

# Advance Care Planning Australia

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## National Advance Care Directive Prevalence Study

### APPLICATION GUIDELINES

2018

Prepared by Advance Care Planning Australia

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Advance Care Planning Australia is an initiative of Austin Health and is supported by funding from the Australian Government Department of Health.

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## Introduction

Advance Care Planning Australia is calling for applications from Australian general practices, hospitals and residential aged care facilities to participate in the National Advance Care Directive Prevalence Study. This national study will assess the prevalence of Advance Care Directives and other advance care planning documentation in Australian health and residential aged care services. The data collected as part of this study will assist organisations and governments to understand how well advance care planning is being implemented within services, and identify areas for improvement.

These guidelines will assist organisations in lodging an application to participate in the study.

Applicants are invited to contact Advance Care Planning Australia on (03) 9496 5660 or [acpa@austin.org.au](mailto:acpa@austin.org.au) for clarification or assistance with any part of the application process.

A set of Frequently Asked Questions are also available on the National Advance Care Directive Prevalence Study website ([advancecareplanning.org.au/prevalence](http://advancecareplanning.org.au/prevalence)).

## Definitions

### **Advance Care Directive**

A type of written structured advance care plan that is completed and signed by a competent adult (i.e. person-driven document). In Australia, Advance Care Directives are either recognised by specific legislation (statutory Advance Care Directive) or common law (non-statutory Advance Care Directive).

Advance Care Directives can record the person's preferences for future care, and/or record the appointment of a substitute decision-maker to make decisions about the person's health care.

Terms for Advance Care Directives differ in each state/territory. Data collectors will receive a list of terms that name Advance Care Directives within their jurisdiction.

### **Advance Care Directive prevalence**

The proportion of a study population that has an Advance Care Directive at the time of the study.

### **Advance care planning**

The process of planning for future health and personal care whereby the person's values, beliefs and preferences are made known so they can guide decision-making at a future time when that person cannot make or communicate their decisions.

### **Advance care planning documentation**

The collective term for statutory Advance Care Directives, non-statutory Advance Care Directives and other advance care planning documentation. For the purposes of this study, advance care planning documentation is categorised as:

1. Statutory Advance Care Directive: preferences for care
2. Statutory Advance Care Directive: substitute decision-maker
3. Interstate statutory Advance Care Directive: preferences for care
4. Interstate statutory Advance Care Directive: substitute decision-maker
5. Non-statutory Advance Care Directive
6. Other advance care planning documentation

### **Data collector(s)**

Staff member(s) who will collect the data at each site. Staff appointed as data collectors will have experience in retrieving information from health records, and may be quality managers, nurses or allied health professionals such as social workers. All data collectors will be trained in the study methodology.

<b>General practice</b>	General practice provides person-centred, continuing, comprehensive and coordinated whole person healthcare to individuals and families in their communities.
<b>Health record/file</b>	A comprehensive compilation of information traditionally placed in the medical record but also covering aspects of the person's physical, mental and social health that do not necessarily relate directly to the condition under treatment. The record(s) may be paper-based, electronic or both. Also referred to as records, files, case notes, electronic health records, medical records, patient file, client file and care plan.
<b>Hospital</b>	A healthcare facility established under Commonwealth, state or territory legislation as a hospital or freestanding day procedure unit and authorised to provide treatment and/or care to patients.
<b>Jurisdiction</b>	A state or territory within Australia.
<b>Medical order</b>	A medically-driven document (usually completed by a doctor) that outlines the plan of care in relation to emergency treatment or severe clinical deterioration. Medical orders may include 'not for resuscitation' orders and other treatment limitations, as well as decisions regarding transfer to hospital. In some jurisdictions, medical orders are part of a state-based approach. Common names for medical orders include 'Resuscitation Plan' and 'Goals of Care'. Medical orders may or may not include reference to a person's known preferences. For the purposes of this study, a medical order that includes specific reference to a person's known preferences is considered a form of 'other advance care planning documentation'. See definition of 'other advance care planning documentation'.
<b>Non-statutory Advance Care Directive</b>	All person-driven advance care planning documents that meet the requirements for Advance Care Directives (i.e. structured documents that are completed and signed by a competent adult) that are <u>not</u> legislated state-based Advance Care Directives.
<b>Organisation</b>	In this context, organisation refers to accredited general practices, hospitals or residential aged care facilities. Organisations may have multiple sites.
<b>Other advance care planning documentation</b>	For the purposes of this study, other advance care planning documentation includes the following: <ol style="list-style-type: none"><li>1. <i>Unstructured</i> advance care planning documentation completed by the person that outlines their preferences for care (e.g. a letter or note);</li></ol>

