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# LETTERS

ADVANCE CARE PLANNING IN PRACTICE

## Advance care planning is everybody's business

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Mullick and colleagues provide an excellent overview of advance care planning, an area of practice that is rapidly growing in relevance and importance.[1] They focus on three main tools for advance care planning. However, advance care planning discussions can provide much more than documents recording a patient's preference, or other related legal documents.[2] Such discussions allow the development over time of a care plan that is mutually acceptable to patients, carers, and healthcare professionals. The process is dynamic and, however difficult, it is the responsibility of every healthcare professional who meets the patient.

Most people spend the last 12 months of life at home, and most end of life care in the UK occurs in generalist settings.[3] It therefore makes sense that GPs are key players in advance care planning. However, results of the recent King's Fund report into effective coordinated care for people with chronic and complex conditions suggest that many GPs fail to engage in the process even with financial incentives.[4 5] Huge challenges exist in current general practice that may explain this—conflicting demands and time pressures; lack of continuity, including the provision of out of hours services; and lack of adequate IT systems to allow effective communication of information.

Advance care planning should be part of routine care for the increasing numbers of patients who might benefit from it. The existing barriers in pressurised clinical practice must be dealt with. More research is needed to understand fully the experiences of patients with complex, chronic, life limiting conditions with respect to advance care planning and the challenges for healthcare providers and commissioners in delivering high quality, integrated care for these patients, so that we can move forward with solutions.

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