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Conference abstract

The Impact of Didactic Training on Advanced Care Planning Documentation in a Critical Care Setting?

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INTRODUCTION

Advanced care planning (ACP) discussions are structured conversations which align patient care with individual values and goals, particularly in the intensive care unit (ICU). However, completion of ACP documentation remains inconsistent, possibly secondary to lack of provider training on conducting ACP discussions. This study evaluates the effect of didactic ACP training for surgical ICU providers on timing of ACP documentation completion and effect on patient length of stay (LOS).

METHODS

A retrospective review of patients admitted to the surgical ICU at Henry Ford Hospital from January 2023 to April 2026 was completed. Provider training in the surgical ICU was implemented in August 2024. Primary endpoints were percentage of ACP notes completed on the unit and percentage of notes completed within 72 hours of admission. LOS was also determined.

RESULTS

2683 patients were admitted to the surgical ICU before and 3440 admitted after implementation of didactics. The percent of patients with an ACP note on the unit increased from 9.4% to 29.8% after ACP didactic implementation. 71.3% of patients had ACP notes documented within 72 hours before didactics compared to 73.7% after implementation. From January 2026 to April 2026, 60.5% of patients on the unit had a documented ACP note and 86.1% of these were documented within 72 hours. Average length of stay in expired patients with a documented ACP note was 6.1 days compared to 7.15 days in those without a documented ACP note.

CONCLUSIONS

ACP didactic instruction to critical care staff leads to increased overall documentation of ACP notes along with increased timely documentation of ACP notes within 72 hours. Timely documentation of these discussions in critically ill patients may better align with patient and family goals and decrease length of stay.

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