2. Advance care planning documentation completed *on behalf of the person* (e.g. by a healthcare professional or the person's decision-maker) that outlines the person's expressed preferences for care. This may include a medical order if it contains reference to the person's known preferences, notes in the medical record, or other documents developed for the purpose of documenting an advance care planning discussion with the person.
3. Other advance care planning resources, such as an alert, advance care planning invitation, policy document, pamphlet or any other documentation/resource related to advance care planning that has not been completed by or on behalf of the person.

**Person**

Consumers of services provided by hospitals, residential aged care facilities and general practice. Used interchangeably with resident, patient and client.

**Residential aged care facility**

Provides care within a supported accommodation setting for those whose care needs can no longer be met within their own homes.

**Site**

An individual campus of the organisation (general practice, hospital or residential aged care facility). Some organisations may have multiple sites. For example, Austin Health is an organisation; Austin Hospital, Austin Repatriation Hospital and the Royal Talbot Hospital are sites within the organisation.

**Statutory Advance Care Directive**

All person-driven advance care planning documents that meet the requirements for Advance Care Directives (i.e. structured documents that are completed and signed by a competent adult) that are legislated state-based Advance Care Directives. Titles, content and requirements for validity vary between states/territories.

**Study Lead**

A staff member at each participating site who will be the key contact for ACPA and responsible for coordinating the research at their site.

## Background to the National Advance Care Directive Prevalence Study

Advance care planning is a recognised priority in the National Framework for Action on Dementia and the National Palliative Care Strategy. Most jurisdictional Departments of Health have advance care planning policy, strategy and program. However, there is limited data and information about the uptake of the documents by the Australian community and by health sector.

Advance care planning gives people the opportunity to consider and communicate their preferences for care in case they become unable to make or communicate their own decisions. Clear documentation of their preferences in an Advance Care Directive can help family and healthcare professionals make complex decisions on a person's behalf. Missing or inaccurate documentation of a person's advance care planning preferences may lead to inappropriate or unwanted care for people at the end-of-life or undue stress and burden on family members.

In 2017, Advance Care Planning Australia, in partnership with Monash University, undertook the first pilot study assessing the prevalence of advance care planning documentation in Australian health and residential aged care services. This initiative aimed to provide essential information and data regarding the prevalence and accessibility of Advance Care Directives among people aged 65 years or more in general practice, hospitals, and aged care facilities across multiple Australian jurisdictions. The study also aimed to evaluate whether medically-driven plans developed for the person were consistent with documented patient-driven preferences for care, including medical treatment.

A total of 51 sites participated in the pilot study, including 13 general practices, 12 hospitals and 26 residential aged care facilities located in six Australian jurisdictions. Findings revealed considerable variability in the prevalence of Advance Care Directives across participating sites, sectors and jurisdictions. The data collected in the pilot study provides a valuable baseline prevalence estimate that will help participating services, state and territory departments of health, and the Australian Government to understand how well advance care planning is currently being implemented in Australia and identify areas for improvement.

The National Advance Care Directive Prevalence Study will be conducted again in 2018. This study will build upon the findings and methodology of the pilot study to collect a national dataset on the uptake of Advance Care Directives in Australian health and residential aged care services.

This project will appeal to organisations who want to contribute to ground-breaking research, which may influence future advance care planning policy and strategy.

### Aims

The aims of the National Advance Care Directive Prevalence Study are to:

1. Determine the prevalence of Advance Care Directives (statutory and non-statutory) and other advance care planning documentation in paper and/or electronic health

- records of people aged 65 years or more in general practices, hospitals, and residential aged care facilities;
2. Assess the content and quality of Advance Care Directives across different health sectors and jurisdictions;
  3. Explore whether medically-driven clinical care plans and/or medical orders developed for the person are consistent with the person's Advance Care Directive; and
  4. Explore the characteristics of individuals who have an Advance Care Directive documented in their medical record.

## Scope

A minimum of 24 sites across all eight Australian jurisdictions will be selected to participate in this study following an expression of interest process. A minimum of 30 health records will be audited in each participating site, resulting in a sample of approximately 720 health records.

