

National POLST Paradigm

Forum Topic of the Month

[Funding Opportunities for health care leadership, healthcare policy, health and aging, etc.](#)



About the Forum: The National POLST Forum is a great way to discuss any POLST topic anytime with colleagues locally or across the nation. It is a closed online discussion board for POLST advocates and health care professionals participating in their state POLST Program (it is **not** a patient or caregiver forum). To request access, please email us at info@polst.org, giving us your full name, title/organization and state in which you practice.

Featured News



ACP billing code use exceeds expectations; Karl Steinberg quoted in news.

As reported by the [Coalition to Transform Advanced Care \(C-TAC\)](#), the Centers for Medicare and Medicaid Services released [new data](#) indicating that over 750,000 Medicare beneficiaries, or ~1% of the Medicare population, exceeding the AMA's projection by almost 100%. Similar stories were published by [Kaiser Health News](#) and [USA Today](#) quoted National POLST Paradigm Long Term Care Advisor Karl Steinberg, who explains how advance care planning is critical in pulling families together in order to provide quality patient-centric care.

Featured Resource



National POLST Paradigm *Conflict of Interest* FAQs published

On September 11, 2017, the National POLST Paradigm Task Force approved a *Conflict of Interest Frequently Asked Questions* document to help explain many aspects about its Conflict of Interest policy, including how it was developed, why a new one was formulated, its basic philosophy, etc. [View the COI FAQs](#). [View the COI Policy \(PDF\)](#). [Visit the National POLST Paradigm Policies web page](#).

Featured Research: *Journal of Hospice & Palliative Nursing*



Hawaii healthcare systems sees large increase in POLST usage

The research article "Honoring Patient Choices With Advance Care Planning" was featured in the *Journal of Hospice & Palliative Nursing* discussing the initiation, development, and outcomes of an Advance Care Planning (ACP) program at all 4 hospitals of a hospital system. The study authors describe the comprehensive approach, which included specific processes for ACP Facilitation, Clinical Workflow, Community Education, Storing Data, Measuring Outcomes, and Facilitator Training. Notable results included very high rates of: POLST appropriate patients with ACP documentation (87%, up from 29% in 2011), and POLST wishes being honored (>95% of the time). Nursing CEUs are available with participation of an assessment on this research. [View online \(limited access\)](#).

National POLST Paradigm News in Brief

POLST Registry and Health Information Exchange integration webinar (10/18). On October 18, 2017, the National POLST Paradigm will host a free webinar presented by Dana Zive, MPH, Director of the Oregon POLST Registry, at 2 pm EDT / 1 CDT / 12 MDT / 11 PDT / 8 am HST. Her presentation will focus on health information exchange between the Oregon POLST Registry and Emergency Department users. [Register now](#).

New Hampshire POLST Program earns Endorsed Status. On August 24, the National POLST Paradigm Task Force approved the application submitted by New Hampshire's POLST (Provider Orders for Life Sustaining Treatment) Program for Endorsed Status. Congratulations, New Hampshire! [View National POLST map web page.](#) [View New Hampshire POLST website.](#)

"More Than 90% of POLST Forms Correct and Complete" in *Medical Ethics Advisor*. The September 2017 issue of *Medical Ethics Advisor* features an article about the recent study by lead author Alvin Moss, MD, which analyzed POLST Forms from both the West Virginia and Oregon POLST Registries. [Read online](#) (First 3 articles free).

Louisiana LaPOST granted \$155K in Civil Monetary Penalty (CMP) funds by the Centers for Medicare & Medicaid Services. Congratulations to LaPOST (Louisiana Provider Orders for Scope of Treatment), Louisiana's POLST Paradigm Program, which successfully applied for CMP funds for Advance Care Planning and LaPOST education! CMP funds are derived from fees paid by nursing homes for failing to meet minimum standards of care; the funds awarded must be used to assist of educate within the long term care community. [Learn more about LaPOST.](#) [CMS Frequently Asked Questions about CMP funds.](#)

Research: Maryland MOLST found to be consistent with patient wishes. Research published to *Journal of Palliative Medicine* based on 2064 MOLST Forms from patient chart reviews finds that "MOLST error rates are relatively low and consistent with other research. Areas for improvement include selecting one order option where required, avoiding contradictions between resuscitation and optional orders, offering MOLST optional orders options if relevant, and documenting in the medical record a summary of the discussion." [View online](#) (limited access).

Study: DNR Orders poorly understood by patients even after specific education. Correspondence from Catherine Marco, MD, et al. published to *The American Journal of Emergency Medicine* discusses new research from Ohio, in which patients were interviewed to assess their understanding of when Do Not Resuscitate (DNR) orders are applicable. Even after specific education on DNR orders given to the patients before the assessment, only 37% of participants believe that a DNR order should apply in the setting of cardiac arrest. [View article online](#) (limited access).

Article about Oregon/Washington POLST success now publicly accessible. Originally published on March 16 to the *New England Journal of Medicine*, this article by Susan Tolle, MD, and Joan Teno, MD, gives a thoughtful retrospective analysis of the multifaceted approach leading to the success of POLST implementation in the states of Oregon and Washington. [Read online.](#)

Delaware and Vynca partner to create ePOLST Registry system. Vynca and Delaware Health Information Network (DHIN) have established a partnership to facilitate the capture, storage and sharing of end-of-life medical orders across the care continuum. The registry is expected to be operational by the end of the year. [View press release.](#)

HospiceCompare website tool launched by the Centers for Medicare and Medicaid Services (CMS). *HospiceCompare* allows anyone to find hospices that serve a given area and compare them based on the quality of care they provide. Data include quality measures such as whether patients or caregivers were invited to discuss treatment preferences, patients or caregivers were invited to discuss beliefs and values, patients were checked for pain, etc. The website also offers general information on hospice and what one should expect from a hospice care agency. [View website.](#)

You can register early for C-TAC's 2017 National Summit, "the premier event for visionaries in advanced illness care who are actively reshaping the way care is provided." It will take place in Washington, DC this November 27-29 and engage with industry leaders on a range of topics including policy, delivery system reform, community engagement, caregiver support, and more. This year's event is co-chaired by former U.S. Senate Majority Leaders Tom Daschle and Bill Frist, MD. [Read more.](#)

End Well Symposium coming to San Francisco, December 7. A symposium about end-of-life design, examining: (1) How can we change our relationship with death? (2) How can we create a

culture and the tools to help us make sense of the dying process — as a patient, family member and clinician? (3) How can we create a more pervasive cultural support system that eases the burden of dying? (4) How can we empower the end of life experience for patient, family and caregiver? (5) How will we provide care — health care and otherwise — that honors personhood and delivers value? [View website](#).



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