An exploratory study of attitudes, perceptions and practices of trained facilitators in advance care planning in a tertiary hospital in Singapore

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Background & Aim: Since 2011, Tan Tock Seng Hospital has expanded its ACP program to 15 clinical disciplines and home care program as well as trained at least 300 facilitators within the hospital. Despite continual efforts at improving course format based on post course feedback, only approximately 50% of facilitators go on to complete and document at least one ACP conversation post-training. This study aims to explore attitudes, perceptions and practices of trained ACP facilitators in the hospital.

Method: A qualitative approach informed by grounded theory was employed using semi-structured individual interviews. Purposive sampling recruited facilitators of varying degrees of experience and different primary vocations. Each transcript was independently coded by two research team members. The study team met for five sessions to discuss emerging themes and sub-themes.

Result: 25 trained ACP facilitators were interviewed. Not all facilitators were active and while most agree that ACP is important, practice depended on level of department and peer support, intrinsic belief of whether ACP is part of one's job scope as well as self-efficacy. Barriers include a lack of protected time to carry out ACP, traditional cultural taboos in talking about death and dying, lack of confidence, fear that the patient may perceive the medical team as “giving up” on him/her and language barriers in a multicultural society. Active facilitators viewed establishment of rapport and the communication process as important rather than the completion of documents. There was a desire for better inter professional collaboration with close support by the primary medical team in the discussion, for ACP to be brought into civic consciousness in a coordinated way and for a system incorporating ACP in routine care. Multiple core skills of the ACP facilitator were viewed as essential such as empathy, person centeredness and advocacy, active listening, being a team player and self-awareness.

Conclusion: The professional identity and practice of a trained ACP facilitator can potentially be bolstered by strengthening inter-professional collaboration, having a mentoring framework, recognition of efforts, institutional support and raising public awareness as well as strengthening a community and culture of practice.

Biography
Raymond Ng has completed his MBBS from National University of Singapore and Master of Medicine in Family Medicine from National University of Singapore. He also pursued Advanced Specialist training in Palliative Medicine in Singapore. He is a Consultant in Palliative Medicine as well as Clinical Lead in Advance Care Planning in Tan Tock Seng Hospital.

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