5th International Conference on **Advance Care Planning and End of Life Care**

9th-12th September 2015 Munich, Germany

www.acpel2015.org

witchew, reflection, conduction **ACP – Key to Patient-Centered Care**



PROGRAMME

Organiser: Institute for Ethics, History and Theory of Medicine Ludwig Maximilian University, Munich

In cooperation with:





Contents

Welcome by the German Federal Minister of Health 3 Welcome by the European Association for Palliative Care (EAPC) and the German Society for Palliative Medicine (DGP) Welcome by the Conference Co-Chairs **Contact Information and Committees** Scientific Programme Wednesday – Pre-Conference Workshops Wednesday – Opening Ceremony Thursday – Morning Sessions Thursday – Afternoon Sessions Friday – Morning Sessions Friday – Afternoon Sessions Saturday– Morning Sessions Conference Venue Floor Plan **General Information** Abstracts and Index of Presenting Authors

Supporters

We thank the following supporters for their financial contributions to the ACPEL 2015 Conference:



ACPEL Conference 2017 in Vancouver!

The 6th International Conference on Advance Care Planning and End of Life Care (ACPEL) is scheduled for 2017 and will take place in Vancouver, Canada. Designated convenor is **Prof. Sara Davison**, Department of

Medicine, University of Alberta.

All participants of the 5th **ACPEL Conference in Munich** will be informed by email when more details become available.



Welcome by the German Federal Minister of Health



Dear Conference Participants,

Allow me to extend a warm welcome to the 5th International Society of Advance Care Planning and End of Life Care Conference that, for the first time, is being held in Germany. I

am glad that you, as leading scientists and practitioners from all around the world, have come together here to share the options and possibilities that hospice and palliative care are able to offer.

Terminally ill and dying persons need the certainty that they are not alone as their life draws to an end and that they are being well cared for and supported in every way.

Beyond providing pain relief and managing other symptoms, the focus of the many impressive services offered by the hospice and palliative care facilities throughout our country is also on meeting the emotional, spiritual and social needs of patients through a combination of medical, nursing, voluntary and spiritual care.

To ensure that everyone can rely on receiving this care and support when needed, we will continue to strengthen hospice and palliative care provision.

In recent years, we had made great strides in establishing and expanding outpatient specialist palliative care and strengthening outpatient hospice services. In July 2013 for instance, a forum for "Palliative and Hospice Care in Germany" was set up at the Federal Ministry of Health. In addition to networking the major actors, it is our aim to effectively integrate hospice culture and palliative care into clinical practice on the ground. With our "Act to Inhance Hospice and Palliative Care in Germany" that the Cabinet adopted in April of this year, we have taken another major step towards strengthening palliative care and hospice culture in the places where people spend the end of their lives – be it at home, in nursing homes, or hospitals. Moreover, insured persons and their relatives will have the right to receive individual counselling and assistance from their health insurance fund in selecting and taking up palliative care and hospice care services.

In addition, we are creating the statutory basis for ensuring that nursing homes can organise and offer their residents advance care planning that will meet their individual and comprehensive medical, nursing, psychosocial and spiritual end-of-life care needs.

This is also the aim you have been pursuing with Advance Care Planning, a concept that, until now, has established itself mainly in the English-speaking countries. It seeks to provide broad access to information and guidance on how to plan for future and end-of-life care. This can help to reduce fears of helplessness, isolation or dying itself and enhance a person's autonomy and quality of life in the last phase of her or his life.

In light of the foregoing, I am sure that this year's International Society of Advance Care Planning and End of Life Care Conference, too, will drive and inspire the enhancement of patient-centered care.

I wish all of you an interesting conference, stimulating discussions and many new contacts. Furthermore, I wish to thank all of those who, this year as well, have spared no effort in making the 5th International Society of Advance Care Planning and End of Life Care Conference a success. All of you are major contributors to ensuring that terminally ill people can be secure in the knowledge that they will not feel alone in the last phase of life.

Hermann Gröhe German Federal Minister of Health

Welcome by the European Association for Palliative Care (EAPC) and the German Society for Palliative Medicine (DGP)

Dear Colleagues,

On behalf of the European Association for Palliative Care (EAPC) I am delighted to welcome you to the 5th International Conference on Advanced Care Planning and End of Life Care (ACPEL) in the beautiful city of Munich.

As the newly-elected President of the EAPC I am delighted that the EAPC offers our support to this important conference. I am struck by the shared objectives of ACPEL and the EAPC, the promotion of excellence in the care of people near the end of life with an emphasis on providing high quality physical, psychosocial, emotional and spiritual care to all; this is at the heart of all we do in palliative care. I believe we have an important role in supporting and preparing patients and families to make important decisions at this critical time in their lives and planning those decisions in partnership with those who care for them personally and professionally.

Dear Colleagues,

It is a great pleasure for us to welcome you to the 5th Conference of the International Society of Advance Care Planning and End of Life Care here in Munich.

Advance Care Planning (ACP) has a great importance for quality of care and safeguarding patient autonomy. ACP is in accordance with the aims of palliative care. Over the past years we developed and implemented the S3 – Guideline Palliative Medicine for Patients with Incurable Cancer that includes a chapter on ACP. This is the first time that ACP is part of our national guidelines.