## Study population

The study will focus on people aged 65 years or older who have been admitted to hospital or living in a residential aged care facility for more than 48 hours, and those visiting general practice on the day(s) of the study.

In hospitals and residential aged care facilities, a random sample of a minimum of 30 and maximum of 50 people meeting the inclusion criteria will be included in the health record audit. For general practice, a minimum of 30 and a maximum of 50 consecutive people meeting the eligibility criteria will be included.

## Project methodology

This study involves an audit of individual health records to determine the availability and types of Advance Care Directives and other advance care planning documentation amongst people accessing participating sites at the time of the study.

Participating sites will appoint one staff member to act as Study Lead and up to two additional staff members to collect data for the study. The Study Lead will be the key contact for Advance Care Planning Australia and be responsible for coordinating the study within their site.

All data collectors will receive a data collection manual and complete an online training webinar to ensure that they understand how to conduct the audit in a standardised way across participating sites. In addition, data collectors will be able to contact Advance Care Planning Australia during the study should they have any issues or concerns during data collection.

Sites will be asked to nominate preferred date(s) to conduct the data collection. Ideally, this will be 1-2 consecutive days during the specified data collection, up to a maximum of 3 days.

Data collector(s) at each site will review the health records selected for the audit. Information to be collected includes demographic characteristics, some general clinical information, details of any identified Advance Care Directives and other advance care planning

documentation, people's recorded preferences regarding their care and details of any medically-driven orders. Data will be entered into a secure online database.

It will take 20-45 minutes to review and extract the data from each health record. Therefore, the staffing requirements for data collection are likely to be between 15 and 25 hours.

## Who can apply?

Applications to participate in the National Advance Care Directive Prevalence Study are open to all public, private, accredited general practices, hospitals and residential aged care facilities in Australia that meet the eligibility criteria, including sites that participated in the pilot study.

To be eligible for the study, all sites must meet a set of general criteria, as well as several sector-specific requirements.

### General eligibility criteria

General practices, hospitals and residential aged care facilities are eligible to apply if they:

1. Are an accredited organisation according to sector requirements.
2. Have the approval and endorsement of their executive team.
3. Can nominate one staff member to act as the Study Lead (this person will be responsible for coordination of the study at the site and will be the key contact person for Advance Care Planning Australia).
4. Have internet, email and telephone access.
5. Have access to devices for online data collection (e.g., computer, laptop or iPad).
6. Have policies in place about privacy and confidentiality.
7. Agree that the information provided in their application will be used to generate a Research Collaboration Agreement with Austin Health, if successful.
8. Are willing to sign the Research Collaboration Agreement, preferably within four weeks of being invited to participate in the study.
9. Meet sector-specific eligibility criteria, as outlined below.

### Sector-specific eligibility criteria

Hospitals are eligible to apply if they:

1. Expect that their site will have at least 50 patients on the day(s) of the study that are aged 65 years or older and have been admitted for at least 48 hours\*;
2. Have a records management system with the ability to extract a list of all admissions of people aged 65 years or older who have been admitted for more than 48 hours on the day(s) of the study.
3. Can nominate up to two additional staff members to collect the data for the study.
4. Are willing to support the Study Lead and data collectors(s) to undertake up to three hours of mandatory online training in data collection procedures.
5. Have the capacity to review a minimum of 30 health records.
6. Can obtain additional ethics approval and/or a site specific assessment at their site, ideally within an approximate timeframe of six-eight weeks of being invited to participate in the study. If this is likely to be infeasible, sites are invited to contact Advance Care Planning Australia to discuss alternative arrangements.

Residential aged care facilities are eligible to apply if they:

1. Expect that their site will have at least 50 residents on the day(s) of the study that are aged 65 years or older and have been admitted for at least 48 hours\*;
2. Have a records management system with the ability to extract a list of all admissions of people aged 65 years or older who have been admitted for more than 48 hours on the day(s) of the study.
3. Can nominate up to two additional staff members to collect the data for the study.
4. Are willing to support the Study Lead and data collector(s) to undertake up to three hours of mandatory online training in data collection procedures.
5. Have the capacity to review a minimum of 30 health records.

