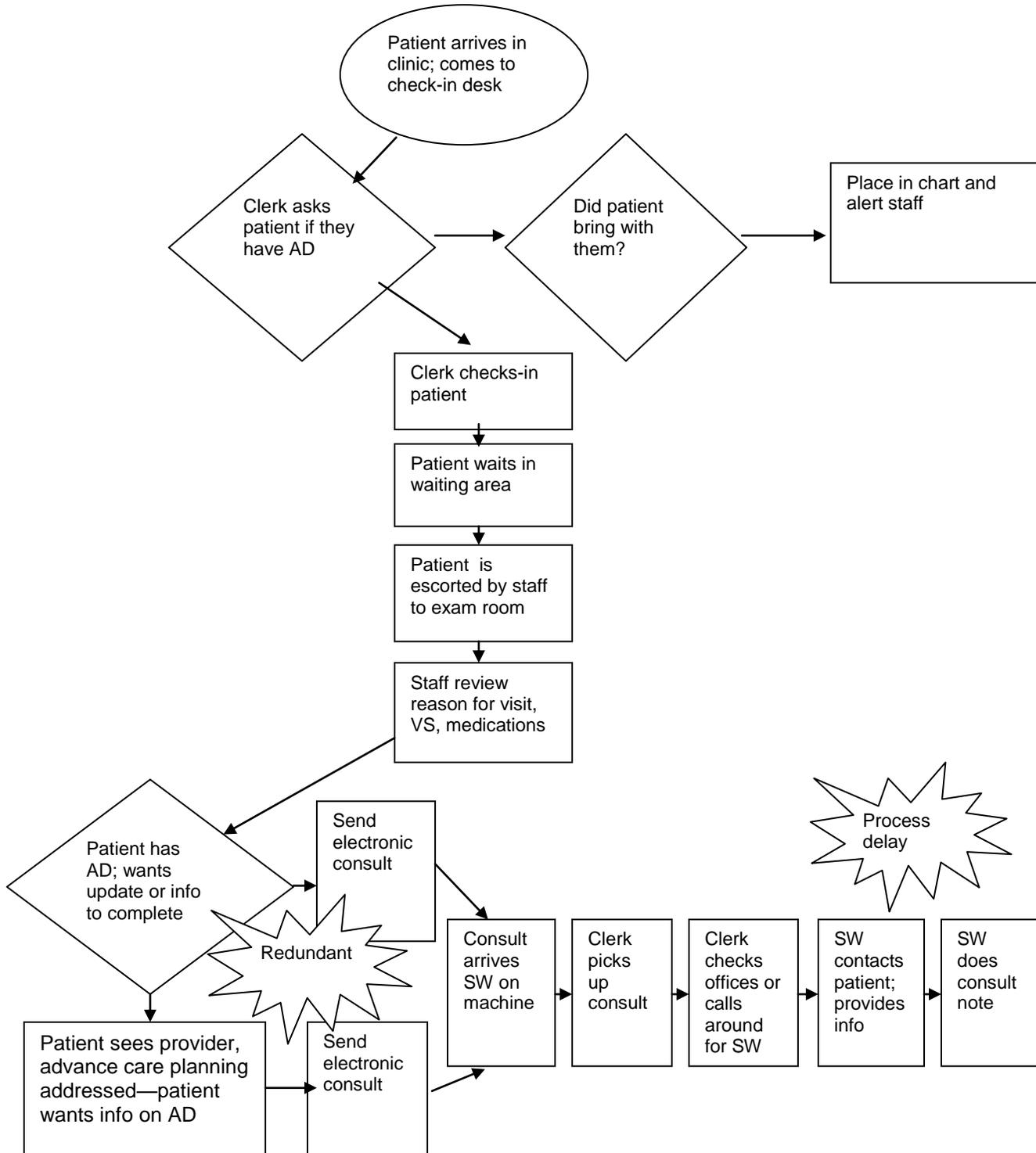
Increase assistance to primary care patients who request help with completing an advance directive

Describe why the issue was selected as a priority by the preventive ethics team:

This ethics issue aligns with strategic goals, is expected to bring significant benefit to patients, and has a high likelihood of success. The IEC agreed with prioritization of this issue and fully supports the team's addressing it.

Study the Issue

Diagram the process behind the relevant practice:



Possible Process Improvements:

Redundancy—when staff and physician send consult after asking patient about advance directives.