We should think about ACP much earlier, and General Practitioners should discuss with their patients wishes and treatment preferences that will meet their individual and comprehensive medical, nursing, psychosocial and spiritual end-of-life care (EOLC) needs. Insufficient ACP may pose considerable challenges to those treating patients at the end of life (EOL). Palliative care is a multidisciplinary enterprise and we can gain much by our willingness to build bridges to those working in other health care areas. We hope that further implementation of ACP will help us to improve EOLC. I would like to commend the organising committee on putting together such an interesting programme and I am sure that will result in debate and discussion around this important topic. I wish you well with your deliberations.

I also hope that some of you will also be at the European Association for Palliative Care Research Congress in Dublin (9th-11th June 2016). I look forward to seeing you there.



Best wishes

Philip Larkin EAPC President

We as DGP support the "Act to Improve Hospice and Palliative Care in Germany" which the German Federal Parliament is expected to adopt this year. This law will strengthen palliative care and hospice culture in the places where people spend the end of their lives, and create a basis for ensuring that nursing homes can organise and offer their residents ACP.

We look forward to meeting colleagues from all over the world, to discuss the development of broad access to ACP and to promote excellence in care for people near the EOL. The DGP will support and conduct the further development of ACP programs, and is eager to join you in an international united effort to improve access to high quality of EOLC supported by ACP.

Yours,



Friedemann Nauck Past President of the DGP



Lukas Radbruch President of the DGP

Welcome by the Conference Co-Chairs

Dear Colleagues,

Welcome to the 5th International Conference on Advance Care Planning and End of Life Care in Munich, Germany! We are delighted to host this global conference series for the first time on the European continent, and especially in Germany.

Advance care planning (ACP) as a means to promote patient-centred care continues to gain increasing attention in almost all medical fields and care settings. As an ongoing, life-long communication process facilitated by skilled personnel, ACP is an innovative, effective approach eventually ensuring that when patients are no longer able to make their own medical decisions their treatment wishes are known and honoured. Thus, ACP is a prime example of patientcentered care, of taking seriously patients' concerns, wishes and needs when making and planning treatment and care decisions. And perhaps ACP is even more than that: Clinicians and researchers deeply involved in ACP report that the spirit of ACP unfolds a proliferative effect into every day interactions with patients and their relatives and helps to anchor the crucial but too often neglected concept of patient-centered care deeply and irreversibly in our minds.

While ACP is already well developed and implemented in some (especially Anglo-American) regions of the world, it is still in its infancy or even unknown in other regions, including much of Europe. With the ACPEL2015-Conference, we aim to raise awareness of ACP, promote the exchange between experts and learners in ACP worldwide, provide a platform to present the most current research findings, and spur future high-quality research in this area.

We proudly report that the conference has already attracted more than 300 participants from all over the world, from diverse disciplines and professions and various contexts of health care and health policy. Over 230 abstracts were submitted for the scientific program, covering a wide range of challenging issues in ACP research and implementation. We hope that you all will enjoy an inspiring conference full of new insights, new ideas for your own research or practice, and sustainable networking. Moreover, please take some time to visit some of the treasures that the booming and lively city of Munich, the capital of Bavaria, has to offer in the areas of culture, arts, architecture, and recreation.

Have a wonderful stay in Munich!



Georg Marckmann Chair, Local Organising Committee



Jürgen in der Schmitten Chair, Scientific Committee

Contact Information

Organiser

Institute for Ethics, History and Theory of Medicine

Ludwig Maximilian University, Munich Lessingstr. 2 80336 Munich, Germany Website: www.en.egt.med.uni-muenchen.de

Organisation / Registration

INTERPLAN Congress, Meeting & Event Management AG

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Conference Co-Chairs

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Scientific Committee

- Jürgen in der Schmitten (Chair), Germany
- Linda Briggs, USA
- Irwin Chung, Singapore
- Sara Davison, Canada
- Luc Deliens, Belgium
- Karen Detering, Australia
- Xavier Gómez-Batiste, Spain
- Mogens Grønvold, Denmark
- Bernard (Bud) J Hammes, USA
- Agnes van der Heide, Netherlands
- Bettina Husebø, Norway
- Tanja Krones, Switzerland
- Phil Larkin, Ireland
- Helen Mason, New Zealand
- Friedemann Nauck, Germany
- Signore Luciano Orsi, Italy
- Sabine Pleschberger, Austria
- Judith Rietjens, Netherlands
- William Silvester, Australia

Local Organising Committee

- Georg Marckmann (Chair)
- Claudia Bausewein
- Orsolya Friedrich
- Marion Frobenius
- Monika Führer
- Ingmar Hornke
- Ralf Jox
- Katja Kühlmeyer
- Antje Lenkmann
- Julia Lotz
- Sabine Petri

Wednesday, 9 September 2015 – Afternoon Sessions *** Simultaneous Interpretation / Simultanübersetzung ins Deutsche (Große Aula) ***

