# Does MDT Help ACP? An audit of anticipatory care planning in patients with end stage liver disease in an NHS Greater Glasgow and Clyde Hospital

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## **Objectives:**

Anticipatory care planning (ACP) is a discussion between a patient and clinician that enables an individual to express their wishes for future care and treatment. It is considered best practice when a patient is at high risk of deteriorating.

This project aimed to investigate the number and quality of ACPs in patients discussed at an advanced liver disease MDT in NHS Greater Glasgow and Clyde over a 4 year period.

#### Methods:

- •50 patients discussed at the Advanced liver disease MDT were randomly selected: 25 from 2019 and 25 from 2022
- •Presence of ACP was recorded for each patient
- •Patient's age, sex, diagnosis, Scottish Index of Multiple Deprivation score, DNA CPR status and if they were deceased was recorded
- Scores were awarded to each ACP using a quality assurance tool constructed by the regional ACP team (1)
- •Chi squared test was used to examine the association between the level of information deemed necessary in a patient's ACP and the level of information actually present
- Inter-rater reliability was calculated to ascertain the reliability of ACP quality assessment
- Caldicott approval was granted

### **Results:**

- 25% of patients discussed at the MDT had any documented ACP
- •Of those, 80% were completed by the hospital palliative care team, 12% by community palliative care and 8% by the gastroenterology/hepatology team (Figure 1)
- •No association was found between the level of information required in their ACP and the level of information present (p=0.99)
- •Inter-rater reliability for quality of ACP scoring was acceptable (value of 0.78)
- •Of those with an ACP, 32% were deemed of sufficient quality to be clinically useful
- •44% of patients had an ACP captured only in their inpatient notes, which was not easily accessible for future admissions
- •Fewer patients in the 2022 cohort had an ACP than those discussed in 2019: 64% of ACPs were from 2019 and 36% from 2022 (Figure 2)

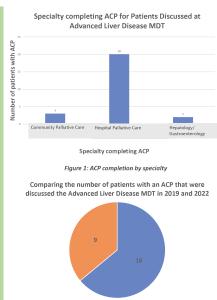


Figure 2: Comparing ACP completion between 2019 and

#### **Conclusions:**

- Despite identifying potentially terminally ill patients at the Advanced Liver MDT, few patients discussed over a 4-year period had any ACP discussions captured in their clinical records
- Quality of the documented discussion was often insufficient
- More work is needed to conduct and capture high quality ACP discussions in this patient group