

# SIC and Advance Care Planning – Similarities and differences and how they complement each other

**Dr Joshua Lakin, MD**

**11 November 2024, Monday**

**1400 – 1500**

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**Dana-Farber Cancer Institute and Brigham and Women's Hospital**  
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Assistant Professor of Medicine, **Harvard Medical School**



Dr. Lakin works as an attending Palliative Care Physician at the Dana-Farber Cancer Institute and the Brigham and Women's Hospital in Boston, Massachusetts. He also serves as the director for the KidneyPal palliative care service dedicated to patients with advanced kidney disease. He is the clinical lead for the Serious Illness Care Program (Ariadne Lab) at Brigham & Women's Hospital and he currently teaches at the Harvard Medical School Center for Palliative Care.

In terms of research pursuits, Dr. Lakin is interested in working to build scalable and measurable models for delivering palliative care, especially high-quality serious illness communication. He spends his time primarily at the intersection of clinical palliative care and systems work in the Population Health Management realm. He has been leading a program aimed at improving serious illness communication in the high-risk primary care population at Brigham and Women's Hospital. Dr. Lakin is now working to make this program a sustainable part of ongoing work for the primary care, specialist, and hospital-based teams throughout Partners Healthcare in his role as Palliative Care Consultant to the Population Health Management group.

## **Serious Illness Conversations and Advance Care Planning: Similarities, Differences, and Synergies**

There has been significant growth in health system and governmental efforts to drive Advance Care Planning and Serious Illness Conversations. Concurrently, the definition, use, and application of each has evolved and has become confusing and, at times, controversial.

In this talk, we will examine each communication intervention, consider their similarities and differences, and think together about ways to leverage each for optimal communication and planning for those we serve.

# Serious Illness Conversations and Advance Care Planning

Similarities, Differences, and Synergies

November 11<sup>th</sup>, 2024

Joshua Lakin, MD



**Dana-Farber**  
Cancer Institute



**Brigham Cancer Center**

# THANK YOU!



**I have no conflicts of interest to disclose**

# Objectives for Today

- Define Advance Care Planning (ACP) and Serious Illness Conversations (SICs)
- Detail Similarities and Differences Between Different Communication Interventions
- Strategize About Leveraging Synergies in SIC and ACP



