

## **Kōkua Mau's *Let's Talk Story* Program: Year 2 Phenomenal Increase in Outreach**

Analysis of an innovative and unique ambassador program

### **Overview—Community outreach continues to grow**

In the second year of employing an Advance Care Planning Coordinator, there has been a phenomenal increase in outreach to the community and professionals. In 2018, the increase in interest throughout the community in places where people “live, work, and pray” suggests that people in the community are recognizing the importance of meaningful conversations and Advance Health Care Directives. (See Nu‘uanu Congregational Vignette)

### **INCREASED REQUESTS FOR COMMUNITY PRESENTATIONS**

In 2017 an unprecedented number of presentations were done in the community; 28 groups requested presentations, and 44 presentations reached upwards of 656 people. In 2018, interest continues to grow, as 38 groups requested presentations and 52 presentations reached upwards of 827 people.

### **Overview—Professional Development doubles in training requests**

The increase of requests for Professional Development reflects the changes in measures that professionals are now expected to meet, and the desire for organizations to do Advance Care Planning (ACP) well for their clients or members. Providers are recognizing the importance of these conversations and documents; both POLST (Providers Orders for Life Sustaining Treatment) and Advance Health Care Directives (AHCD) and how these documents can support health care wishes. Kōkua Mau recognizes the challenges professionals may face and supports professionals with training, practice scenarios, using tools such as The Conversation Starter Kit and Go Wish Cards. Professionals who attend the Kōkua Mau trainings are given the opportunity to use these tools to consider their own wishes, and encouraged to complete their own Advance Health Care Directive prior to approaching their members to complete an AHCD. While some who attended the Professional Development trainings were very comfortable with the subject matter, there were some Social Workers, Medical Assistants, and Community Health Workers who were still uncomfortable with the subject matter, but almost all who attended the trainings found the information useful.

### **INCREASED REQUESTS FOR PROFESSIONAL DEVELOPMENT**

In 2017, 17 groups requested trainings, and 18 training sessions reached 446 health care professionals. In 2018, requests for Professional Development training nearly doubled, as 28 organizations requested training sessions and 36 training sessions reached upwards of 953 professionals.

### **Overview—Workplace Wellness pilot program; ready for implementation**

In 2018, Kōkua Mau created a Workplace Wellness program encouraging employers to incorporate Advance Care Planning into employee wellness programs. A Workplace Wellness program addressing ACP will greatly benefit employees and their loved ones by engaging in meaningful conversations about what matters most, and providing the opportunity to complete an AHCD to ensure their wishes are honored. Two main pilots in 2018 were established with United Health Alliance (UHA) and the state of Hawaii Employer Union Trust Fund (EUTF). UHA provided wellness training for employees and invited Kōkua Mau to provide wellness training

with key leadership, executives, and offered wellness workshops to interested employees, which was filled to capacity with 20 interested employees.

UHA also incentivized Advance Care Planning for employees, by offering a cash incentive for employees who complete their requirements.

EUTF offered the training to upper management within their offices, and then offered table space at health fairs for their employees reaching upwards of 1000 state and county members. A highly successful EUTF health fair was held at the Office of Hawaiian Affairs for 150 employees, and 11 AHCD were completed and notarized in a four-hour window by the ACP Coordinator.

### **Advance Care Planning Coordinator 2018 goals far exceeded expectations**

In late 2017, a goal was set for 2018; to provide one (1) presentation or “touch” per week for either the community or in a professional setting. The Let’s Talk Story program provided 94 presentations to community groups, professional development trainings, and Workplace Wellness; far exceeding the initial goal. Additional “touches” include Health Fairs, University Health Fairs, and public venues. These soft “touch” events introduced attendees to Advance Care Planning in 14 events, potentially reaching 20,000+ community members in various settings.

