Dear Friends,

Summer is a time of gatherings with family and friends. While enjoying the company of your loved ones, remember that the best time to have conversations about the end of life is when you are all together. So I encourage you to take advantage of your time together to talk about your wishes and ask about the wishes of those you care about.

At the same time, help share information about POLST to a broader audience through your social media accounts. There are many ways you can help. For example, you can participate in Twitter chats like the #HPM chat recently hosted by Judy Thomas (great work Judy!). Or, share videos like Max's story or Lee's story on your Facebook. If nothing else, please like NationalPOLST on Facebook and follow @NationalPOLST on Twitter (remember to use #POLST when appropriate!) and share the news we post. And if you're looking to become more comfortable with social media, keep an eye out for our new National POLST Communications Strategy, which will be released this summer.

The more that people become aware of POLST - whether through conversations or social media - the easier it will be for all of our POLST Programs to be successful.

I wish you all a safe and relaxing summer!

Best wishes,

Amy Vandenbroucke, JD
Executive Director
Our News

Oregon ePOLST Successfully Launched

We reported in our May eNewsletter that Oregon Health & Science University (home to the Oregon POLST Program) launched Vynca’s ePOLST platform, an electronic POLST Form, in April. It has been successful and OHSU issued a press release of the launch in June.

To read the press release of the ePOLST launch, click here, and to read some of the national coverage, click here.

Amy Vandenbroucke currently works 0.2 FTE for OHSU as part of the Practice Change Leaders (PCL) Program (see below). Her project was to help implement ePOLST at OHSU - to read her value proposition for this project (presented to the PCL leaders in June), click here.

Reminder: 2016 Practice Change Leaders Application Due August 26

As mentioned last month, the Practice Change Leaders application is due on August 26th. The Practice Change Leaders for Aging and Health is a “national program to develop, support and expand the influence of organizational leaders who are committed to achieving transformative improvements in care for older adults.” The 2016 application cycle is currently open and up to ten awards of $45,000 will be made.
be made.

National POLST Paradigm Task Force (NPPTF) Executive Director Amy Vandenbroucke, JD, is a current Practice Change Leader and Pennsylvania NPPTF representative Judy Black, MD, is a Senior Leader.

Program information is available here; application information is available here.

Kaiser Family Foundation Releases Medicare FAQ

The Kaiser Family Foundation (KFF) recently released a Frequently Asked Questions (FAQ) on Medicare and the end of life. The FAQ answers 10 questions about the role of medicare in end-of-life care, advance care planning, and hospice, as well as relevant public policy developments. This FAQ is a great resource for anybody working on advance care planning with Medicare populations.

To read the FAQ, click here.

2016 National POLST Paradigm Conference

The 2016 National POLST Paradigm Conference will be titled "The Future of POLST: Challenges and Opportunities". The Conference is scheduled for February 3-5 in Chicago, IL at the Hyatt Regency Chicago. We anticipate the conference will start at 2 pm on February 3rd and end at 3 pm on February 5th.

To reserve hotel rooms for the conference, click here.

Keep an eye out for registration

POLST
1. What EMS protocols affect patients in the absence of a POLST form
2. How EMS protocols affect patients in the absence of a POLST form
3. What EMS agencies must do to participate in the POLST paradigm
4. Identifying factors that hinder EMS participation

Angela Fera is a Nationally Registered Paramedic who is currently a Battalion Chief-Training for Johnson County MED-ACT in Kansas. She has ten years of EMS experience as a paramedic, supervisor, and educator. She is passionate about Ethics in EMS and completed the Certificate in Clinical Ethics and Health Policy program through the Center for Practical Bioethics in Kansas City, MO. She currently serves as EMS Advisor to the National POLST Paradigm Task Force.

Now that we have the capacity to record webinars, keep an eye out on POLST.org for future webinars that you weren't able to participate in!

To view the webinar, click here.

Featured Research

POLST, Nurse Practitioners, and Nursing Home Residents with Dementia

A recent article in the Journal of the American Association of Nurse Practitioners reviewed the literature on POLST for Nurse Practitioners (NPs), particularly in the context of nursing home residents with dementia. The authors note that NPs are uniquely positioned to have advance care planning conversations with patients in nursing homes because they often spend more time with nursing home residents than physicians. Indeed, they highlight some evidence (though limited) that suggests that care from NPs is associated with positive end-of-life outcomes for nursing home residents.

However, the authors note several limitations in the literature. First, while many nursing home residents with dementia are appropriate candidates for POLST - and often face situations such as facility transfers in the last 3 days of life - there have not been any studies of the use of POLST specifically among patients with dementia. Second, there are differences among state POLST regulations in the authority of surrogates to make treatment decisions, a critical issue for patients with dementia who lack decision-making capacity. And third, the ability of NPs
to participate in the POLST process varies among states, making it difficult to know how the NP scope of practice relates to POLST. These limitations provide an important map for future areas of research that must be addressed as the POLST Paradigm continues to expand.

The authors also argue that further education on the POLST Paradigm is needed for NPs. This education includes knowledge of scope of practice as well as the purpose of each section of the state POLST Form. The authors specifically note that there is a need for NPs to understand Section B, which covers medical interventions and which research has shown is the most difficult section of the POLST Form to interpret. Further education will ensure that NPs utilize the POLST Paradigm as intended and with the best outcomes for patients of any cognitive status.