# Let's Start with Some Definitions



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# Getting to know you a bit



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# ADVANCE DIRECTIVES

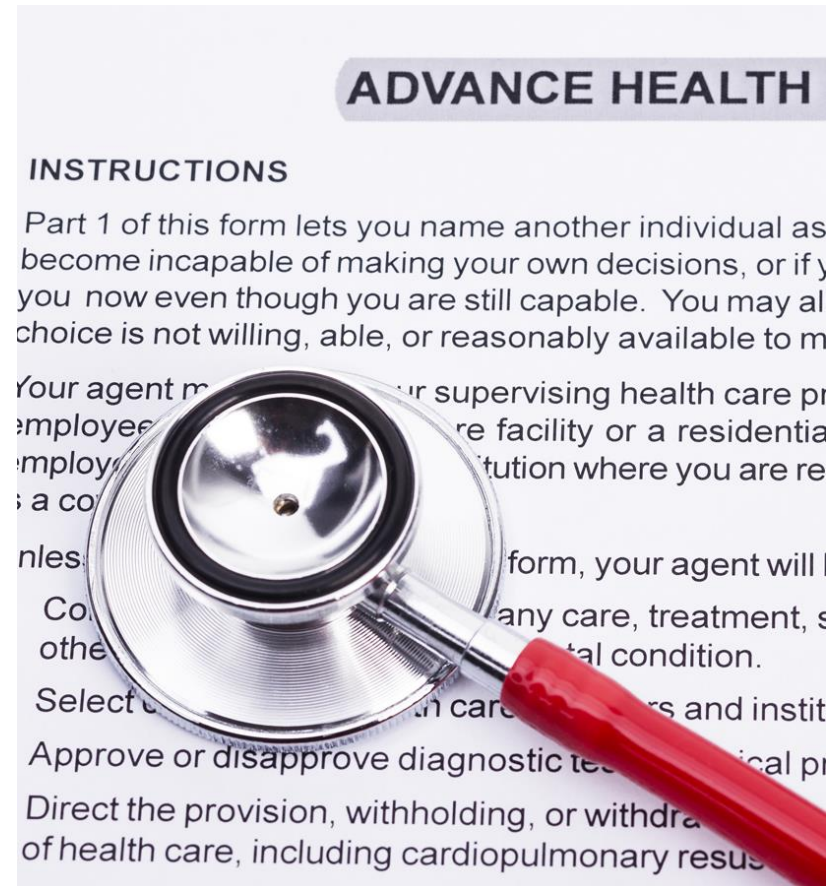
Legal documents

State a person's medical wishes should they become incapacitated

May name a proxy decision maker

I.e. Living Will, DPOAHC, DNR orders

Laws vary by country and region



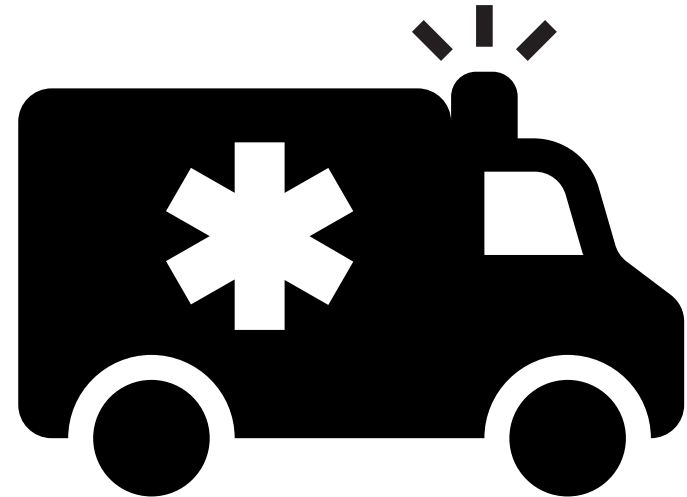
National Cancer Institute, NCI Dictionary  
<https://www.cancer.gov/publications/dictionaries/cancer-terms/def/advance-directive>

# ADVANCE CARE PLANNING

Process of planning for future medical care should someone be not able to make their own choices.

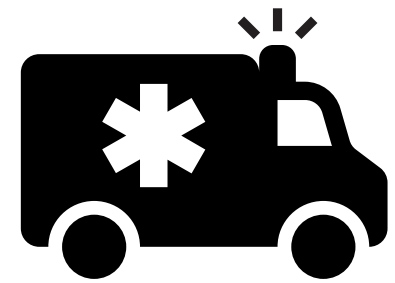
## Steps:

- Introduce the topic
- Structure discussions to cover scenarios
- Identify and document preferences about health and medical treatment
- Review and update
- Apply wishes PRN



*Emanuel LL, von Gunten CF, Ferris FD.  
Advance care planning. Arch Fam Med.  
2000 Nov-Dec;9(10):1181-7.*

# Advance Care Planning Updated



"Advance care planning 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. The goal of advance care planning is to help ensure that people receive medical care that is consistent with their values, goals and preferences during serious and chronic illness."

Sudore RL et al. Defining Advance Care Planning for Adults: A Consensus Definition From a Multidisciplinary Delphi Panel. J Pain Symptom Manage. 2017 May;53(5):821-832.



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# Serious Illness Conversations