Process delay—the amount of time required for determining which social worker will follow up on the request

Summarize the information gathered about best practices (for each information source):

Ethics Issue	Ethical Standard Source(s)	Ethical Standard Description(s)	Best Ethics Practice “Should”
A recent accreditation review of primary care health records found that only a few patient requests for assistance with completing an advance directive were followed up on by clinic staff.	VHA Handbook 1004.2 Advance Care Planning and Management of Advance Directives	Description: VHA Handbook states that additional information about advance directives and/or assistance in completing the forms must be provided for all patients who request this service. Exclusions: 1. Patients who now lack decision-making capacity 2. Patients who withdraw their request 3. Patients who change their minds about their requests for assistance	Best ethics practice is primary care patients who request assistance with completing an advance directive <i>should</i> receive it.

Define the metric and summarize the information gathered about current ethics practices (for each information source):

Metric (show numerator and denominator*):

Number of primary care patients who received assistance with completion of AD

Total number of primary care patients that requested assistance with completion of AD

Current ethics practice*:

Patients received assistance with completion of AD N = 3

Primary care patients requested assistance with completion of AD N=30

3/30 or 10% of patients who request assistance with completion of AD receive it.

***Denominator** = population to whom the specific ethics practice applies

Numerator = number of times the practice actually happens to the population

Current Ethics Practice is = numerator/denominator

Refine the improvement goal to reflect the ethics quality gap (include a time frame, if possible):

Reality Check (Complete to determine achievable goal)

1. **Starting point:** Performance requirements and/or benchmark data: **90%**
2. **Seriousness:** Can one occurrence be tolerated? Would you publicly defend the goal? **Yes**, one occurrence can be tolerated and this could be publically defended
3. **Environmental constraints:** Do local considerations impact the goal? **Yes**, good leadership support
4. **Challenge:** What amount of improvement would make you proud? **100%**

Achievable Goal: 90%

Refined Improvement Goal:

Increase the % of _____

Direction of Change (Increase or Decrease by % or Number)

Primary care patients who request assistance with completing an advance directive will receive it.

Ethical Practice*

From **10%** _____ (% or n) **To** **90%** _____ (% or n)
Current Ethics Practice **Achievable Goal**

By **4th quarter, 20XX** _____
Time Frame
(quarter or more specific, if required)

***EXCLUSIONS: Patients who no longer receive care in the clinic, patients who withdraw their request, or patients who now lack decision-making capacity.**

Select a Strategy

Determine the major cause(s) of the ethics quality gap and draw a “fishbone” or other cause-and-effect diagram:

From multi-voting, the team determined the top cause(s) and rank order them based on those that contribute most to the ethics quality gap as identified by the team from the cause-and-effect diagram:

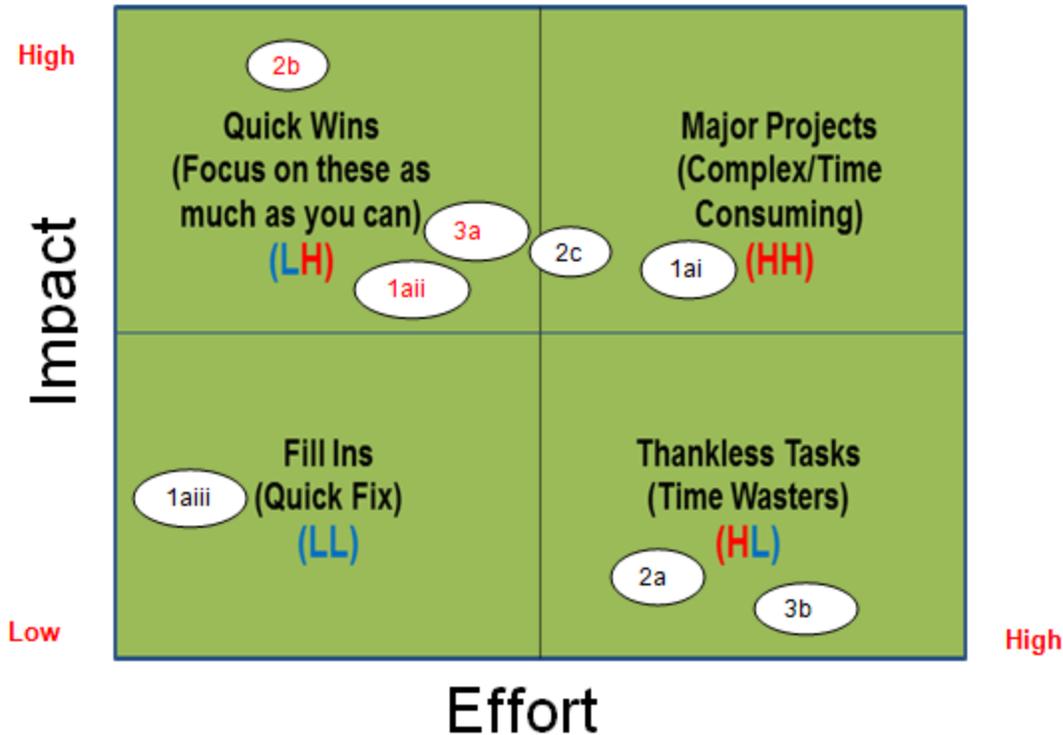
1. Delay in process within Social Work is due to having to find a social worker to complete the consult.
2. Delineation is unclear on who is to determine if patient wants information on updating or completing an advance directive (e.g., several staff asks patient same questions).
3. Information provided to patient has a large amount of variation.