Registration 13:00 - 20:30

5th International Conference on Advance Care Planning and End of Life Care

Parallel Pre-Conference Workshops (Afternoon Tea provided)							
IN GERMAN: M210 Regionale / Institutionelle Implementierung eines ACP-Programms (Implementing an ACP program) Ralf Jox, Georg Marckmann, Barbara Kremers-Gerads	IN GERMAN: Qualifizierte Gesprächsbegleitung (Qualified facilitation) <i>Friedemann Nauck,</i> <i>Jürgen in der Schmitten</i>	M201	Research on ACP and EOLC, A016 Workshop I: Meet the Expert. Participants discuss their before submitted ACP research projects (for application or ongoing) in small groups Sara Davison, Luc Deliens, Susan Hickman, William Silvester	Research on ACP and EOLC, A014 Workshop II: The challenge of conducting Randomised Con- trolled Trials (RCTs) to study ACP effectiveness. Practical insights from 4 current RCTs. <i>Trials presented by A van der Heide, M Tattersall,</i> <i>J Gillissen, and C Houben.</i> <i>Josephine Clayton, Carmen Houben</i>	Implementing an ACP program — professional change management in large institutions or regionsA021Linda Briggs, Bud Hammes, Daniel Johnson, John MaycroftDaniel Johnson,		
How to do ACP discussions – a practical A017 approach to facilitator training	Following the plan - ethical and practical challenges of providing EOLC (based on participants' case reports)	A022	Engaging consumers in the design of AO15 ACP services and resources	Discussing treatment options with a patient nearing the end of their life: A communications training program for junior medical staff			
Karen Detering, Sharon Neyland, Craig Sinclair	Charlie Corke, Tanja Krones, Peter Saul		Leigh Manson, Shona Muir, Rebecca Sudore	Steve Philpot, Li Tan			
	Opening Ceremony, Plenary and Panel Große Aula						
Supported by Munich Center for Neurosciences							
Chairs: Georg Marckmann, Jürgen in der Schmitten							
Arcis Cello Quartet, Munich							
Welcome, Conference Co-Chairs							
Welcome, William Silvester, President, Intern	, ,		()	Denner Federal Ministry of Health			
Welcome Address, Till-Christian Hiddeman Welcome Address, Max Kaplan, President,			tory Health Insurance (Grundsatzfragen der GKV), (rman Madiael Association	aennan rederat Ministry of Health			
		dent, Gel					
ACP – Key to Patient-Centred Care, William Silvester ACP deployment – the New Zealand experience, Barry Snow							
ALP DEDIDVIDENT - THE NEW ZEALAND EXD	Short Break						
AGP deployment – the New Zealand exp	ACP in Europe – what are we waiting for, what does it take? Short Statements and Panel Discussion, A van der Heide, C Henry, T Krones, P Larkin, S Rixen, W Silvester, B Snow						
	, what does it take? Short Statements a	and Pa	nel Discussion, A van der Heide, C Henry. T Kro	IIIES, E LAIKIII, O NIXEII, W OIIVESIEI, D OIIUW			
	; what does it take? Short Statements a	and Pa	nel Discussion, A van der Heide, C Henry, T Kro	ilies, F Laikili, S nixeli, W Silveslei, D Silow			
ACP in Europe – what are we waiting for	, what does it take? Short Statements :	and Pa	nel Discussion, A van der Heide, C Henry, T Kro Welcome Reception Lichthof	ilies, F Laikili, S nixeli, W Silvestel, D Siluw			

The program is correct at the time of printing. Updates will be available online (www.acpel2015.org) and at the registration desk.

Thursday, 10 September 2015 – Morning Sessions *** Simultaneous Interpretation / Simultanübersetzung ins Deutsche (Große Aula) ***