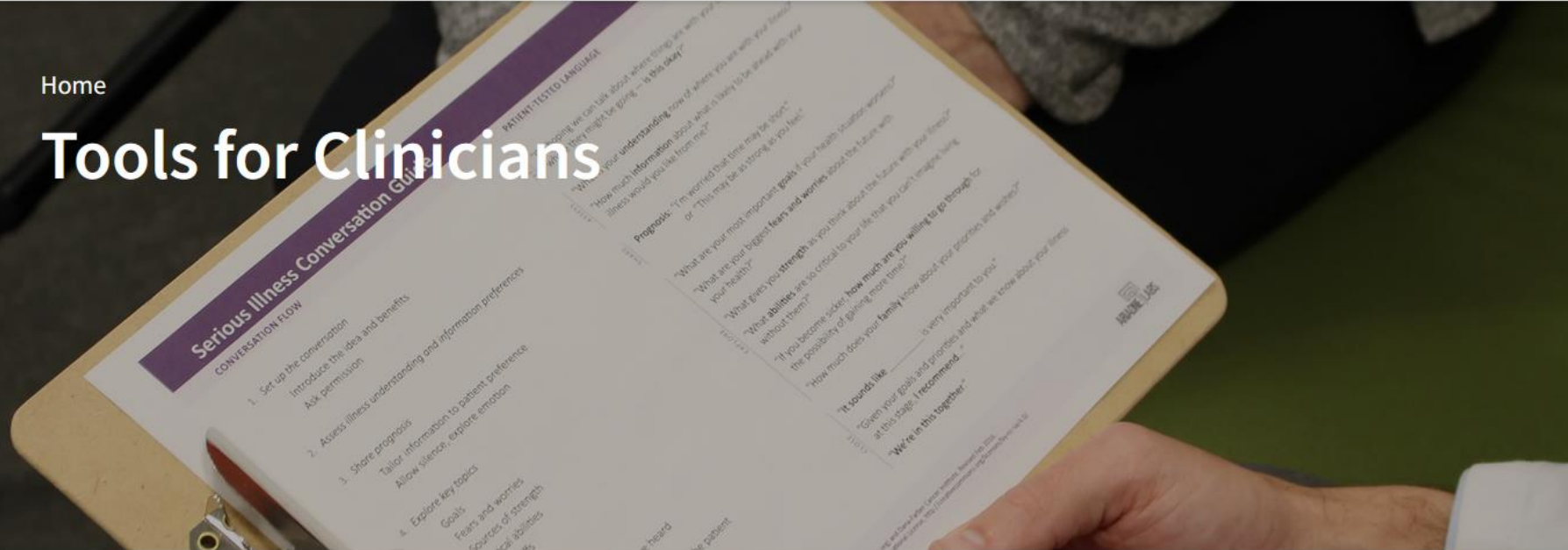
Iterative discussions between seriously ill patients and their clinicians about prognosis, values, goals, worries, sources of strength, and care-partner involvement to best guide living with serious illnesses.



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## Tools for Clinicians



Jacobsen J, Bernacki R, Paladino J. JAMA. 2022  
Bernacki RE, Block SD. JAMA Intern Med. 2014



# Some other terms often included/ confused in this space

- Late goals of care conversation
- End of life conversation
- Hospice conversation
- Code status conversation
- Palliative care





# How do ACP and SIC compare?

# Talk to your neighbor for a moment





# How are they similar?

**They are grounded on centering goals and values**

**They are iterative**

**They are centered on preparing people for decision making in the future**

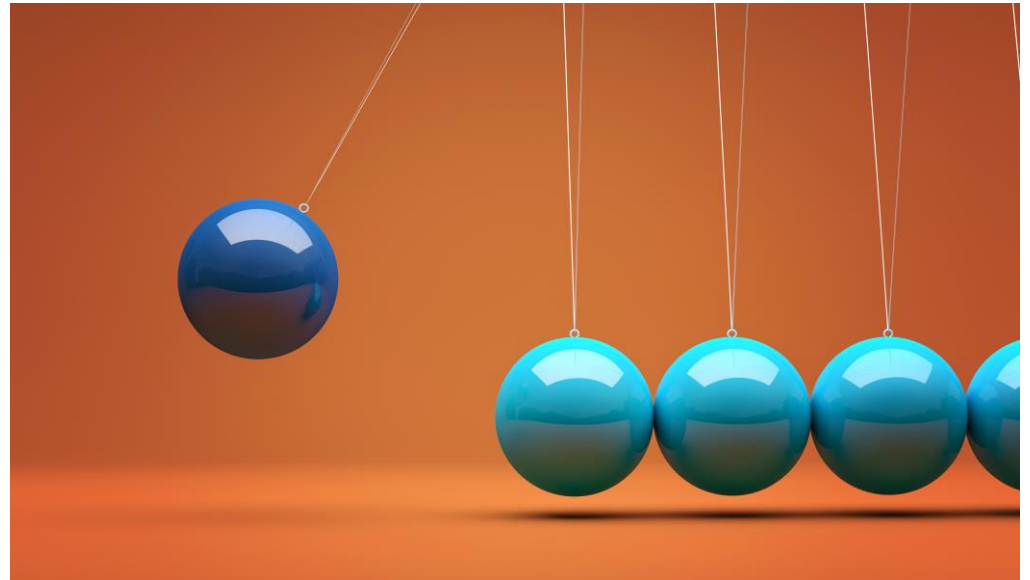
**They both involve preparing care networks**

**They involve discussion around emotionally charged topics**



# How do they differ?

- For whom?
- When and with whom?
- What is the goal?
- Output?