General practices are eligible to apply if they:

1. Expect that at least 30 patients aged 65 years or older will attend their practice on the day(s) of the study;
2. Have a records management system with the ability to extract a list of all people aged 65 years or older attending the practice on the day(s) of the study.
3. Can nominate up to two additional staff members to collect the data for the study OR agree to data collector(s) being provided by Advance Care Planning Australia. Any data collectors employed by Advance Care Planning Australia will have completed all required training procedures and be required to meet privacy and confidentiality requirements of the practice/organisation.

The following are NOT eligible to apply:

- Individuals.
- Organisations with less than 50 residents/clients.
- Outreach services.
- Overseas organisations.

\*In hospitals and residential aged care facilities, a minimum of 30 health records will be randomly selected from a list of all eligible records on the day(s) of the study. This is why it is important that your site has a minimum of 50 patients/clients meeting eligibility criteria on the day(s) of the study, so that randomisation can occur.

## What are the benefits of participating in the study?

Participating organisations will benefit from:

- The opportunity to contribute to groundbreaking Australian research, which may influence future advance care planning policy and strategy.
- An individualised de-identified report detailing how your site compares to other sites across Australia with regards to prevalence of Advance Care Directives. You can download an example site report from [advancecareplanning.org.au/prevalence](http://advancecareplanning.org.au/prevalence).
- A baseline estimate of the proportion of people within your service who have an Advance Care Directive and what type of Advance Care Directive they have at the time of the audit.
- The opportunity to use this study as part of quality improvement and accreditation standards such as:

**Aged care:** *Aged Care Accreditation Standards 1-4,*

**Hospitals:** *National Safety and Quality Health Service Standards and*

**General practice:** *Royal Australian College of General Practitioners (RACGP) Standards for General Practices 5th edition.*

- A training package to ensure that all staff members involved in the study are upskilled in their knowledge and awareness of advance care planning.
- Ongoing support from the research team, including a telephone advisory line.
- Feedback from researchers on how well sites are recording and storing Advance Care Directives.
- An opportunity to learn more about how sites can improve their delivery of advance care planning and therefore, improve the likelihood that a person's preferences will be known and adhered to if they can no longer speak for themselves.

Data collectors from each site will benefit from:

- Webinar training sessions in advance care planning and data collection;
- Regular support and communication from the research team;
- A training manual to supplement the online webinar training;
- Continuing professional development points, where applicable.

## What is the application process?

To apply to participate in the National Advance Care Directive Prevalence Study, you will need to submit an online application.

If more than one site from the same organisation wishes to participate in the study, **all** sites must complete a separate application and meet eligibility criteria.

The application process involves the following steps:

1. After reading these Application Guidelines, download a copy of the Application Form from the Advance Care Planning Australia website. This will give you an idea of the questions you will need to answer in the online application form. Viewing the questions before you start your online submission will allow you to collect any further information, documents and approvals you require from within your organisation before you start filling in the online form.
2. Ensure you have the approval and endorsement of your executive team (e.g. CEO or another duly authorised representative) for your site to participate in this study.
3. Download the Research Collaboration Agreement from the Advance Care Planning Australia website. This document is for your reference only. This agreement will not need to be completed until you have been notified that your site is suitable to participate in the study. You may wish to show a copy to the appropriate person in your executive team (e.g. CEO).
4. Complete the online Application Form.

Once the application period closes, the project team will assess all applications to ensure the mandatory requirements set out in the guidelines have been met. The assessment criteria are listed on the following page. These criteria are designed to ensure that sites have the capacity to conduct the data collection.

All sites will be notified of the outcome of their application within four weeks of the closing date for applications.

## When will the research commence?

Data collection will occur in 2018. Start dates will vary across participating sites. The Advance Care Planning Australia research team will work with each site to determine the best timing to conduct the study.

## Assessment criteria

Applications will be assessed by the research team against the following criteria:

Item	Criteria
<b>Eligible to participate</b>	<ul style="list-style-type: none"> <li>▪ Meets all applicable eligibility criteria (listed on pages 9-10).</li> </ul>
<b>Ability to provide leadership to project team within the organisation</b>	<ul style="list-style-type: none"> <li>▪ Experienced personnel (e.g., research, advance care planning, quality and safety) available to lead and conduct the project.</li> <li>▪ Approval from senior personnel to participate in the study.</li> </ul>
<b>Representative sample</b>	<ul style="list-style-type: none"> <li>▪ Sites will be selected to ensure adequate representation of health sectors across all states and territories.</li> </ul>

## Key dates

<b>Activity</b>	<b>Date</b>
Opening date for applications	Monday 18 June, 2018
Closing date for applications	Thursday 26 July, 2018
Sites advised of outcome	Within 4 weeks of closing date for applications.
Successful sites sign Research Collaboration Agreement	Ideally within 4 weeks of being invited to participate in the study
Hospital ethics and governance arrangements in place	Ideally within an approximate timeframe of 6-8 weeks of being invited to participate in the study
Data collection period	August – November, 2018

## Support and responsibilities

### Organisational support

Advance Care Planning Australia will provide support to each participating organisation and will be available by telephone for consultation throughout the project.

