California POLST Paradigm Program Recognized as *Mature* by National POLST Paradigm Task Force

May 12, 2016 -- The National POLST Paradigm Task Force is proud to recognize California as the third state with a Mature POLST Paradigm Program; a POLST Paradigm Program is recognized as mature when the state’s coalition can demonstrate that the POLST Paradigm is the standard method of advance care planning for persons with advanced illness or frailty near the end of life. In California, the POLST Paradigm Program is run by the Coalition for Compassionate Care of California under the direction of CEO Judy Thomas, JD.

The Coalition for Compassionate Care of California has shown that POLST Forms are used by 50 percent or more of hospitals, nursing homes or nursing home residents, and hospices in each region of the state, and by more than 75 percent of the state’s 30+ emergency medical service authorities. The California program has developed and shared effective educational modules for training professionals to have thoughtful goals of care conversations with patients, and holds informative webinars every month.

"POLST is designed to improve patient care, ensuring patients receive the treatments they want and avoid those they don’t," said Amy Vandenbroucke, JD, executive director of the National POLST Paradigm. "We are grateful that throughout the state of California, patients with serious illness or frailty in what may be their last year of life can work with medical professionals to make their treatment wishes known."

The Coalition for Compassionate Care of California sponsored the legislation which established POLST in California. AB 3000 (Wolk) was passed unanimously and went into effect in January 2009. In 2015, the Coalition sponsored two POLST-related bills, both of which were signed by Governor Jerry Brown. AB 637 (Campos) allows nurse practitioners and physician assistants – under the supervision of a physician and within their scope of practice – to sign POLST Forms and make them actionable medical orders. SB 19 (Wolk) requires the State to establish and operate a statewide digital registry for the purpose of collecting POLST Forms received from health care providers.

"We’re excited to join Oregon and West Virginia as the only states recognized as having a Mature POLST Program," said Judy Thomas, JD, CEO of the Coalition for Compassionate Care of California. "Our Mature status would not be possible without the many volunteers who advocated for POLST legislation in California, and the grassroots efforts of the 27 local POLST coalitions who worked with us to design and spread the POLST education curriculum now used by many POLST Programs around the country."

California POLST Paradigm Program: [www.capolst.org](http://www.capolst.org)
About the National POLST Paradigm

The National POLST Paradigm is an approach to end-of-life planning based on conversations between health care professionals and patients; the patient discusses his or her values, beliefs, and goals for care, and the health care professional presents the patient’s diagnosis, prognosis, and treatment alternatives. Together they reach a shared decision about the patient’s treatment plan that is informed and based on the patient’s values, beliefs and goals for care.

The National POLST Paradigm began in Oregon in 1991 by health care professionals who recognized that patient preferences for treatment near end-of-life were not being consistently honored during emergencies. Over the past 20+ years the Paradigm has expanded to 47 states.

About the Coalition for Compassionate Care of California

The Coalition for Compassionate Care of California (CCCC) is an interdisciplinary partnership of thought-leaders from healthcare systems and organizations, government agencies, consumer organizations, and individuals working together to promote high-quality, compassionate palliative and end-of-life care for all Californians. Since 1998, CCCC has been working to transform healthcare so that medical care is aligned with individual patient preferences—that people get the care they need and no less, and the care they want and no more. Through advocacy, education, and resource development, CCCC is working to ensure that organizations and communities have the information, knowledge and tools to increase access to advance care planning and palliative care.

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