# Questions before we move on?





# Finding Synergy



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# What works with ACP and SIC?

Research

JAMA Internal Medicine | [Original Investigation](#)

## Effect of the Serious Illness Care Program in Outpatient Oncology A Cluster Randomized Clinical Trial

Rebecca Banzoff, MD, MS, Joanne Paladino, MD, Deidra A. Neville, MPH, Mathilde Huchings, MPH, Jane Kavanagh, BA, Olaf P. Geerse, BSc, Swande, MD, MPH; Susan D. Block, MD

**RESEARCH**

BMJ

### The impact of advance care planning on end of life care in elderly patients: randomised controlled trial

Karen M Detering, respiratory physician and clinical leader,<sup>1</sup> Andrew D Hancock, project officer,<sup>1</sup> Michael C Reade, physician,<sup>2</sup> William Silvester, intensive care physician and director<sup>1</sup>



Contents lists available at [ScienceDirect](#)

Healthcare

journal homepage: [www.elsevier.com/locate/healthcare](http://www.elsevier.com/locate/healthcare)



### A systematic intervention to improve serious illness communication in primary care: Effect on expenses at the end of life

Joshua R. Lakin<sup>a,b,c,d,\*</sup>, Brandon J. Neal<sup>a</sup>, Francine L. Maloney<sup>a</sup>, Joanna Paladino<sup>a,c</sup>, Christine Vogeli<sup>c,e,f</sup>, Joey Tumblin<sup>e</sup>, Maryann Vienneau<sup>e</sup>, Erik Fromme<sup>a,b,c</sup>, Rebecca Cunningham<sup>c,d</sup>, Susan D. Block<sup>b,c,d,g</sup>, Rachelle E. Bernacki<sup>a,b,c,d</sup>



