

# Evaluating outcomes of ACP interventions for adults living with advanced illness and people close to them: a meta-review

Jodie Crooks<sup>1</sup>, Noura Rizk<sup>1</sup>, Charlotte Simpson Greene<sup>1</sup>, Dr Briony Hudson<sup>1</sup>, Gina Hopwood<sup>1</sup>, Kathy Seddon<sup>2</sup>, Owen Smith<sup>2</sup>  
<sup>1</sup>Marie Curie Research & Policy, UK <sup>2</sup>Patient and Public Involvement representatives

## Background

Advance care planning (ACP) is “a process that supports adults at any age or stage of health in understanding and sharing their personal values, life goals, and preferences regarding future medical care”.

As the breadth of ACP interventions has expanded over recent years, a Delphi panel of 52 multi-disciplinary, international ACP experts identified outcomes that define successful ACP.

However, throughout literature, ACP’s efficacy and evidence base have been challenged, highlighting the potential gap between hypothetical scenarios and the decision-making process in practice.

## AIM

To utilise published reviews to **explore how current ACP interventions are evaluated**, including **whether current evaluations suggest that advance care planning is achieving its intended outcomes**.

- Research questions include:
1. How are current ACP interventions evaluated? (e.g., through which outcome measures and/or methods?)
  2. Do current evaluations suggest that advance care planning is achieving its intended outcomes?
  3. Do the above results differ by population?

## 39 reviews included...

Patient / care perspectives		
Patients only	Family/carers only	Both
18	2	19

Healthcare setting			
General	ICU	Care home	Hospital
33	1	1	4

Diagnosis / reason for ACP						
Cancer	General / mixed	Dementia	Heart failure	Frailty	COPD / respiratory	MND
8	17	6	3	2	2	1

## Conclusions

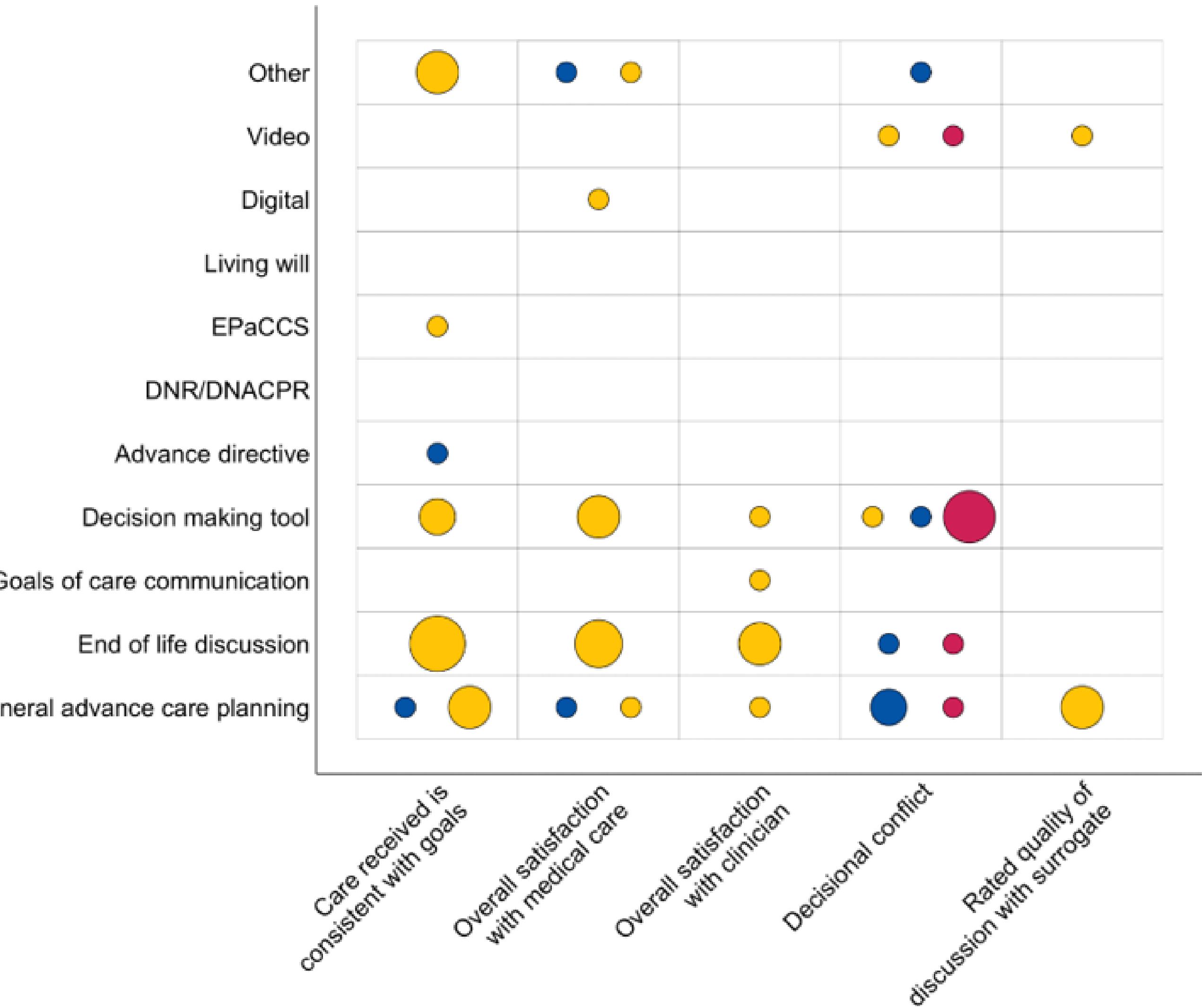
There are a wide range of ACP interventions. Unfortunately, the process of exploring and documenting wishes is not always enough to enable end of life experiences that are congruent with preferences, this can be influenced by many things, availability of resources like hospice beds, or community of support, the ability to manage symptoms in different settings and lack of availability of informal carers etc