Registration 07:30 - 19:00

5th International Conference on Advance Care Planning and End of Life Care

08:30	Plenary 1: Incorporating ACP into health care systems – what can we learn from successful policies? Große Aula							
			Chair: William Silvester					
08:30	Welcome and organisational remarks, Conference Co-Chairs							
08:35	Pragmatism in advance care planning: Implementing a national ACP programme in Singapore, Irwin Chung							
09:00	The integration and scope of spread of A	CP in the UK through the Gold Standards Fra	mework Prgrammes In End of Life Care in a	all settings, Keri Thomas		09:00		
09:25	Honoring Choices Wisconsin – steps tow	ards a state-wide implementation, John Mayo	croft			09:25		
09:50	Nationwide adoption of an ACP program	by a large U.S. health provider (HMO), Danie	l Johnson			09:50		
10:15	Making ACP a regular part of national he	alth care: lessons from leading US Health P	roviders, Helen Mason			10:15		
10:30			Morning Tea / Exhibition / Posters			10:30		
11:00			Themed Concurrent Sessions			11:00		
	ACP concepts/research methods	Faciliation I	End-of-Life Care	Nursing homes	Workshop zum geplanten §132g SGB V			
	Chairs: Irwin Chung, Josie Dixon	Chairs: Bud Hammes, Barry Snow	Chairs: Luc Deliens, William Silvester	Chairs: Mandy Thorn, Keri Thomas	Chairs: J in der Schmitten, G Marckmann			
11:00	Martin Loucka Große Aula	Hillary Lum A021	Allison Lovell A017	Meredith Blake A016	Panel (in German): A014	11:00		
	What are the core components of ACP? A review of current approaches.	How to effectively facilitate ACP group medical visits: Lessons from the field	ACP in Palliative Care: A systematic literature review of the contextual factors influencing its uptake	Promoting autonomy ? Bringing legal analysis to bear on the practical issues associated with ACP implementation	 Till-Christian Hiddemann Referat Grundsatzfragen / GKV, Bundesministerium für Gesundheit Bonn/Berlin 			
11:15	Aliya Kassam Große Aula	Marie Young A021	Sarah Ziegler A017	Ronan O'Sullivan A016	2. Barbara Kremers-Gerads	11:15		
	Using the Think Aloud Method to Evaluate Instrument Design for a New Survey of Patient Engagement with ACP	The patient experience of the ACP process in Auckland, New Zealand	Prevalence and trends of medical end-of-life decisions in German-speaking Switzerland	Evaluating the systematic implementation of the "Let Me Decide" Programme in Long Term Care: A user's perspective.	Seniorenhaus Lindenhof, Grevenbroich Pilotprojekt beizeiten begleiten			
11:30	0.0.0.0.0			Anouk Overheek A016	 Gerd Kukla Spitzenverband der GKV, BUND 	11:30		
11.00	Stephanie Anderson Große Aula How Do We Know ACP Works ?	Lisbeth Thoresen A021	Bernadette King A017 Measuring the quality of End of Life Care:	Anouk Overbeek A016 A Cluster Randomized Controlled Trial on the	Berlin			
	HOW DO WE KNOW ACP WORKS ?	Preparatory conversations in Norwegian nursing homes – Impressions and experiences	expanding the focus of a standardised death screening tool from why a patient died to how well a patient died.	Effects and Costs of ACP in Elderly Care	 Erika Stempfle Diakonie Deutschland – Evangelischer Bundesverband Berlin 			
11:45	Sara Davison Große Aula	Steffen Eychmüller A021	Netta Bentur A017	Tanja Frank A016	5. Anna Pabst	11:45		
	How do healthcare systems evaluate ACP initiatives? Results from a systematic review	"SENS" framework to structure Advance Care Planning – strengthening patient professionals partnership	The Quality of End-of-Life Care for Older Persons with Advanced Dementia Living in the Community	Long term experience with implementation of advance care plans for palliative geriatric patients in nursing homes	Deutscher Caritasverband, Landesverband Bayern e.V.			
12:00	Stef Groenewoud Große Aula			Thomas Otten A016	 Peter Lange, leben & wohnen, Kommunaler Einrichtungs- 	12:00		
	Does ACP in End of Life Care in Limburg increase experienced quality of care, death and dying and decrease unnecessary health care usage?	Thomas Harter A021 Beyond the Basics: A comparison of cost and resource utilization between basic and disease specific ACP	Diane Portman A017 The value of ACP in cancer critical care.	Impact of an ACP program on the conformity of medical treatment at the end of life with nursing home residents' preferences: a controlled inter- view survey of bereaved family members	 träger der LHS Stuttgart 7. Prof. Dr. med. Friedemann Nauck Past President der Deutschen Gesellschaft für Palliativmedizin; 			
12:15		Brittney Lee A021	Stephanie Johnson A017	Trygve J. Lereim Sævareid A016	Palliativmedizin, Universitätsklinik Göttingen	12:15		
		Does Quality of Facilitator Communication Influ- ence Ratings of Satisfaction with FAmily CEntered (FACE) ACP for Adolescents Living with HIV?	ACP for cancer patients: preliminary results of an Australian RCT	Developing, implementing and evaluating ACP in Norwegian nursing homes (NHs) – a mixed methods study	8. Prof. Dr. jur. Stephan Rixen Sozial- und Gesundheitsrecht Universität Bayreuth			
12:30			Lunch / Exhibition / Posters			12:30		
13:30 -						- 13:30		

Thursday, 10 September 2015 – Afternoon Sessions *** Simultaneous Interpretation / Simultanübersetzung ins Deutsche (Große Aula) ***

