Forum Topic of the Month

Should POLST be used as a Code Status document?

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

Pew issues brief about Faith Community role in end-of-life conversations.

On September 21, The Pew Charitable Trusts issued How Faith Communities Facilitate End-of-Life Conversations, a report based on a series of interviews describing a diverse set of faith communities (Jewish, Muslim, Catholic, Methodist, etc.) across the U.S. with the key finding that "Faith communities can complement health care systems as sources of information and support as people consider health care decisions in life-threatening situations." Related to this, Pew has also supported a special report on Catholic Perspectives at the end of life, called Pathways to Convergence. Read about Pew's work on Improving End-of-Life care.

Featured Resource

Webinar: Integrating the Oregon POLST Registry with the Health Information Exchange

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 Departments in Oregon. Register now.

Featured Research

Clinical Research Trial: Goals of Care Intervention for Advanced Dementia

A clinical research trail yielded 2 research papers plus an invited commentary; the research was aimed at assessing the effectiveness of a Goals of Care (GOC) intervention (video and structured discussion) on (1) caregiver communication and palliative care access for dementia patients and (2) nursing home staff perception on end-of-life care. The main study was published in JAMA Internal Medicine, and the study on nursing home staff in Geriatric Nursing. Commentary, also published in JAMA Internal Medicine, lauded the ambitious and important dual goals of improving palliative care and surrogate decision maker support in the particularly challenging caregiver situation of acting as health care surrogate for a dementia patient. Read more.

National POLST Paradigm News in Brief

CHRONIC Care Act and RAISE Act both pass US Senate in unanimous vote. On September 26, members of the US Senate voted in unanimous support for two pieces of bipartisan legislation, the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2017 and the RAISE Family Caregivers Act. These acts support the goals of achieving better quality person-centered health care for those with serious illness and the family caregivers of such patients, respectively, both issues that the National Academy of
Medicine (formerly the Institute of Medicine) has called out as emerging underaddressed issues in the U.S. in recent years. View C-TAC press release.

**Washington state has new 2017 POLST Form.** In April, the Washington POLST (Physician Orders for Life-Sustaining Treatment) Form was revised. Read more about the Washington POLST Form revisions.

Oregon naturopathic doctors to gain authority to sign POLST Forms in 2018. A new bill will go into effect in January 2018 that expands the authority of naturopathic doctors (NDs) in Oregon, including newly granting them the authority to sign POLST Forms. Currently, allopathic doctors (MDs), osteopathic doctors (DOs), nurse practitioners (NPs) and physician assistants (PAs) are authorized to sign POLST Forms in Oregon. The POLST Form will be revised for 2018 in order to reflect this update and a summary of changes is to be announced in November.

**Webinar (11/2): California POLST eRegistry Pilot Project:** On November 2, 2017, Kelley Queale, Judy Thomas, Kate Meyers, Howard Backer, and others will present a 2017 Overview & Update of the California POLST eRegistry project. Free. Register online.

The Florida Society for Post-Acute and Long-Term Care Medicine (FMDA) Quality Advocacy Coalition is holding a Strategic Forum on The Impact of End-of-Life Care & Advance Directives on Hospital Re-admissions on October 12, 2017 in Buena Vista, Florida. Topics include: Palliative Care, Advance Directives, Hospital Readmissions, EMS, POLST Overview, POLST Engagement, New statewide initiative to increase Advance Care Planning in Florida. Florida Health care professionals please RSVP.

**Working with POLST for Professionals.** This 3-hour, online, self-paced course is designed to help healthcare professionals understand the role and value of POLST, and how to employ it in documenting and honoring patient wishes. It can be taken at anytime and the cost is $25 ($50 with CE hours). Learn more.

Vynca and The Carolinas Center, a nonprofit serving a network of hospices and palliative care organizations across North and South Carolina, "have established a partnership to offer an online platform where individuals can electronically record their healthcare wishes and securely share them with family and physicians." Vynca's technology is being integrated with the Carolina Center's My Health Peace of Mind digital advance care planning platform. View press release.

**Register for the Coalition to Transform Advanced Care: 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.