However, ACP, in various forms has been linked to positive or neutral impacts on different aspects of care – there was very little evidence that ACP has a detrimental effect in studies reviewed.

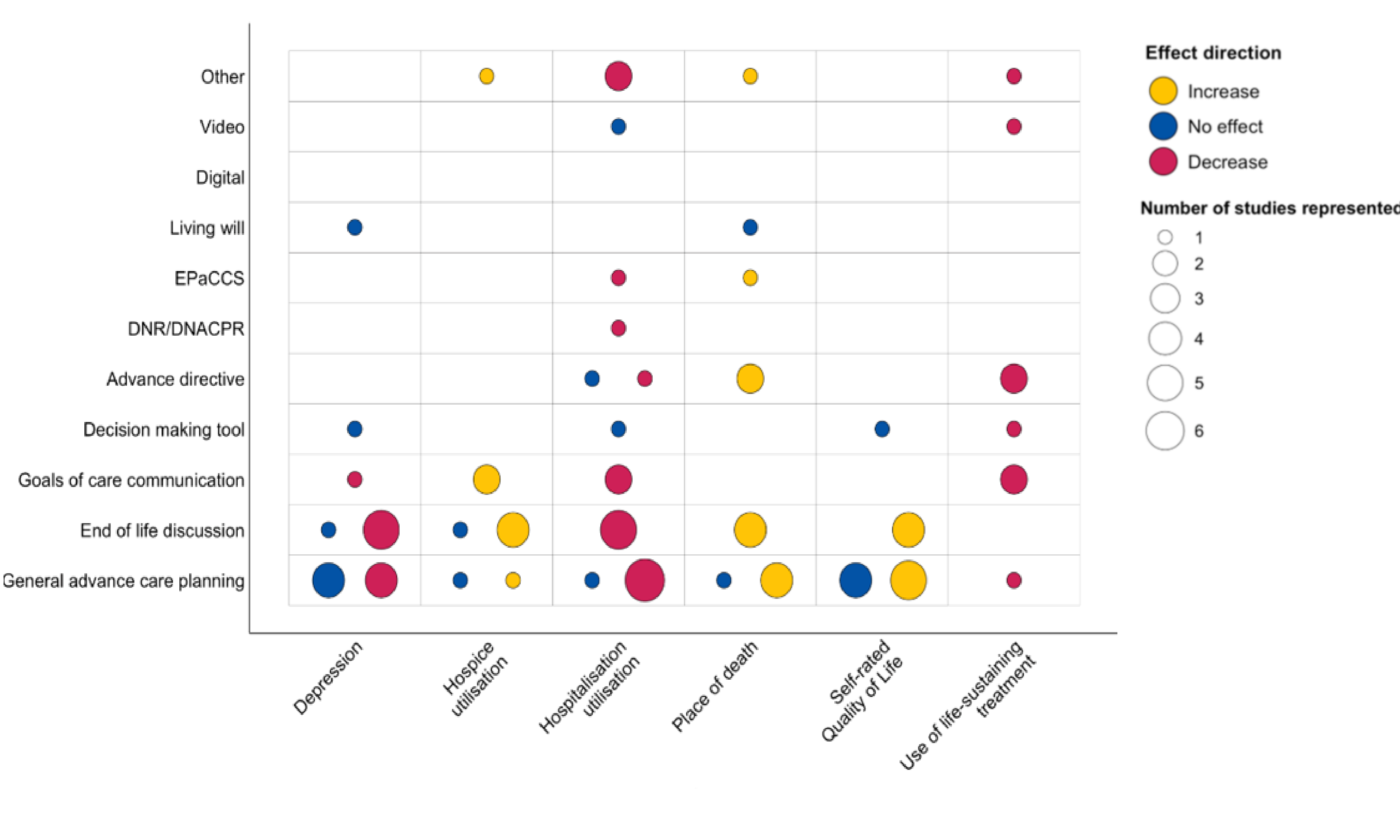
Scan the QR code to access the full protocol, registered on PROSPERO.



## Impact of ACP interventions on Quality of Care Outcomes \*chart key to right\*



## Impact of ACP interventions on Healthcare Outcomes



- Key findings:**
- 14 reviews evidenced that **ACP led to significant increases in patients receiving care consistent with their goals**.
  - **ACP increased satisfaction with overall care** received (10 reviews), and satisfaction with clinicians (including communication and overall interactions; 6 reviews).
  - **Evidence on decisional conflict was mixed**. Decision making tools, end of life discussions, and general ACP sometimes decreased decisional conflict, while other evidence suggested no impact.

- Key findings:**
- **15 reviews evidenced significantly decreased hospital utilization** in line with patient's preferences following ACP.
  - In turn, evidence suggested **ACP increased hospice utilisation** where this was a patient's stated preference.
  - **Evidence regarding patients' wellbeing was mixed**. Eight reviews evidenced significant decreases in self-reported depression following ACP, but six reported no effect.
  - **Nine reviews indicated significant increases in patients dying in their preferred place of death** following advance directives, end of life discussions, and ACP generally.



**Patient & Public Involvement**  
Two PPI contributors supported this review. They have been involved with the review since May 2023, including tasks such as developing the review protocol, determining search terms, full text screening, feedback on development of analysis, and reviewing dissemination materials. All involvement was recorded

**References**  
Sudore RL, Heyland DK, Lum HD, Rietjens JA, Korfage IJ, Ritchie CS, Hanson LC, Meier DE, Pantilat SZ, Lorenz K, Howard M. Outcomes that define successful advance care planning: a Delphi panel consensus. Journal of pain and symptom management. 2018 Feb 1;55(2):245-55.