Registration 07:30 - 19:00

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5<sup>th</sup> International Conference on
Advance Care Planning and End of Life Care
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30		Plenary 2: ACP mee	ets money – health economic conside	rations Große Aula		13		
			Chair: Barry Snow					
30	13:30							
15	Embedding ACP in a national EOLC-plan: How the NHS calculates the benefits, Claire Henry							
00	The economic impact of ACP on a region	al health care system: What do we know af	ter some 25 years? Bud Hammes			1		
15	Panel Discussion / Q & A					1		
15			Afternoon Tea / Exhibition / Posters			1		
15			Themed Concurrent Sessions 2			1		
	(Regional) Implementation	Facilitation II (Decision aids)	Cultural issues	Principal issues	Primary care/elderly/dementia			
	Chairs: Claire Henry, John Maycroft	Chairs: Linda Briggs, Friedemann Nauck	Chairs: Agnes van der Heide, Leigh Manson	Chairs: Rebecca Sudore, Tanja Krones	Chairs: Jane Seymour, Sabine Pleschberg	er		
15	Ruth Horn Große Aula	Jingfen Lim A021	Aya Seike A017	Katharina Leitner A016	Louise Bramley A	014 ¹		
	Between patient autonomy and physicians' responsibility to save life: The implementation of advance decisions in England, France, and Germany	Effectiveness of an ACP advocates' training programme in improving healthcare professionals' perceptions towards ACP.	Bioethics for Decision Support on End-of-Life Care in Japan.	"Between autonomy and paternalism – self- determination in End of Life Care"	Living with frailty : Implications for the conceptualisation of ACP			
30	Maria Habicher Große Aula	Carla Arkless A021	Anne-Marie Fabri A017	Mathijs van Wijmen A016	Marcus Sellars A	014 ¹		
	Implementing advanced care planning and advan- ce directives in South Tyrol, Italy: A preliminary report	Reflections on becoming a facilitator and a facilitator trainer for the New Zealand 2½ day ACP communication skills courses	What can be learned from hospital interpreters about cultural issues relevant to ACP and end-of- life issues?	Stability of end-of-life treatment preferences of owners of an advance directive over a 4.5-year period	Preferences for end-of-life care and ACP in the event of dementia: a nationwide survey of olde Australians			
5	Javier Judez Große Aula	Catherine Davidson A021	Scott Fraser A017	Settimio Monteverde A016	Yvonne Engels	014 ¹		
	Narrative cases as a tool for reshaping ACP in Spain. "KAYRÓS-Conversaciones que ayudan" web and training experience.	Getting to the heart of it : Understanding interests and working with emotions in ACP	Conversing across the cultural divide – ACP with Culturally and Linguistically Diverse (CALD) patients	Complex or wrong? A taxonomy of addressing ethical issues when implementing advance direc- tives within clinical ethics and ACP training	Training general practitioners in early identifi- cation and early palliative care planning: a ran mized controlled trial	do-		
00	Kim Jameson Große Aula	Kurt Schmidt A021	Tanya Zivkovic A017	Rebecca Sudore A016	Craig Sinclair A	014 ¹		
	Multi-Level Barriers to ACP: Perspectives of Healthcare Providers, Patients and Families	Movie Clips as Facilitators in the Process of ACP	Last rights? Supporting end-of-life care in a culturally diverse society	"I don't want to make my own decisions": decision control preferences among diverse older adults, ACP, and satisfaction with communication	Factors influencing GPs clinical judgements a initiating ACP: An experimental vignette study Australian GPs.	bout		
5	Jackie Kearney Große Aula	Petra Grendarova A021	Fariba Taleghani A017	Carola Seifart A016	Deborah Lawson A	014		
	Have the conversation – implementing a statewide ACP strategy	Advanced Cancer Patients' Perspectives on a Video Decision Support Aid used to Enhance Goals of Care Discussions	Necessity of spiritual care for end-stage cancer patients and their families in Iran: From the analysis of practice in a home-visit organization in Isfahan	Catching the elephant in the room: Patient's preferences for initiation and timing of end of life discussions	ACP education: supporting rural and regional General Practitioners			
0	Jane Goodwin Große Aula	Clare O'Callaghan A021		Hansjakob Fries A016	Kristian Pollock	014		
	Integration of ACP in larger health care structures in Canterbury, New Zealand	"A useful icebreaker" or "jumping the gun": Exa- mining the usefulness of the vignette technique in cancer specific ACP		Talking about death – should it be obligatory?	Patient Responses to ACP in Community Heal Care Settings	lth		
5			Short Break					
0		ACP	EL Biennual General Meeting Große	e Aula		1		
00			Evening at the delegates' free disposal.			1		

