



physician orders for life-sustaining treatment paradigm

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FROM THE EXECUTIVE DIRECTOR

Dear Friends,

The National POLST Paradigm is a truly extraordinary effort in collective action. Each month, as we prepare this newsletter, we review the amazing work that you are doing across the country to support those with serious illness and frailty. This month we share the exciting work of several National POLST Paradigm Task Force members who are advocating for the inclusion of advance care planning in electronic health records (see Featured News).



Yet, with all the progress and innovation taking place in your states, we are not always aware of your accomplishments. Please share your successes with us so that we, in turn, can share them with all POLST stakeholders!

POLST Programs benefit from the experiences and knowledge of programs in other states. By sharing news from your states, you will not only gain well-deserved recognition, but will also help strengthen the National POLST Paradigm as a whole.

Best wishes,

Amy Vandenbroucke, JD
Executive Director

News

Webinar: Developing POLST Registries

On October 22nd, the National POLST Paradigm will host a webinar on the development of POLST registries. The webinar will be led by Terri Schmidt, MD, Dana Zive, and Jenny Cook of the Oregon POLST Registry.

To learn more or to register for the

FEATURED NEWS

POLST at the Office of the National Coordinator for Health Information Technology

The Office of the National Coordinator for Health Information Technology (ONC) is the federal entity that coordinates nationwide efforts to implement advanced health information technology and the electronic exchange of health information. On September 23, the **Health Information Technology Policy Committee**, one of several committees under the ONC, held a virtual hearing on documenting advance care planning.

National POLST Paradigm Task Force (NPPTF) consultant

webinar, contact polst@ohsu.edu.

Benefits of Participating in the National POLST Paradigm Program

Wondering why your state should participate in the National POLST Paradigm? We've created a list of just some of the benefits of participation, from grant funding opportunities to having a seat at the table for the ongoing development of POLST.

To see the full list of benefits, [click here](#).

Book Your Rooms for the National POLST Conference

The 2014 [National POLST Leadership Conference](#) is fast approaching. Before it's too late, make sure to book your rooms for the conference. The NPPTF has a block of rooms available at \$109 per night. To learn more about the rooms and how to make reservations, [click here](#).

The conference will be held February 13-14, 2014 at the Hyatt Place Atlanta Airport-South Hotel. Conference information was sent to state contacts and additional information will follow later this year. If there are any questions, please contact the National POLST Paradigm at polst@ohsu.edu.

Charlie Sabatino and NPPTF Executive Committee members Pat Bomba, Bud Hammes, and Woody Moss presented at the hearing. Charlie argued that documenting the existence of an advance directive in an electronic health record (EHR) is not sufficient. He emphasized that POLST forms and clinical notes are essential to fully document patient wishes.

In addition, Pat, Bud, and Woody demonstrated how POLST documents, as well as other advance care planning information, could be made visible, transferable, easily accessible, and meaningful in the decision-making process. Bud argued that the same clinical standards should be applied to advance care planning as other medical decisions. He analogized a provider's failure to document a patient's wishes, transmit them across settings, and incorporate them into medical decisions as similar to a failure to ask about and document a patient's allergies. If the latter failure were to occur, it would be considered a serious medical error.

These presentations, and others, revealed the importance of continuing to fully integrate advance care planning into health care systems, including health care information technology.

For more information on the hearing, including full audio and meeting materials, [click here](#).

FEATURED RESOURCE

Misrepresentations of POLST on Facebook

Those of you following the National POLST Paradigm's Facebook Page have noticed a few attacks on people who have presented POLST in national forums recently. The National POLST Office is working to appropriately address such comments, but wanted to take this opportunity to highlight at least one misunderstanding presented about Susan Hickman's July [presentation to the Institute of Medicine \(IOM\)](#). The commenter took Susan's comments about treating POLST as a checklist out of context. We wanted to clarify that her statements were referring to challenges our health care system faces in providing systematic advance care planning. She has told the National POLST Office that "The work that the statewide coalitions do to educate helps safeguard against the possibility of POLST being used as a checklist. My point was that further funding and incentives to support systems level change would help create an environment that fully supports advance care planning, including high quality POLST discussions." If you run into issues in your state's social media, please refer to our [Principles for Social Networking for POLST Paradigm Programs](#), contact the [National POLST Office](#), or encourage your state's representative on the Communication Committee to ask questions at the monthly meetings! Further, the Communications Committee has recently revised their goals and they will be working to provide resources for POLST Programs to use in handling media, both positive and negative, so that we can be consistent and unified in our messaging about the National POLST Paradigm.

[Note: attacks on National POLST Paradigms Facebook page, such as the one mentioned above, that solicit people to view other sites or blogs against POLST are being removed in accordance with our policy found on the "About" section of our Facebook account]

FEATURED RESEARCH

Perspectives on MOST in North Carolina Nursing Homes

A 2012 article in the Journal of the American Medical Directors Association reported on nursing home health care professionals' perspectives on the North Carolina Medical Orders for Scope of Treatment (MOST) form. The authors surveyed and interviewed physicians, nurse practitioners, and social workers from two North Carolina nursing homes to elicit information about the use of MOST, barriers to MOST, and concerns about MOST.

The study found that nearly all respondents thought that MOST was an effective tool for facilitating advance care planning. In addition, nearly all respondents thought that MOST conversations should be initiated by discussing location of care preferences. However, the professionals interviewed also identified concerns about the MOST process. Specifically, most respondents could not identify all requirements for reviewing a MOST form and thought there should be a reminder system. Furthermore, respondents thought that time was a barrier to MOST completion and that the scope of interventions section was difficult to explain. Finally, some respondents were concerned that MOST forms could be lost or might not be honored across settings.

The authors concluded that MOST was useful in advance care planning. However, they suggested that the challenges identified through their research demonstrated a need for further education on the review process and additional strategies to guide scope of intervention interpretations.

To access the full article, click the citation below:

Caprio, A, VP Rollins, and E Roberts. (2012). "Health Care Professionals' Perceptions and Use of the Medical Orders for Scope of Treatment (MOST) Form in North Carolina Nursing Homes." Journal of the American Medical Director's Association 13(2): 162-168.

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