

POLST

physician orders for life-sustaining treatment paradigm

November 2015

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Dear Friends,

We are looking forward to seeing you in Chicago next February! Registration is now open for the 2016 National POLST Paradigm Conference: *The Future of POLST: Challenges and Opportunities!* The conference will start February 3rd and end February 5th, taking place at the Hyatt Regency Chicago. Our goal is to have *at least* one individual from every state represented. This is the first open conference we have had since 2012 so registration is open to anyone who would like to attend. We appreciate the California HealthCare Foundation's financial support for this conference again this year! You may go [register online](#) as well as [make your hotel reservation](#) online to reserve your spot!



While the National Conference is our annual opportunity to come together in person, clearly it is not the only time our joint actions are significant. Now it's time to put out a BIG thank you to all of you who sent in your comments and letters, along with [our letter](#), to the Center for Medicare and Medicaid Services (CMS) in support of paying health care professionals for advance care planning conversations! On October 30, [CMS made its final ruling](#) in favor of this proposal. As of January 1, 2016, advance care planning will be reimbursed through two new CPT codes.

Finally, I would like to introduce the newest member of our team: Charissa Yang is our new National POLST Media Coordinator! Charissa has previous experience with POLST, having worked for the Oregon POLST Registry. She will be taking over POLST publicity via social media such as Facebook and Twitter, and the National POLST Newsletters. In addition she will be helping with the production of the POLST Toolkit, to be presented at the 2016 National POLST Paradigm Conference. You may reach Charissa by email at charissa@polst.org or by phone at (503) 494-4463. We also wish Alex the best of luck as he leaves us and continues his excellent work as a medical student (promoting POLST from within)!

Best wishes,



Amy Vandenbroucke, JD
Executive Director

Our News

Green light given for California POLST eRegistry

On October 5, 2015, California Governor Jerry Brown signed Senate Bill 19, establishing a pilot project for an electronic POLST Registry, which is to be called the **California POLST eRegistry Pilot**. The pilot project will be coordinated by the Emergency Medical Services Authority with the goal of developing a permanent, statewide POLST eRegistry.

[View the Legislation History for SB19](#)

Register for the Webinar: POLST and Dementia

We are excited to announce that Dr. Kenneth Brummel-Smith will present his webinar **The Role of POLST in the Care of People with Dementia** on Tuesday, November 17, 2015. Dr. Kenneth Brummel-Smith is a Charlotte Edwards Maguire Professor of Geriatrics, at Florida State University College of Medicine. He will discuss POLST and advance care planning in the context of dementia.

Date and Time:

Tuesday 11/17/2015 at 2:00pm ET/1:00pm CT/12:00pm MT/11:00am PT/8:00am HT

[Register for this Webinar](#)

Oregon ePOLST Experience POLST Webinar recording online

You can now watch the videorecording of our most recent National POLST Paradigm Webinar, **Oregon ePOLST experience: OHSU's ePOLST Implementation Process and Lessons Learned**. On October 20th, 2015, the National POLST Paradigm hosted this presentation on Oregon Health & Science University's ePOLST implementation process and lessons learned. The webinar was presented by

Featured News

California Making Progress Towards a More Supportive Environment for End-of-Life Care

A year after the landmark report [Dying in America: Improving Quality and Honoring Individual Preferences Near the End of Life](#) was released by the [Institute of Medicine \(IOM\)](#), the [Coalition for Compassionate Care of California \(CCCC\)](#) and the [California HealthCare Foundation \(CHCF\)](#), have produced a state-wide report. Entitled [Dying in California: A Status Report on End-of-Life Care](#), the report outlines California's progress in fulfilling the 5 key recommendations made in the IOM report.

Among the findings:

1. California has made progress increasing access to palliative care services in hospitals.
2. A diverse group of stakeholders are joining together to support policy reform, outreach, and education around quality palliative care, serving patients earlier than traditional end-of-life care services.
3. Advance care planning and palliative care are not yet an integral part of the standard of care in California.
4. Growing demand for palliative care far outstrips capacity.