# What happens when they don't work?

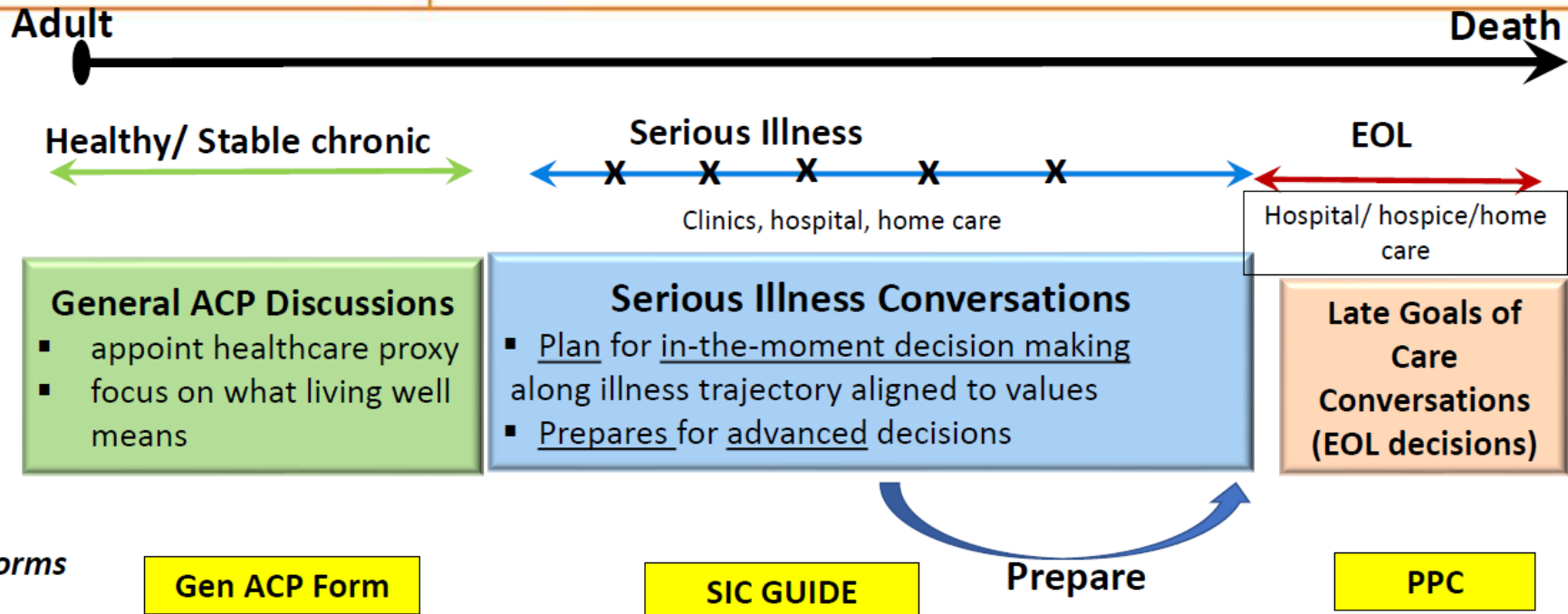


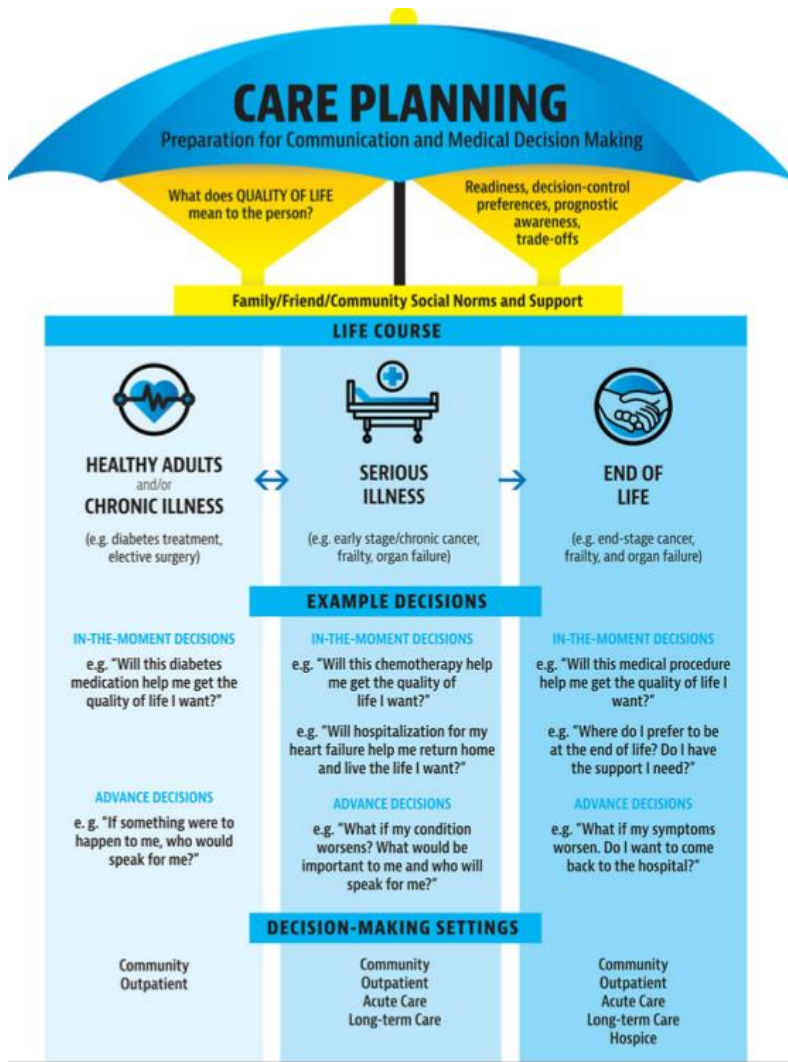
# Synergizing to get optimal impact

- **Succeeding with both is about staying true to:**
  - Intention and spirit – prognosis informed goal directed preparation of everyone at the right time
  - Applying each when and where are most likely to succeed! Along with the other tools in the communication and palliative care tool kit



## SIC in the continuum of ACP





## Summary

Consider ACP and SIC as part of a wholistic, longitudinal process aimed at preparation

Both in the present moment and preparing for the future

Success requires systems thinking, research, and interventions across the timeline that work together

Hickman et al. JAGS. 2023.



# THANK YOU!



# QUESTIONS?