### Individual support

Staff involved in the data collection activities will benefit from:

- Online training sessions in data collection.
- Support of Study Leads at participating sites.
- Regular communication and support from the research team.
- A training manual to supplement the training program.
- Continuing professional development points, where applicable.

### Responsibilities of organisations

Involvement in this research project requires commitment from all participating sites. This involves:

- Senior executive approval and support for the study with authority to sign a Research Collaboration Agreement, and where necessary, a site specific assessment (SSA).
- Ensuring data collection is conducted in compliance with all stipulations of the study protocol, the conditions of the ethics committee approval with the NHMRC *National Statement on ethical Conduct in Human Research (2007)* and the *Note for Guidance on Good Clinical Practice (CPMP/ICH-135/95)*.
- Having access to the specified number of health records/files on the day(s) of the study that are likely to meet the inclusion criteria.
- Being able to provide resources to ensure completion of the study in the allocated timeframe.
- Providing copies of any site-specific advance care planning organisational policies and form templates to the research team, if applicable.
- Having access to computers and/or tablets with a reliable internet connection to streamline data collection activities.
- Ensuring email and/or telephone access is available to staff.
- Allowing internet access to the online data repository tool.

## Project ethics

### Ethics approval

The National Advance Care Directive Prevalence Study has received ethics approval from Austin Health Research Ethics Committee (reference number: HREC/18/Austin/109) under the National Mutual Acceptance (NMA) agreement. The NMA agreement provides single ethical review for multi-centre research projects for public health organisations in the participating states of New South Wales, Queensland, South Australia, The Australian Capital Territory, Victoria and Western Australia.

The Northern Territory and Tasmania are not part of the NMA agreement. Advance Care Planning Australia will support these jurisdictions to gain ethics approval to conduct the study once successful organisations are confirmed.

### Research Collaboration Agreement

Successful sites will be required to sign a Research Collaboration Agreement with Austin Health, which outlines the terms and conditions of conducting the study at their site.

### Site specific assessment

Hospitals will also be required to submit an SSA of the study to their own research governance department to confirm local capacity and capability to conduct the project. Advance Care Planning Australia will support these organisations to gain appropriate ethics and governance approvals to conduct the study at their site, and subsidise any ethics application fees.

Residential aged care facilities and general practices will not be required to complete an SSA.

### Privacy and confidentiality

To maintain confidentiality of personal information, only staff employed by the site and directly involved in collection of data will access health records/files. Data will be handled, stored and disposed of according to the *National Statement on Ethical Conduct in Human Research, 2007*.

Each participating site will receive an individual report of their results in comparison with other (de-identified) sites across Australia. This feedback will allow sites to gain greater understanding of their advance care planning practices and processes and identify areas for improvement. No identifying information related to the site will be provided to any third party.

## How to complete the online application

All applications must be submitted online ([advancecareplanning.org.au/prevalence](http://advancecareplanning.org.au/prevalence)) by the closing date (see Key Dates). Faxed, emailed, hard copy, late or incomplete applications will not be accepted.

Acknowledgment of receipt of each application will be forwarded within one business day of the application submission.

There are six sections to complete in the online application form. We recommend that you download a copy of the application form from the Advance Care Planning Australia website to view the questions and begin to prepare your responses before you begin. It is likely that you will need to collect some information, documents and approvals from within your organisation before you start filling in the online form.

Once you begin the online application, you will be able to save your application at any time and return to it again at a later date.

We recommend that you use a modern browser on a desktop computer or laptop to submit your application.

## Application instructions

### Section 1

The first section of the application form assesses your site's eligibility to participate in the study. If you tick 'no' for any of these questions, your site is not eligible for the study.

#### Question 1

This question asks whether your site is an accredited general practice, hospital or residential aged care facility. Please select the correct response.