Friday, 11 September 2015 – Morning Sessions

Registration 07:30 - 18:30

5th International Conference on Advance Care Planning and End of Life Care

08:30	Plenary 3: Current and future challenges of improving EOLC by means of ACP Große Aula							
			Chairs: Friedemann Nauck, Sabine Pleschberger					
08:30	Good palliative care – still a challenge with an advance care plan in place? Luc Deliens							
09:00	Challenges of intercultural translation of ACP concepts, Agnes van der Heide							
09:30	Challenges of EOLC and following advan	ce care plans in Critical Care Medicine, Jear	n-Louis Vincent			09:30		
10:00		with the frail elderly considering different p				10:00		
10:30			Morning Tea / Exhibition / Posters			10:30		
11:00	Concurrent Panel Sessions 1: Patient-specific challenges of ACP							
	Dementia/Geriatrics	Oncology	Pediatrics	Mental Health	Chronic Organ Failure			
	Chairs: Karen H. Dening, Jane Seymour	Chairs: Judith Rietjens, Michael Hallek (inqu.)	Chairs: Linda Briggs, Monika Führer	Chairs: Claire Hendersen, Katja Kühlmeyer	Chairs: Sara Davison, Ralf Jox			
11:00	Karen Harrison Dening Große Aula	Judith A.C. Rietjens A021	Linda Briggs A017	Johannes Hamann A016	Carmen Houben A014	11:00		
	ACP in dementia: Understanding the preferences of people with dementia and their family carers	ACP in patients with oncologic disease: an introduction	Honoring the hopes of parents with children with life-limiting conditions	Adapting Shared Decision-Making to Severe Mental Illness	ACP in patients with chronic obstructive pulmo- nary disease (COPD)			
11:15	Carla Arkless Große Aula	Ida J. Korfage A021	Julia Lotz A017	Katja Kühlmeyer A016	Carmen Houben A014	11:15		
	Incorporating ACP into the care of residents in a dementia unit	First results from the ACTION study	ACP in children and adolescents with life-limiting illnesses – A needs assessment in parents and health care professionals	Preferences for ACP: A qualitative study with former mental health service users	Stability of willingness to accept life-sustaining treatments of patients with advanced chronic organ failure during one year			
11:30	Scott A. Fraser Große Aula	Jan Schildmann A021	Maureen Lyon A017	Katrin Radenbach A016	Josephine Clayton A014	11:30		
	Not Competent But Not Silent - A Pilot Study of ACP With Dementia Patients	Effects of ACP in patients with cancer - results from a systematic review	The Feasibility, Acceptance and Satisfaction of Adolescents with HIV and their Families with ACP Conversations	Implementing a joint crisis plan into psychiatric practice – first experiences	Current practice and barriers to ACP in the Australian and New Zealand nephrology setting: a national survey			
11:45	Deirdre Fetherstonhaugh Große Aula	Natasha Michael A021	Jenny Hynson A017	Claire Henderson A016	Iñaki Saralegui A014	11:45		
	Making decisions on behalf of people with dementia : how do proxies do it?	Respecting cancer patients' and caregivers' choice to actualise, relinquish or reject advance care planning	Triggers, Tools and "tips for talking" about ACP in paediatrics	Randomised controlled trial of joint crisis plans to reduce compulsory treatment for people with psychosis: clinical outcomes and implementation	What is most important to the patient with End-Stage Renal Disease?			
12:00	Deirdre Shanagher Große Aula	Stephanie Johnson A021	Allison L. Kimmel A017	Michaela Amering A016	Martin Denvir A014	12:00		
	Dying to Talk - Facilitating discussions on future and end-of-life care with people who have dementia.	Conducting an advance care planning randomised trial for incurable cancer patients: an Australian experience	Advance care planning and decisional conflict in adolescents with HIV	Psychiatric Advance Directives as part of a rights-based approach to Recovery	Phase 2 randomised controlled trial of future care planning in patients with advanced heart disease			
12:15	Kevin Brazil Große Aula	Monica Fliedner A021	Jess Jamieson A017		Gian Domenico Borasio A014	12:15		
	The Views of General Practitioners on Advance Care Planning for Patients Living with Dementia	Recruitment of cancer patients into clinical trials on Advance Care Planning in Palliative Care – why is it so hard?	Allow Natural Death / Te Wa Aroha - Advanced Care Planning in Paediatric Palliative Care		ACP in patients with neurodegenerative diseases			
12:30	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers	12:30		
13:00			Lunch / Exhibition / Posters			13:00		
14:00						14:00		

Friday, 11 September 2015 – Afternoon Sessions

Registration 07:30 - 18:30

5th International Conference on Advance Care Planning and End of Life Care

Regions Nursing Homes EXTRA: Legal & Policy Issues Hospital		Nursing Homes EXTRA: Legal & Policy Issues Hospital Primary Care		Primary Care	
	Chairs: Bud Hammes. Daniel Johnson	Chairs: Susan Hickman, Lieve Van den Block	Chairs: Bianka Dörr, Konrad Fassbender	Chairs: Karen Detering, Tanja Krones	Chairs: Joel Rhee, Scott Murray
	Eileen Hanson Große Aula	Susan Hickman A021	Gina Bravo A017	Karen Detering A016	Joel Rhee A014
	Collective Impact ACP: Educating, Empowering, and Inspiring a Region	Systematic Advance Care Planning in the Nursing Home: Preliminary Outcomes from the OPTIMIS- TIC Demonstration Project	Promoting research advance directives in a general elderly population: Effect on completion rate and proxies' predictive ability	Advance care planning in an Australian hospital - more then a decade of experience	The role of primary care in ACP
	Stephanie C. Anderson Große Aula	Mandy Thorn A021	Konrad Fassbender A017	Karen Detering A016	Scott Murray A014
	Lessons from transferring Respecting Choices to other places in the U.S.	Importance of ACP in Caring for Dementia Pa- tients at the End of Life in a single Care Home	Integrating Advance Care Planning into Legal Practice : Development of an ACP Legal Toolkit	End of life care in hospitalized patients: a coordinated approach across multiple teams	Developing a computerised search to help UK Ge- neral Practices identify more patients for advance care planning: a feasibility study
	Leigh Manson Große Aula	Lieve Van den Block A021	Bianka Dörr A017	Tanja Krones A016	Luc Deliens A014
	Northern Region Health Care Plan – New Zealand	Integrating palliative care and advance care plan- ning in nursing homes in Europe : current state of affairs (EU FP7 PACE)	Advance Directives by Surrogate Decision Makers for Incapacitated Patients – Legal Aspects	ACP, a fundamental cultural novelty: lections from the MAPS-Trial	How do general practitioners conceptualise ad- vance care planning in their practice? A qualitative study
	Daniel Johnson Große Aula	Bettina Husebø A021	Tom Hayes A017	Suck Lan Cindy Lau A016	Jill Mann A014
	Introducing an ACP program in Colorado: the Kaiser Permanente experience	The COSMOS study. Improving the quality of life in nursing home patients: an effectiveness-im- plementation randomized clinical hybrid trial (2013-2017)	Legal Factors Militating Against the Uptake of Advance Decisions to Refuse Medical Treatment	Advance Care Planning for Patients Hospitalised for Heart Failure in a Multiethnic South East Asian Cohort	Effective community implementation of Advance Care Planning
	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers	Panel: All above speakers
			Afternoon Tea & Informal Poster Wall to kindly remain near their posters so they can be		
		Poster Walk (in 12 themed groups	s, presentation of up to 10 posters out of a t	hemed cluster, selected by the chair)	
	Poster Group 1 Chair: Lieve van den Block	Poster Group 2 Chair: Josephine Clayton	Poster Group 3 Chair: Karen Detering	Poster Group 4 Chair: Susan Hickman	Poster Group 5 Chair: Carmen Houben
	Poster Group 6 Chair: Karen Harrison Dening	Poster Group 7 Chair: Ida Korfage	Poster Group 8 Chair: Julia Lotz	Poster Group 9 Chair: Natasha Michael	Poster Group 10 Chair: Shona Muir
	Poster Group 11 Chair: Joel Rhee	Poster Group 12 Chair: Judith Rietjens			
			Short Break		
			Hypothetical Große Aula		
		Chair: Peter Saul	; with I Chung, S Davison, T Krones, P Larkin, W S	ilvester, JL Vincent	