Brainstorm possible strategies to address top cause(s):

For each of the contributing top causes, the team identified 2 or 3 top strategies to address the gap:

1. Delay in process within Social Work
 - a. Identification of social worker
 - i. Appoint social workers to specific primary care clinics
 - ii. Develop coverage schedule for primary care clinics
 - iii. Have clerk rotate consults throughout all social work staff
2. Unclear delineation on who is to determine if patient wants information on updating or completing an advance directive
 - a. Assign to clerk at check-in
 - b. Med tech or nurse to address prior to provider
 - c. Provider include this aspect with advance care planning conversations
3. Information provided to patient has a large amount of variation
 - a. Develop training tools (e.g., checklists) for social workers and others to use with patients and families
 - b. Provide training for social workers or others so everyone has the same level of knowledge and skill.

Using the impact effort grid, take each proposed strategy and plot it on the grid. The goal is to determine which strategies are likely to be successful. These are denoted as quick wins as they take low effort and high impact.



Choose one or more strategies to try based on likelihood of success, expected net benefit, and resources required to implement the strategy. Explain your rationale:

For each of the contributing top causes the team identified the top strategy(s) as determined from the Impact/Effort Grid to address the gap. The strategies selected for this cycle are:

1. Lack of clarity in consult process within social work
 - Develop coverage schedule for primary care clinics—this option allows either the clerk or social worker to check on incoming consults
2. Information provided to patient has a large amount of variation
 - Develop training tools for social workers or others to use with patients and families

Undertake a Plan

Describe how the team plans to carry out the strategy (or strategies), including the “who, what, when, and where” of the plan:

Task (what)	Who responsible	Where	When completed
Develop coverage schedule for primary care clinics	SW Manager	Orange clinic test	January 20XX
Develop training tools for social workers or others to use with patients and family	Social Work Rep Ethics Rep Staff member	Orange clinic test	March 20XX
Staff education	PEC with process owners	Orange clinic for test	April 20XX

Describe any potential barriers to implementing the plan and how these will be addressed:

Preventive Ethics team time—request IntegratedEthics Committee (IEC) charter team and communicate expectations to team member and supervisors of team members to assure team members have time allocated for this project.

No dedicated budget for the cost of patient education materials which is estimated to be \$ 1500.00 - \$2000.00 for 6 months of materials. Ongoing cost is estimated at \$500.00 per quarter. - Negotiate with IEC for a budget for these materials.

List the measures that will show how well the strategy was implemented (execution):

Execution/Process Strategy	Measure
Develop coverage schedule for primary care clinics	Coverage schedule in place and working (clear understanding who is covering) Random review by PEC— # of consults addressed by designated SW <hr/> # of consults
Develop training tools for social workers or others to use with patients and family, incorporate teach back method within the tool	Completion of materials Determine how often during teach back that patients understood the material Patient indicate understanding through teach back <hr/> Total # of patients who received the teaching materials
Staff Education ✓ Orange Clinic for test ✓ Primary care after test ✓ Spread to specialty care clinics	Attendance at training # who attended <hr/> Total # of staff who should attend

List metric that will show how well the strategy accomplished the improvement goal (results):

Numerator: # of primary care patients who received assistance with completion of advance directive

Denominator: # of primary care patients who requested assistance with completion of advance directive