#### Question 2

This question asks you to indicate the type of your organisation. Please select the correct response.

#### Question 3

#### For hospitals and residential aged care facilities:

- 3.1: This question asks whether your site is likely to have at least 50 patients or residents meeting the inclusion criteria for the health record audit on the nominated day(s) of the study. The inclusion criteria are: people are aged 65 years or older and have been admitted for at least 48 hours at the time of the study. We understand that this may be difficult for some sites to assess, but it is an essential requirement for the randomisation component of the study methodology. Please select the correct response.
- 3.2: This question asks whether your site has a patient management system or database with the capacity to extract a list of all people who meet the inclusion criteria for the health record audit on the nominated day(s) of the study. You may need to consult with your health records management team. Please select the correct response.
- 3.3: This question asks whether your site has the capacity to support the staff appointed as Study Lead and/or data collector(s) to complete up to three hours of mandatory online training in how to collect the data. Please select the correct response.
- 3.4: This question asks whether your site has the capacity to provide data collector(s) to review a minimum of 30 health records during the audit (which may occur over 1-3 consecutive days). Please select the correct response.

#### For general practices:

- 3.1: This question asks whether your practice is likely to have at least 30 patients meeting the inclusion criteria for the health record audit on the nominated day(s) of the study. The inclusion criteria are that people are aged 65 years or older and are attending the practice on the day(s) of the study. We understand that this may be difficult for some sites to assess, but it is an essential requirement for the study methodology. Please select the correct response.
- 3.2: This question asks whether your site has a patient management system or database with the capacity to extract a list of all people who meet the inclusion

criteria for the health record audit on the nominated day(s) of the study. You may need to consult with your health records management team. Please select the correct response.

## Question 4

This question asks whether your site has the approval and support of the executive team to participate in the study. Please select the correct response.

## Question 5

This question asks whether your site has internet access. This is an important requirement because data will be entered directly into a secure online study database. Please select the correct response.

## Question 6

This question asks whether your site has electronic devices available for data collection (e.g. computers). This is an important requirement because data will be entered electronically into an online database. Please select the correct response.

## Question 7

This question asks whether staff involved in the study have telephone and email access. Please select the correct response.

## Question 8

This question asks whether your site has policies in place about privacy and confidentiality. Please select the correct response.

## Question 9

This question asks whether your site is willing to sign a Research Collaboration Agreement with Austin Health, preferably within four weeks of being invited to participate in the study. You can download a copy of the Research Collaboration Agreement from the Advance Care Planning Australia website. It sets out the terms and conditions of the National Advance Care Directive Prevalence Study. Please select the correct response.

### Question 9.1

This question is only applicable to public health organisations that require additional ethics approval and/or a site-specific assessment. It asks whether these approvals can be achieved within six-eight weeks of being invited to participate in the study. Please select the correct response.

## Question 10

This question asks you to confirm your understanding that the information provided in the application will be used to generate a Research Collaboration Agreement with Austin Health, if successful. Please select the correct response.

## Section 2

This section collects contact details for the Study Lead and data collector(s) and information about your site.

### Question 11

Please provide the full name of your organisation. For example, 'Austin Health'.

### Question 12

If you are applying on behalf of a particular site within your organisation, please provide the full name of your site. For example, 'Austin Hospital'.

If the names are the same, please enter 'As above'.

### Question 13

Please provide full contact details for the Study Lead, including their full name, role, telephone number(s), email address, and direct postal address. Please also describe the Study Lead's relevant experience in advance care planning and/or research in 50 words or less. Dot points are acceptable.

### Question 14

This question asks you to provide full contact details for additional staff member(s) who will collect the data for the study. Please provide their name, role, telephone number and email address. Please also describe their relevant experience in advance care planning and/or research in 50 words or less. Dot points are acceptable.

### Question 15

Please specify the state or territory of your site.

### Question 16

Please specify the location of your site.

### Question 17

Please specify how your service is funded (select all that apply).

### Question 18

Please specify whether your site has access to individual records through 'My Health Record'.

### Question 19

Please enter the name of the electronic system used to store and manage health records at your site.

### Question 20

For **hospitals**:

- Please enter the approximate number of inpatient beds at your site.

For **residential aged care facilities**:

- Please enter the approximate number of residents at your site.

For **general practices**:

- Please enter the approximate number of general practitioners full time equivalent (FTE).