22:30

22:30

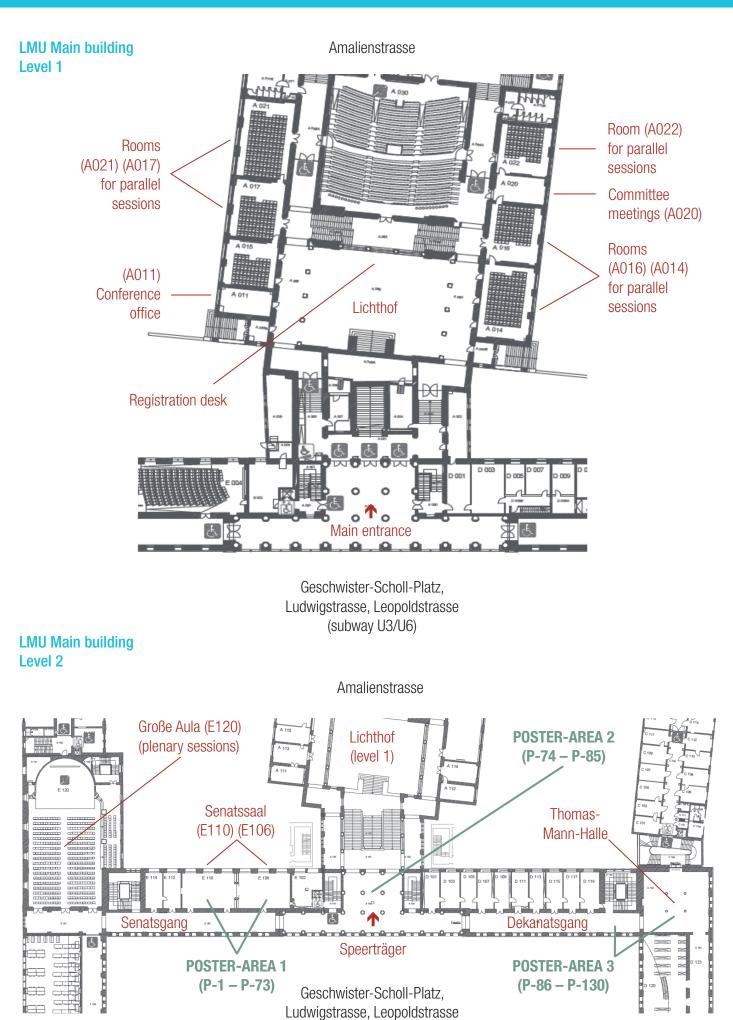
Saturday, 12 September 2015 – Morning Sessions

Registration 08:00 - 14:00

5th International Conference on Advance Care Planning and End of Life Care

08:30	<i>Keynote:</i> ACP – How w	vell do adv	vance care plans reflect pat	ient preferences? Susan Hickman					08:30
09:00					Invited Workshops				09:00
	Charly Corke Große	U U	lill Mann A022 loel Rhee Kirsty Yates	Linda Briggs A021 Bud Hammes	Georg Marckmann A017 Jürgen in der Schmitten	Leigh Manson A016 Shona Muir Rebecca Sudore	Stephanie C. Anderson A015 Sanders F. Burstein	Dan Johnson Patricia Tadel	A014
	Effectively Eliciting Preferer for EOLC	s r tl A	Collaboration between health ervices, ACP program coordi- lators, facilitators, and GPs in he development of a regional ACP program: experiences from Geelong and Sydney	The Role of the ACP Facilitator: The importance of achieving and maintaining competence	Creating optimal forms to document the ACP process: ADs, ADs by proxy, and POLST-equivalents	Engaging consumers in the design of Advance Care Planning services and resources	Discovering the Power of an ACP Conversation	ACP in Palliative Care	
10:30				Mo	rning Tea / Exhibition / Post	ters			10:30
11:00					y, Evaluation and Research				11:00
					Chair: Agnes van der Heide				
11:00	White Paper defining	optimal A(CP, Judith A. C. Rietjens						11:00
11:12	What constitutes ACP	? Approac	hing an operational definiti	on of ACP, Jürgen in der Schmitten					11:12
11:24	Making the Case for A	CP Facilit	ator Certification Standards	, Linda Briggs					11:24
11:36	What maintenance do	es an ACP	program need in order to l	e / remain of continual high qua	lity? Bud Hammes				11:36
11:48	How do we measure s	uccessful	ACP? Rebecca Sudore						11:48
12:00	Panel: Quality Issues	– question	is and suggestions from the	audience, all of the above					12:00
12:30									12:30
12:30	Outlook Große Aula						12:30		
	Chairs: Georg Marckmann, Jürgen in der Schmitten								
12:30	Poster Awards, Sara Da	avison							12:30
12:35	ACP – Setting the age	nda for the	e next two years, Sara Daviso	n, designated Conference Convenor d	of the ACPEL Conference 2017 in Van	couver			12:35
12:50	Farewell and Close, C	onference C	Co-Chairs						12:50
13:00					Snack to Go				13:00
14:00									14:00