Evaluate and Adjust

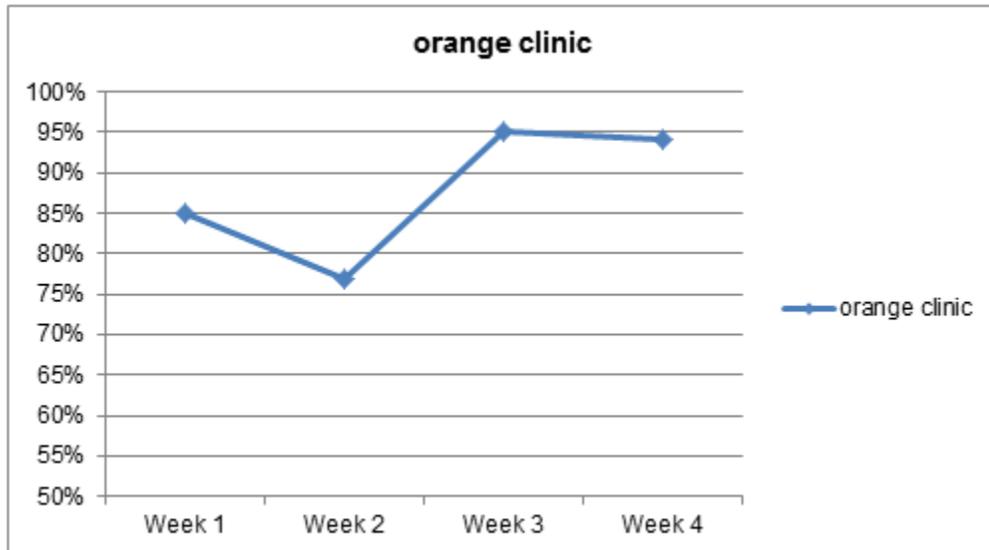
Assess whether the strategy was implemented as planned (execution):

Execution/Process Strategy	Measure	Results
Develop coverage schedule for primary care clinics	Random review for who is covering	12/12 or 100%
Develop training tools for social workers or others to use with patients and family	Training tools developed	Completed Feb 20XX
Determine if education materials are understandable and useful to patient	Evaluate patient understanding and usefulness of materials during session with patient	8/12 or 75%
Staff Education ✓ Orange Clinic for test	Develop materials	Orange Clinic—14/15 or 93.3%

Assess whether the strategy accomplished the improvement goal (results):

Outcome Measure(s) numerator/denominator	Results
Numerator: # of primary care patients who received assistance with completion of advance directive Denominator: # of patients who requested assistance with completion of advance directive	See below for details—Achieved 90% by week 3 of 1 month test. Week 1—17/20 or 85% Week 2—10/13 or 77% Week 3—18/19 or 95% Week 4—16/17 or 94%

Social Work conference 2 week of test caused lower results—developed back-up plans



Describe any other positive or negative effects of the strategy:

Primary Care and Social Work staff indicated the process was easier than before and that there was clear accountability

Some patients felt the education materials were too complex and required additional staff assistance to understand completely

Check the box that best summarizes the overall effect of the strategy:

- The strategy improved the process or corrected the issue without creating other problems.
- The strategy improved the process or corrected the issue, but it created other problems (Explain)
- The strategy failed to improve the process, but it was not executed as planned (Explain)
- The strategy failed to improve the process even though it was executed as planned

Check the box that best describes the preventive ethics team's next steps:

- Implement the strategy and integrate into standard operating procedures
- Modify the strategy and try again
- Select a different strategy

Describe what worked well during the present ISSUES cycle that may be useful in future ISSUES cycles:

- Chartering the team really worked to ensure time could be spent on the project by staff to meet the goals
- Estimating the budget for the project early in the cycle really worked so money could be allocated timely

Describe how the process could be improved in future ISSUES cycles:

Including a member of the patient education team for review of any patient education materials developed

Sustain and Spread

Sustain plan:

If the strategy will be continued, check the box that best describes how often the improvement will be monitored to ensure that gains are maintained or increased. Identify the department, service, or unit that will be responsible for monitoring

- Monthly or more frequently by Quality-Readiness Coordinator and reported to Quality Committee quarterly (department, service, unit)
- Quarterly by _____ (department, service, unit)
- Annually by _____ (department, service, unit)

If the strategy will be implemented more broadly, complete the implementation plan:

Where	When	How	Who	Results
Green Clinic	August 20XX	Staff education and test of materials	Clinic manager/process owners Orange clinic	93%
Red Clinic	October20XX	Staff education and test of materials	Clinic manager-process owner Orange and Green clinic	Pending
Blue Clinic	January 20XX	Staff education and test of materials	Clinic manager-process owner Orange and Green clinic	Pending
CBOC#1	September 20XX	Staff education and test of materials	Clinic manager and process owner green and red clinic	Pending
CBOC#2	October 20XX	Staff education and test of materials	Clinic manager and process owner red and blue clinic	Pending
CBOC#3	November 20XX	Staff education and test of materials	Clinic manager and process owner blue and CBOC#1	Pending
Update Policy	September 20XX	Insert new processes into policy	Social Work/PEC	Pending