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| ***Lesson Plan*** | |
| **Teaching Unit** | Ethical &Legal Issues |
| **Title** | **Advance care planning** |
| **Learning Outcome** | Describe the importance of advance care planning as a modality to prevent unwanted and futile treatment |
| **Summary** | The Advance Care Planning process needs professionals able to support patients which need palliative care in order to accept their progressive illness, the necessity of medical care and to support them in the process of treatment, based by their personal values, life goals and preferences.  The main objectives of this teaching unit is to help future doctors to plan care in advanced in palliative care patients using a 5 steps model (a1) identify and understand the ethical problems like current and future patient decision (a2) identify the family values and capability to take decision when patient is not able to do it (a3) identify the role of different health care providers to be involved in the process pf decision in ACP (b) evaluate the clinical outcomes and prepare the patient and the relatives for different stage of evolution of illnesses (c) document the patients preferences and disseminate their choice according with the patient wish (d) Surrogate decision makers (e) evaluate the risk factors and the solution of ACP |
| **Learning Objectives**  **C- Cognition**  **S – Skills**  **A – Attitudes** | **C- Cognition**   1. defines advance care planning and explain its importance 2. described the steps of the advance care planning process, such as the 5-step model 3. recognizes the ethical and legal principles that promotes patient/family involvement in future care planning 4. Explains the concept of futility and gives examples of futile treatments for palliative care patients   **S - Skills**   1. Demonstrates steps involved in the Advance Care Planning process in a given case   **A – Attitudes**   1. aware of the moral and legal rights of patients (and families) to be fully informed (as required) to participate in decisions regarding future care |
| **Learning Methods** | 0.5 hours online + 0.5 seminar   * Self-directed reading * Role play * Scenarios/ Case studies * Reflection on experience |
| **Timing** | On-line 0,5h  Seminar 0,5 h   * Role play based on Scenarios/ Case studies 20 min * Reflection on experience 10 min |
| **Bibliography/ Resources** | 1. Auriemma CL, Nguyen CA, Bronheim R, et al. Stability of end-of-life preferences: a systematic review of the evidence. JAMA Intern Med 2014; 174:1085. 2. Brinkman-Stoppelenburg A, Rietjens JA, van der Heide A. The effects of advance care planning on end-of-life care: a systematic review. Palliat Med 2014; 28:1000. 3. Buchanan AE, Brock DW. Deciding for others: The ethics of surrogate decision making, Cambridge University Press, Cambridge 1989. 4. Davison SN, Simpson C. Hope and advance care planning in patients with end stage renal disease: qualitative interview study. BMJ 2006; 333:886. 5. Evans N, Bausewein C, Meñaca A, et al. A critical review of advance directives in Germany: attitudes, use and healthcare professionals' compliance. Patient Educ Couns 2012; 87:277. 6. Janssen DJ, Engelberg RA, Wouters EF, Curtis JR. Advance care planning for patients with COPD: past, present and future. Patient Educ Couns 2012; 86:19. 7. Johnstone MJ, Kanitsaki O. Ethics and advance care planning in a culturally diverse society. J Transcult Nurs 2009; 20:405. 8. Messinger-Rapport BJ, Baum EE, Smith ML. Advance care planning: Beyond the living will. Cleve Clin J Med 2009; 76:276. 9. Silveira MJ, Kim SY, Langa KM. Advance directives and outcomes of surrogate decision making before death. N Engl J Med 2010; 362:1211. 10. Sudore RL, Fried TR. Redefining the "planning" in advance care planning: preparing for end-of-life decision making. Ann Intern Med 2010; 153:256. 11. Sudore RL, Lum HD, You JJ, et al. Defining Advance Care Planning for Adults: A Consensus Definition From a Multidisciplinary Delphi Panel. J Pain Symptom Manage 2017; 53:821. |