Enhancing Advance Care Planning in Primary Care Using Project 5 Wishes

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Executive Summary

What We Know About Advance Care Planning

- Advance care planning (ACP) is essential for patient-centered care, especially for aging populations.
- ACP allows individuals to express personal, emotional, medical, and spiritual preferences while making informed decisions.

Barriers to ACP

- Despite these recognized benefits, ACP remains underutilized in primary care settings due to several barriers, including limited appointment time, provider discomfort with end-of-life discussions, and the absence of standardized protocols to guide conversations. Only 18-34% of individuals have documented their end-of-life care preferences (Kirkpatrick et al., 2024).

Intervention "Project 5 Wishes"

- A quality improvement initiative was launched to address these barriers by integrating the Project 5 Wishes tool into Medicare Annual Wellness Visits.
- The 5 Wishes document was chosen for its clarity, holistic approach, and alignment with patient values.
- During their wellness visits, patients aged 65 and older received educational materials and the 5 Wishes document over a 12-week period.

Goals

- The project aimed to increase patient engagement and provider confidence in ACP discussions.

Background and Purpose

Advance care planning enables individuals to make informed decisions about their future healthcare, promoting dignity, autonomy, and improved alignment of care with patient preferences. The Centers for Medicare & Medicaid Services (2023), endorse and reimburse ACP discussions during Medicare Annual Wellness Visits, yet adoption remains inconsistent across primary care practices. This initiative addressed those inconsistencies by embedding ACP discussions into routine clinical encounters using the 5 Wishes framework.

The overarching objective was to promote meaningful conversations between patients and providers and empower patients to take proactive roles in their healthcare planning. By providing clear and compassionate tools, the project sought to reduce barriers and create a sustainable model for ACP integration in primary care. Primary care settings, where healthcare providers serve as the initial point of contact, build strong rapport, and ensure continuity of care, provide an ideal environment for initiating and fostering ACP discussions (Kirkpatrick et al., 2024; Sherry et al., 2022; Simmons-Fields et al., 2020).

Methodology

The project employed the Plan-Do-Study-Act (PDSA) bi-weekly cycle to design, implement, and evaluate the intervention. A cohort of Medicare beneficiaries aged 65 and older was selected based on their scheduled Medicare Annual Wellness Visits. At check-in, patients

were given a welcome packet that included a brief description of the project, a readiness ruler to assess their willingness to engage in ACP, and an outline of the next steps.

Once in the exam room, patients received the 5 Wishes educational brochure and planning document. Providers were encouraged to initiate a brief but meaningful conversation during the visit, highlighting the importance of ACP and inviting patients to review the materials at home. Follow-up telephone calls were conducted to answer questions, clarify information, and encourage patients to complete and share the document with family members.

Data were collected through both quantitative and qualitative methods. Descriptive statistics were used to assess the distribution, uptake, and completion rates of the 5 Wishes document. Thematic analysis of follow-up call notes and provider feedback surveys provided insight into patient understanding, emotional responses, and the perceived usefulness of the tool.

Findings and Results

The project yielded significant findings that support the feasibility and value of integrating the 5 Wishes program into primary care. Among the 85 participating patients, 28% reported completing the document and discussing their wishes with loved ones. An additional 44% expressed increased awareness and intent to complete the document, although they had not done so within the project timeframe.

Providers noted increased comfort and confidence when initiating ACP discussions, citing the 5 Wishes tool as an accessible and structured guide. Integrating the tool into the visit workflow was seamless, requiring minimal additional time while providing a meaningful enhancement to patient care.

A unique challenge emerged during implementation: the public placement of brochures in exam rooms resulted in unintended uptake by younger, non-targeted patients. While this indicated widespread interest in ACP materials, it also led to rapid depletion of printed supplies, revealing the need for more strategic supply management. A QR code was developed and shared with the general population of patients.

Despite the project's short duration, the results were positive. The tool was well received by patients and providers alike and compatible with the fast-paced primary care practice environment.

Strengths and Limitations

Several strengths supported the success of this initiative. The 5 Wishes document, already validated and widely recognized, was easily integrated into the clinical workflow. Its user-friendly language and comprehensive approach appealed to patients with diverse health literacy levels. Provider engagement and positive feedback indicated strong potential for sustainability and future expansion of the program.

Limitations included the short time frame, which restricted long-term evaluation of patient outcomes and completion rates. Additionally, materials in plain view contributed to misdirected distribution, emphasizing the need for more intentional placement strategies. The project was also conducted within a single clinic, which may limit generalizability across broader settings.

Implications for Practice

The successful implementation of the Project 5 Wishes model highlights the potential of structured, patient-centered tools in facilitating meaningful ACP discussions in primary care. By normalizing these conversations and embedding them into existing workflows, practices can better align medical care with patient preferences, reduce unnecessary interventions at the end of life, and support informed decision-making.

This model could be adapted and scaled to various clinical settings, including specialty care and community health, and serves as a replicable framework for improving ACP engagement. Further research is warranted to assess long-term outcomes and to explore strategies for improving material distribution and patient follow-through.

Conclusion

In summary, this quality improvement project demonstrated that integrating the Project 5 Wishes into Medicare Annual Wellness Visits is feasible and beneficial. It successfully enhanced patient engagement, improved provider confidence, and increased documentation of advance care plans. These findings underscore the importance of equipping patients and clinicians with the tools necessary to engage in these conversations. Through thoughtful implementation and ongoing support, advance care planning can become a routine, valued part of primary care, ultimately improving quality of life and honoring patient values at every stage of health.

Reference

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