### **Increase in Completed AHCD with the addition of free notary services**

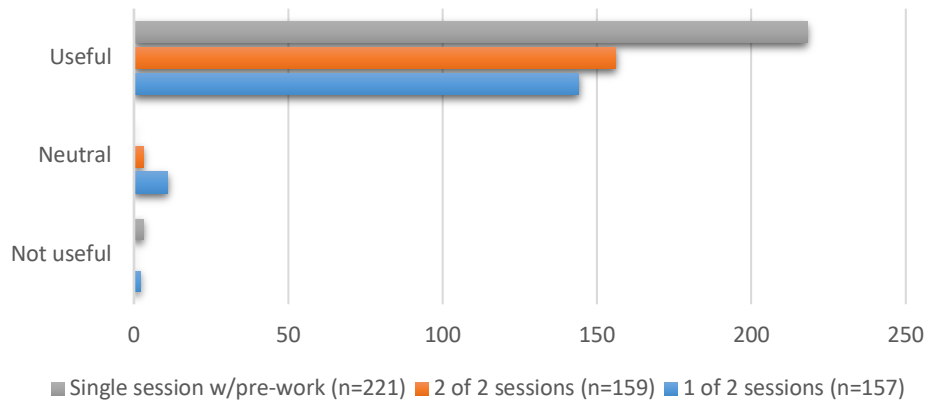
In August, the Advance Care Planning Coordinator, Executive Director, and an Ambassador of the Let’s Talk Story Program obtained the ability to notarize documents, including the AHCD. At the end of 2018, 67 AHCD were notarized at Kōkua Mau presentations and/or Health Fairs. When promoting the Let’s Talk Story presentations, Kōkua Mau is now proud to offer free notary services for anyone completing their AHCD. This additional free service has garnered interest by attendees, and in many cases, participants come to the presentation with the intention of completing and notarizing their documents.

### **Presentation audiences find information useful**

Audience members find the information useful, and engage in exercises during the presentation. Through the exercises 1) “turn to your neighbor and talk about a good or a hard death” 2) completing the 9 question Conversation Starter Kit and 3) using Go-Wish cards when able. These activities allow audience members to consider “what matters to me?” Contemplating one’s mortality can be scary, but once the focus shifts to “how do you want to live, up until you die?” changes the importance of these meaningful conversations. There is a growing understanding that these conversations should be had prior to times of crisis, and audience members recognize the importance.

**Audiences of single and two part sessions agree the presentation was useful**

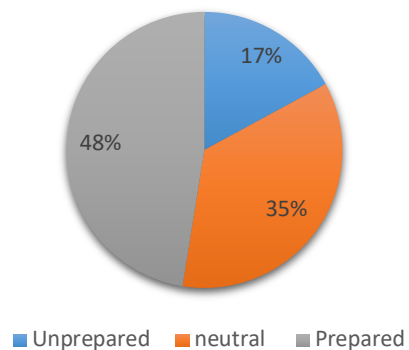
**Did you find the information presented today was useful?**



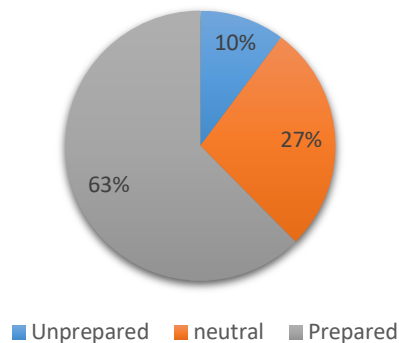
**Two-step process is still widely successful and is still the preferred approach**

Kōkua Mau continues to suggest the two-step process for the Let’s Talk Story presentations. When it is not feasible to schedule two separate sessions, Kōkua Mau requests a minimum of two hours for the all-in-one presentation, so participants are not rushed and can be allotted ample time to complete their AHCD. While the all-in-one session might respect their time constraints, it is important to point out that participants who did not do any pre-work might not be confident in designating a Health Care Agent. Because this key element is missing, they may not finish their documents with confidence in the workshop, since they prefer to have the conversation before appointing their Health Care Agent. This suggests they are somewhat prepared to have the conversation, but more importantly, reiterates the significance and importance of first and foremost having the conversation with their loved ones. Qualitative data shows that audience members gained confidence and improved preparedness to have these conversations after two sessions:

**First of two sessions: How prepared do you feel to have the conversation?  
(n=158)**



**Second of Two Sessions: How prepared do you feel to have the conversation (n=157)**

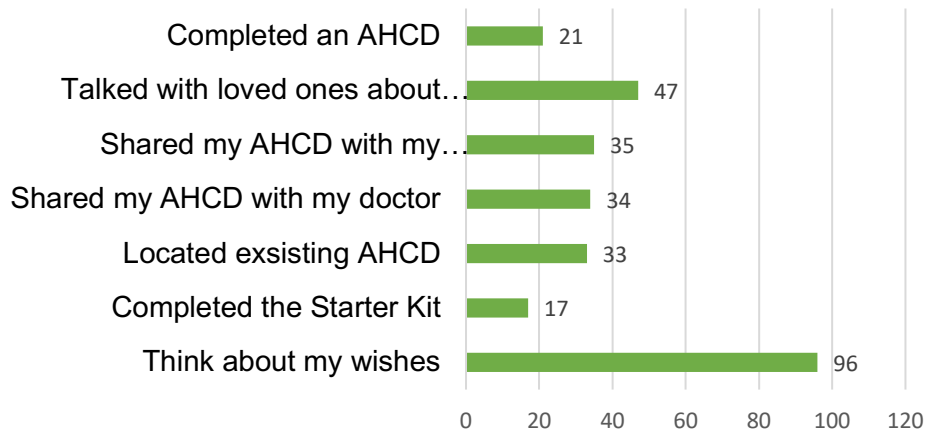


**Confidence levels are increased when participants attended two sessions.**

Participants are given an opportunity to digest the information on having meaningful conversations presented during the first presentation, and then are given information on Advance Health Care Directives and POLST during the second session. The additional “touch” improves confidence levels, and also gives us the opportunity to learn what action was taken in between sessions.

With the two-step approach, we are able to measure action taken between the first and second sessions. Attendees self-report their actions taken:

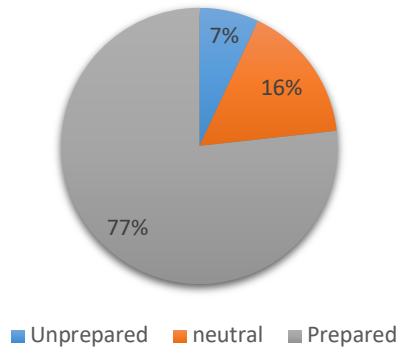
After the Last Session with Kōkua Mau : (check all that apply)



**Immensely Successful single sessions included pre-work**

Audience members participating in the single sessions that were immensely successful were prepared for the presentation. Rather than presenting during an already occurring meeting where Kōkua Mau was invited to present an educational session on Advance Care Planning, the single sessions that were immensely successful were deliberately organized with the intention to educate the audience on Advance Care Planning. The audience was prepared for the subject matter, and directed to start thinking about their wishes prior to the presentation. In faith communities, the pastor or minister would lay the ground work by including teachings about the importance in contemplating mortality, and how having these conversations can help members to support each other during times of serious illness, rather than wait for a crisis to begin conversations about what matters most. Kōkua Mau adopted this model from The Conversation Project and is the recommended approach for faith communities requesting either a single or two-part presentation. By building upon teachings from their scriptures and then inviting congregants to continue the conversation and learn more about Advance Care Planning after the service, audience members were inclined to complete their AHCD and felt prepared to start conversations with their loved ones.

**Single session: How prepared do you feel to have the conversation? (n=215)**

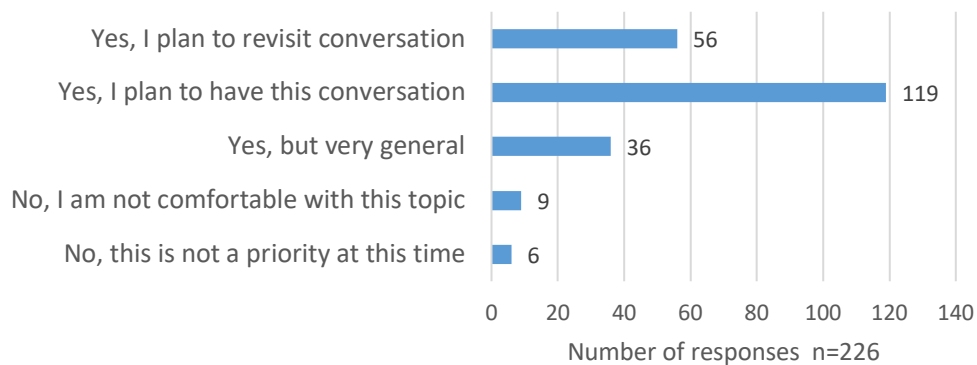


**Single sessions *with Pre-work* are as successful as the two-step approach**

In 2018, the majority of the single sessions presented were in faith communities. Kōkua Mau referred faith communities to The Conversation Project in preparation for the specially convened sessions with congregants. Pre-work also improved confidence levels for having the conversation.