14:00



(subway U3/U6)

General Information

Conference venue

Ludwig Maximilian University (LMU) – Main Building Geschwister-Scholl-Platz 1, 80539 Munich

Conference Registration Desk

Wednesday, 09 September 2015	13:00 – 20:30h
Thursday, 10 September 2015	07:30 – 19:00h
Friday, 11 September 2015	07:30 – 18:30h
Saturday, 12 September 2015	08:00 - 14:00h
Friday, 11 September 2015	07:30 – 18:30h

Conference Dinner

Date:	Friday, 11 Sept. 2015 at 19:00
Location:	Künstlerhaus at Lenbachplatz,
	www.kuenstlerhaus-muc.de
Address:	Lenbachplatz 8, 80333 Munich
	(near subway station "Karlsplatz")

Travel: from conference venue walking distance 1.8 km (20 min walking time) or take **U3/U6** southbound to "Odeonsplatz" and **change to U4/U5** to "Karlsplatz"

Internet Access

SSID (Wi-Fi name): mwn-events Benutzername (user name): acpel Password: FrWAU.s1

Certificate of Attendance

Participants will receive a Certificate of Attendance before departure.

CME credits

CME points will be accredited by the Bavarian Medical Council.

Travel information

From Main Railway Station (Hauptbahnhof) to LMU:

U4 (direction "Arabellapark") **or U5** (direction "Neuperlach Süd") to "Odeonsplatz" **then U6** (direction "Garching") **or U3** (direction "Moosach") exit "**Universität**"; **or** take **any S-Bahn** train until "Marienplatz", **then** take **U3 or U6** as described above.

Ticket: single fare (\in 2.70) or 2 stripes on the blue stripe card (10 stripes, \in 13.00).

From Airport to LMU:

S8 (direction "Ostbahnhof") until Marienplatz **then U6** (direction "Garching") **or U3** (direction "Moosach") exit "**Universität**". **Ticket:** single fare for 4 zones (\in 10.80) or 8 stripes on the blue stripe card. Travel time about 45-60 minutes.

Taxis/Cabs

Taxi eG: +49 (0)89-21610 or +49 (0)89-19 410; Isar Funk: +49 (0)89-450 540

Subway Planner (U-Bahn and S-Bahn)

Journey planner for public transport in Munich: http://efa.mvv-muenchen.de/index.html#trip@enquiry

Climate and Dress Code

In September the average temperature in Munich is approx. 20°C with an overnight low of approx. 10°C. The dress code will be informal throughout the conference.

Telephone

The international access code for Germany is +49. Local emergency telephone numbers are 110 for Police and 112 for Fire and Ambulance.

More informationen

ATM machine:	Subway station "Universität",
	mid-level (Northern exit)
Copy shops:	Copy-Oase München (Amalienstraße 59),
	Digital Druck Zentrum (Amalienstraße 75)
Postal office:	Amalienstraße 2

Disclaimer

The organisers cannot accept liability for injuries or losses of any nature incurred by participants, nor for loss of or damage to their luggage and/or personal belongings.

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"Advance Care Planning" (ACP, gesundheitliche Vorausplanung) zielt auf eine zuverlässig am vorausverfügten Patientenwillen orientierte Behandlung für den Fall, dass der Betroffene sich nicht mehr selbst äußern kann. Realisiert wird diese grundlegend neue Herangehensweise durch die Etablierung eines professionell begleiteten Kommunikationsprozesses und einen diesbezüglichen Wandel im Gesundheitssystem. Ausgehend von einer Analyse der Defizite des bisherigen Umgangs mit Patientenverfügungen erörtert eine inter-

nationale Autorengruppe die Grundlagen von ACP, wissenschaftlich evaluierte ACP-Projekte sowie politische und ethische Herausforderungen.

Die Herausgeber

Dr. theol. Michael Coors, Zentrum für Gesundheitsethik (ZfG), Hannover.

PD Dr. Ralf Jox, Institut für Ethik, Geschichte und Theorie der Medizin, LMU München.

Prof. Dr. Jürgen in der Schmitten, MPH, Institut für Allgemeinmedizin des Universitätsklinikums Düsseldorf.

Inhaltsübersicht

- 1 Einführung
- 2 Defizite bisheriger Vorausverfügungen
- 3 Theoretische Grundlagen von Advance Care Planning
- 4 Advance Care Planning in der internationalen Praxis
- 5 Advance Care Planning in speziellen Kontexten
- 6 Advance Care Planning: Perspektiven für Wissenschaft, klinische Praxis und Gesundheitspolitik

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