For more details, read the [CCCC's announcement about this report](#) online, or [download the report from CHCF.org](#).

Featured Resource

Compilation of POLST Resources Available

There has been so much GREAT work done by our state and national POLST leaders over the last few years and we wanted to remind everyone of what we have available online! Below is a compilation of these fantastic POLST-related resources, centered about the following topic areas:

- What is POLST? (Understanding POLST)
- POLST Legislative Resources
- Resources for State POLST Paradigm Program Development
- Resources for Registry and ePOLST Integration

We hope you will find this list useful! Let us know if we are missing anything or if you have other feedback for us on this document.

[Download the Guide to National POLST Paradigm Key Resources \(PDF\)](#)

representatives of the Oregon POLST Registry, Oregon Health & Science University Information Technology Group, Epic, and technology firm Vynca.

[Watch the webinar on OHSU ePOLST](#)

View online training from Louisiana's LaPOST Program

You can now watch some excellent training videos online, created by **Louisiana LaPOST**. LaPOST's website includes educational videos targeted to various audiences including consumers, or patients and their loved ones, who want to learn more about POLST. In addition, LaPOST also has a video series for health care professionals who want to learn more about how to discuss end-of-life care with patients.

View the video for consumers:

<http://www.lhcaf.org/consumers>

Learn more about LaPOST:

<http://www.lhcaf.org/lapost>

Videos for health care professionals:

<http://www.lhcaf.org/e-learning>

Health Care Professionals: Learn to do POLST Better

POLST: Doing It Better is a video directed towards health care professionals that corrects general misinformation about POLST, including clarifying which individuals POLST should be offered to and emphasizing best practices for POLST. We encourage you to share this video with others. If you have any questions or comments, please let us know.

Watch the video online:

<http://www.polst.org/polst-doing-it-better/>

Featured Research

JPM Article: Oncology Fellows agree there is a need for better training in Palliative Care; Little Change in 10 years since previous study.

The article "Palliative Care Training during Fellowship: A National Survey of U.S. Hematology and Oncology Fellows," published in the May 2015 issue of the *Journal of Palliative Medicine*, found that most hematology/oncology fellows felt that care of the dying was important, yet most felt their training in end of life care was lacking. This research study was based on data taken from a May 2015 survey of 176 hematology/oncology fellows representing 93 of the 134 fellowship programs in the U.S.

98% of oncology fellows surveyed felt that providing care for the dying was important, 99% felt physicians have a responsibility to help patients at end of life (EOL), and 100% felt it was important to learn about how to provide care for dying patients.

Despite the American Society of Clinical Oncology (ASCO) recommendation and Accreditation Council for Graduate Medical Education (ACGME) requirement that oncology fellowship programs integrate competence in palliative care into the oncology fellowship curriculum, 25% of oncology fellows surveyed reported a lack of any explicit teaching on key palliative care skills (such as assessing and managing pain, assessing prognosis, knowing when it is appropriate to refer a patient to palliative care and hospice, and how to conduct a family meeting to discuss treatment options).

Fellows felt that their overall fellowship training was of better quality than their training for EOL care. Fellows who had been through a rotation on palliative care felt they had received better teaching on EOL care than those who did not, and those who had received better teaching felt better prepared to provide EOL care.

Most Fellows (62.9%) were not familiar with the "Surprise" question (i.e., "Would I be surprised if this patient died in the next year?"), which has been found to be a "simple, feasible, and effective tool" for identifying patients with highest risk of dying within the next year, and therefore patients who would be appropriate for palliative care.

The study compared results to a previous study conducted in 2004-2005 (based on a survey of 254 oncology fellows) which similarly found that oncology fellows felt their overall fellowship training was of better quality than their training in palliative care. The results from this study suggest that including a rotation in palliative care in oncology fellowship may be an effective way to do improve the quality of care for EOL patients.

[J Palliat Med. 2015 Sep;18\(9\):747-51.](#) (restricted access).

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