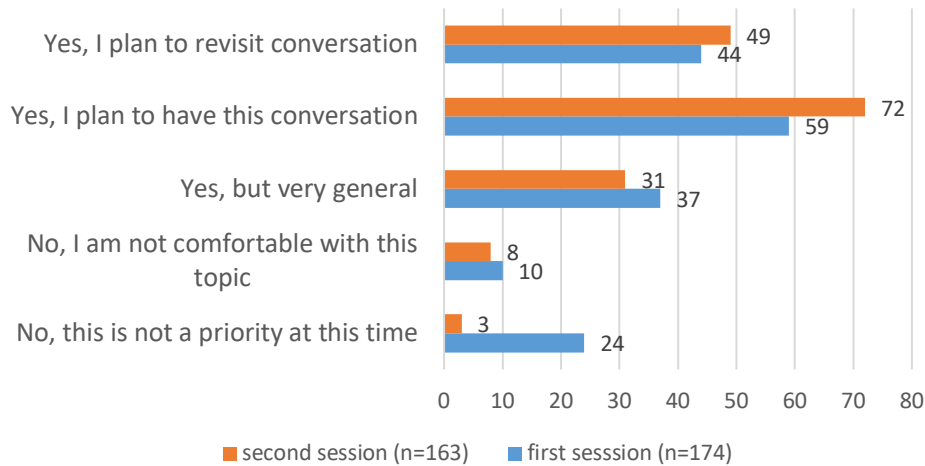
After today: I plan to have a conversation with my loved ones within the next month

**Single session w/pre-work**



After today: I plan to have the conversation with loved ones within a month.

**First v. Second presentation**



**Similar outcomes for Single sessions with pre-work and two-step session**

Kōkua Mau can confidently recommend two approaches for successful outcomes in community presentations. The first recommendation for presentations with no pre-work would be the two-step approach. Attendees are given the opportunity to further contemplate their wishes after the first session, and learn about supporting documents at the second session; two “touches”. The second recommendation is for a longer, 2-hour presentation where there has been pre-work done. Recommended pre-work options include; faith leaders introducing the importance of Advance Care Planning from a spiritual stand-point in the weeks leading to the presentation, completing The Conversation Starter Kit prior to the presentation, and any activity that would segue well into Advance Care Planning.

## **Kōkua Mau's *Let's Talk Story* Program: 2017**

Analysis of an innovative and unique ambassador program

### **The Challenge:**

Many are not comfortable initiating conversations about care for loved ones or themselves should there be a diagnosis with serious illness. As a result, those important conversations are avoided with no clear resolution. It usually takes a health crisis to bring these issues to the forefront, but this creates tremendous undue stress on families. At a time when the focus should be on providing the best quality of life for those with a serious illness, attention is often diverted to resolving personal differences that can often splinter families.

### **The Solution:**

Kōkua Mau believes that advance care planning conversations should occur as early as possible, so there can be clarity about our wishes and values as well as those of our loved ones. These wishes must be documented and communicated to family members and healthcare providers to minimize the collateral effects of an illness on a family and bring greater peace of mind for everyone involved.

Initiating conversations about advance care planning is a challenge for a number reasons. There are cultural barriers and attitudinal differences about illness and death. Kōkua Mau's *Let's Talk Story* was originally launched as a Speakers Bureau and has evolved into a more substantive ambassador program designed to break down those barriers.

### **Implementation:**

With the support of about 15 highly qualified volunteer representatives, Kōkua Mau has been able educate the public and professionals about advance care planning. Going to where "People Live, Work, and Pray," our *Let's Talk Story* program's goal is to start the conversation in familiar settings, breaking the ice to get people to start talking about uncomfortable but important topics. These conversations encourage and empower people to take action on their own health care wishes.

The sessions are designed to be a catalyst for action by boldly raising the big taboo questions:

**If the unexpected happens, who will speak for you?**

**If you were facing serious illness, do your loved ones know your wishes?**

In the second year of employing an Advance Care Planning Coordinator, requests by community organizations have continued to find value in sharing this discussion with their members and encouraging them to have the conversation and complete their Advance Directives. The number of requests from community organizations have



## **FIRST SESSION**

The first session uses the principles and content of The Conversation Project's Starter Kit, an interactive tool to help people determine what matters most to them and how to have conversations about their end-of-life wishes with others. The attendees are encouraged to complete the Starter Kit and to bring their own completed advance health care directive as "homework" to the second session.

## **SECOND SESSION**

The second session focuses on education and awareness of Advance Healthcare Directives (AHCD), POLST (Providers Orders for Life Sustaining Treatment), and the importance of sharing the information with loved ones, caregivers, and providers to ensure that one's wishes for care and treatment are known, honored and respected.

