

Survey

Please complete the survey below.

Thank you!

POLICIES AND PROCEDURES

- 1) Our policies recognize that TPOPP is an out of hospital order set for code status and level of intervention orders which are to be honored at the point of care. Consideration to include language of Common Law and Constitutional law principles, which require health care providers to respect a patient's known wishes. Example, Idaho: "any authentic expression of a person's wishes should be honored." Has a statement been included in the hospital's Resuscitation status policy.
 - Yes
 - No

- 2) For patients who reside in Missouri, the TPOPP form may need to be accompanied by a purple OHDNR form in order to be fully compliant with the MO out of hospital DNR law. Is this needed at your institution?
 - Yes
 - No

- 3) Has your hospital implemented appropriate policy and procedures specific for TPOPP?
 - Yes
 - No

- 4) Our TPOPP policies crosswalk with other policies on advance directives, EOL, Resuscitation Status, handling of OHDNR orders, and cross walk with medical staff/ NP/ and PA bylaws to include notation regarding TPOPP where necessary.
 - Yes
 - No

- 5) Our polices recognize that TPOPP is an out of hospital order set and the intervention orders are to be honored at
 - Yes
 - No

- 6) Please check that the following committees have reviewed and approved the policies referenced above:
 - Ethics Committee
 - Code Blue / Rapid Response
 - Critical Care
 - Emergency Services
 - Transitions of Care
 - End of Life Care Committee
 - Performance Improvement
 - ECMS
 - Other, please list

- 7) Our implementation plans address direct admissions from the community of those patients who have a TPOPP form presented on admission.
 - Yes
 - No

- 8) Our implementation plans address processing the forms on admission, where they will be scanned or placed in the hospital record, and all staff know where to access TPOPP forms.
 - Yes
 - No

- 9) Our implementation plans address the return of the TPOPP form to patient or legal representative at discharge
 - Yes
 - No

- 10) Our implementation plans addresses patients entering our ER with a TPOPP form in hand.
 - Yes
 - No

- 11) Our implementation plans address processing the forms in the ER where they will be scanned or placed in the hospital record, and all staff will know where to access the forms. Yes
 No
- 12) Our implementation plans address the return of the TPOPP form to patient or legal representative at discharge? Yes
 No
- 13) Our implementation plans have addressed how to reconcile updated TPOPP forms. Yes
 No
- 14) Our implementation plans have addressed how to translate TPOPP orders into a hospital order set that would include but not limited to the following: Code Status, Level of Intervention Yes
 No
- 15) Our implementation plans have addressed which patients will be targeted for the TPOPP discussion? Yes
 No
- 16) Our implementation plans have addressed which providers will have the TPOPP conversation with the patients and/or POA. Yes
 No
- 17) Our implementation plans have included the person who will: order, process, and maintain the forms for our institution. Yes
 No
- 18) Our implementation plans have included the person who will process forms to the nursing care areas, ER, etc. Yes
 No

GOAL RECONCILIATION

19) Our implementation plans include goal reconciliation and addresses:

- Did patient have TPOPP form on admission?
- If so, did it change during admission?
- All forms were scanned into the system or entered into the Medical Record
- Did the patient leave the hospital with their form?
- Other

Educational Plan

- 20) Our implementation includes an educational plan for key stakeholders, as well as, institutional wide education and training. Yes
 No
- 21) All key stakeholders have been trained and ready to launch. Yes
 No
- 22) As part of the institutional commitment, TPOPP education and training will be included in employee training for all front line health care providers. Yes
 No