## Question 21

For **hospitals**:

- Please enter the approximate number of separations per year at your site.

For **residential aged care facilities**:

- Please enter the approximate number of nursing staff full time equivalent (FTE).

For **general practices**:

- Please enter the approximate number of nursing staff full time equivalent (FTE).

## Section 3

The third section asks you to describe why your site would like to be involved in the study.

## Question 22

Please let us know why your site would like to participate in this study. For example, as a quality improvement activity, to gain a greater understanding of advance care planning within your organisation, to identify areas of improvement, etc. Dot points are acceptable for this section.

## Section 4

Section 4 **will not be used in the assessment process**. The information provided in this section will allow us to describe the characteristics of the organisations participating in the study at the aggregate level. It will also help us to better understand the current status of advance care planning implementation across Australian healthcare services. It collects information about current advance care planning practices and processes within your organisation.

## Question 23

Please specify whether your site offers any kind of advance care planning program or service to your clients/residents. This could include activities such as offering advance care planning during the admission process, as part of a routine health assessment, or having an

advance care planning clinician to introduce people to advance care planning and facilitate discussions.

If 'yes' is selected, you will be asked to specify the year this program / service was implemented at your site.

## Question 24

Please specify how your site funds or supports advance care planning (if applicable). If your site does not currently fund or support advance care planning, please select 'No funding / support'.

## Question 25

Please specify whether staff at your site have access to training in advance care planning. If 'yes' is selected, you will be asked to specify whether this training is offered within your organisation, through an external organisation, or a mixture of both.

## Question 26

Please specify whether your site has a specific policy or guideline about advance care planning.

If 'yes' is selected, you will be asked to upload a copy of the policy or guideline(s). This will help us to understand how advance care planning is being implemented at the organisational level in participating sites.

## Question 27

Please specify whether your site has other policies or guidelines that reference advance care planning.

## Question 28

Please specify whether your site provides clients/residents with information or resources about advance care planning.

If 'yes' is selected, please indicate the type of resources or information provided (select all that apply).

## Question 29

Please specify whether your site has a mechanism or mechanisms to record that an advance care planning discussion has occurred and/or an Advance Care Directive/plan has been completed.

If 'yes' is selected, please indicate the mechanism/s used (select all that apply).

## Question 30

Please specify whether your site uses any Advance Care Directive templates or forms. This may include templates developed by your organisation or another organisation, statutory (i.e. legal) Advance Care Directives provided by your state government, or other types of "fill in the blank" documents to record advance care planning conversations.

If 'yes' is selected you will be asked to provide the names of these documents. You will also be asked to upload blank copies of any documentation used or offered to clients/residents within your organisation. This will help us to gain a greater understanding of the types and content of advance care planning documentation used within Australian health and residential aged care services. Please ensure that uploaded documents are BLANK forms. Please **do not** upload documents that have already been filled in.

## Section 5

This section collects information that will be used to generate a Research Collaboration Agreement if your application is successful. Public hospitals will also be asked to provide details regarding ethics requirements in their organisation.

### Question 31

This question asks you provide details that will be included on a Research Collaboration Agreement, if your site is successful in the application process. The Research Collaboration Agreement is a legal contract between Austin Health and your organisation, and requires CEO or duly authorised representative approval and sign off. Please ensure that you provide complete and accurate information in each section.

**Questions 32-34 apply only to applicants from hospitals.**

### Question 32

Question 35 asks you to provide the name of the Human Research Ethics Office/Committee at your site. It also asks you to specify the name and contact details of a relevant contact person at your site's Human Research Ethics Office. This information is collected so that Advance Care Planning Australia can help your site with local ethics and governance requirements.

### Question 33

This question asks whether there will be a fee for an ethics application at your site. If 'yes' is selected, you will be asked to specify the fee.

### Question 34

This question ask whether there will be a fee associated with applying for a site specific assessment (SSA) at your site. If 'yes' is selected, you will be asked to specify the fee.

## Section 6

The final section of the application form is the certification section. This section should be completed by the Study Lead. It ensures that all information provided in the application is true and correct, the Study Lead understands their role in the study, and approval to participate has been obtained from an appropriate member of the executive team.

## Further information and support

If you require any assistance with any part of the application process, please contact Advance Care Planning Australia:

**Advance Care Planning Australia**

Phone: (03) 9496 5660

Email: [acpa@austin.org.au](mailto:acpa@austin.org.au)