### **Evaluation:**

We have three parts to our evaluation strategy:

1. **Quantitative.** Metrics that include the number of attendees and number of sessions
2. **Qualitative.** Anecdotal indications of the readiness to have the conversation, and feedback showing increased preparedness and usefulness of the information
3. **Action Taken.** This focuses on actions taken between sessions 1 and 2, an added layer of information that began in 2017
  - a. Completed Advance Healthcare Directive
  - b. Revised Advance Healthcare Directive
  - c. Located Advance Healthcare Directive
  - d. Discussed and shared Advance Healthcare Directive with loved ones
  - e. Discussed and shared Advance Healthcare Directive with health providers
  - f. Attended second scheduled Kōkua Mau session

At the end of the **first session**, our speakers ask the attendees to complete a short survey:

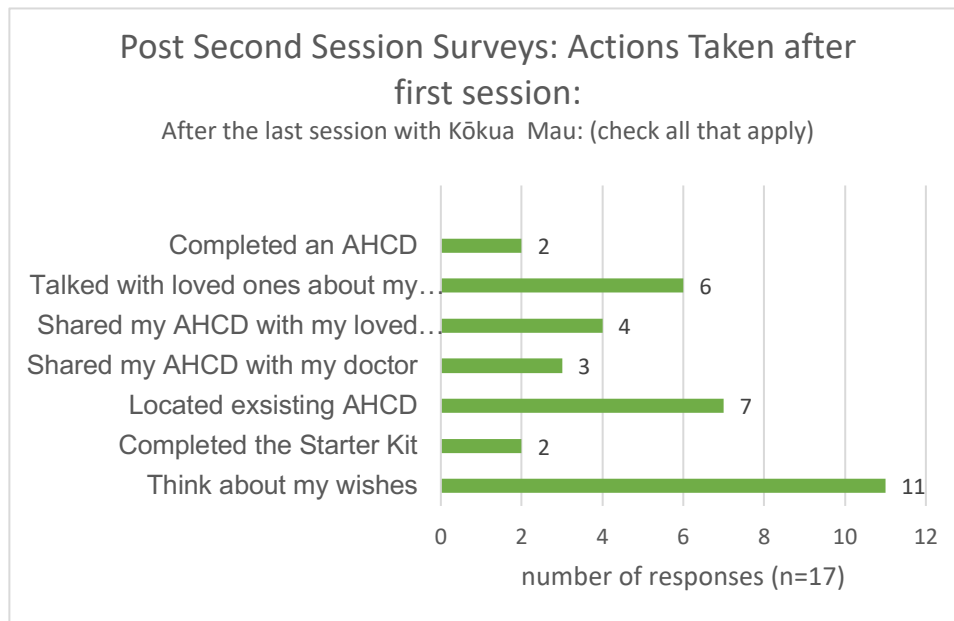
- Prior to today's session, had you talked to your loved ones about your wishes for care?
- Do you plan to have the conversation within the next month?
- If you plan to have the conversation, do you feel prepared?
- Was the information presented useful?
- Any topics expected, but not included in the presentation?

At the end of the **second session**, attendees are asked to complete a second survey to measure effectiveness of the two-session approach:

- Was any action taken between the first and second session (9 options available);
- Do you plan to have the conversation within the next month?
- If you plan to have the conversation, do you feel prepared?
- Was the information presented useful?
- Do you have an AHCD?
- Any topics expected but not included in the presentation?

## Let's Talk Story at Nuuanu Congregational Church

Nu'uano Congregational Church invited Kōkua Mau's *Let's Talk Story* to do two sessions after their Sunday Services. After the first session, people took action. The audience was engaged and for the second session, audience members brought family members to the presentation whom they thought would benefit from the information on Advance Care Planning. A member who attended the first session insisted that her single, adult son attend the second session, because of his active lifestyle. Both mother and son completed their Advance Directives and had it notarized at the end of the second session. There were nearly 40 people at the second session, and of the 17 surveys collected, people took action:



Pastor Neal MacPherson's sermon was on the importance of planning for ourselves and our loved ones, and he shared a story of one of his recently passed parishioners. She had been so well prepared that when she was diagnosed with dementia, her family had known her wishes and were able to support her throughout her life. She also planned her burial, funeral services, and even included her favorite verses and hymns for the service. Her family treasured the gift she had given them through Advance Care Planning and having meaningful conversations.

Faith Communities are excellent partners in our Movement to Improve Care. In 2018, Kōkua Mau partnered with 13 various faith communities reaching 321 individuals in 18 different presentations across the state. In 2017, Kōkua Mau worked with 3 faith communities and provided 7 presentations. The drastic increase in requests from faith communities has been exponential and emphasizes the need in the community for resources, education and awareness on the value of Advance Care Planning and having meaningful conversations with loved ones.