

NATIONAL POLST PARADIGM

Quality Assurance Toolkits

Frequently Asked Questions (FAQs)

Q1: What is the difference between quality assurance and research?

In short, the difference depends on your end goals. If your primary purpose is to identify areas for improvement or where education is needed, then you are conducting quality assurance. If you are looking to gather data to publish and share broadly, then you are conducting research. This [chart](#) provides more information about the differences.

Q2: I want to do a POLST Paradigm quality improvement project, can you recommend a good starting place?

Congratulations! The answer depends whether you want to look at state level, evaluating your state's POLST program, or an institutional level, evaluating how your facility, hospital, or institution is using POLST. See Q3 (state) and Q4 (institution) below for details.

Q3: Can you recommend a good starting place for evaluating our state's POLST Program?

If you are a new program, it may make sense to start by keeping track of POLST education that is offered, and, if possible, how many people attend. You can do that on a spreadsheet or word document table. PQRsT Instrument Z, the California POLST Knowledge Pre-Survey offers a way to assess whether people attending an educational session have learned enough. The "easy" options for each Quality Indicator tool may also be a good place to start your assessment.

Another approach would be to assess your coalition efforts. The Kansas-Missouri TPOPP Coalition has provided the instruments they've used to build their coalition and assess its progress in PQRsT Instruments BB and CC.

At the state level, you could start with a telephone survey that asks facilities how often they use the POLST form with their patients. The instrument is included in the PQRsT is titled 'Instrument I OR Nursing Home and Hospice Telephone Survey' The most important question is:

a. How many current patients have POLST forms? [read choices]

- None
- Less than half
- About half
- More than half
- Nearly all or all

These results will allow you to tell stakeholders what % of nursing homes use report using POLST forms, and the % of nursing homes that report using POLST forms in at least ½ of their residents. This is probably the best measure to track growth of developing POLST programs in the most succinct manner.

Q4: Can you recommend a good starting place for evaluating our institution's use of POLST?

At a facility level, you could start with a simple chart review for all residents and complete the chart audit tool which is included in the PQRsT is titled 'Instrument A POLST Quality Improvement Chart Review Form'. The most important questions are:

1. Presence of POLST Form:

a. Is a POLST Form present?

No Yes (go to question 2)

This lets you know how many of your residents have a POLST. Also, and

e. Length of time to POLST completion:

Date of admission: _____

Date POLST form signed by patient/surrogate: _____

Date POLST form signed by MD: _____

This helps to verify that the form is valid because you are confirming that the POLST is signed and dated by the health professional as well as the patient/surrogate.

The Quality Indicators, particularly QI 2 (Patient/Resident Appropriateness for POLST Form), is a great place to start, helping you determine if your institution is offering POLST appropriately.

Q5: Do I need Institutional Review Board (IRB) approval to do this project?

It depends on the purpose of your project. Institutional Review Boards (IRBs) are the administrative body established at an institution to protect the welfare of human research subjects recruited to participate in the research activities conducted under the control of the institution. An institution may have one or more IRB. They are responsible for overseeing human subjects research but do not regulate quality improvement activities.

- If the purpose of your project is quality improvement, to evaluate and/or improve the quality of your POLST program, or the use of POLST in your institution, then you do **not** need IRB approval.
- If the purpose of your project is to answer a research question, or create and disseminate new knowledge, then you will need to get IRB approval.
- If you have both quality and research aims for your project or you are planning to publish your findings, then you will need IRB approval,
- If you have already done a quality project and you wish to disseminate your findings to others outside your program or institution, then you should apply for IRB approval to use your quality data for research purposes because this extends beyond the scope of internal quality assurance or improvement.

If you have never worked with an IRB before, we recommend that you contact the IRB and ask to speak with an analyst who can help you understand the steps and requirements. In particular, if you are doing research on human subjects, you will either need to obtain informed consent or justify why this is unnecessary. If, after reading this, you are not sure whether you need IRB approval to do your project, we strongly recommend that you contact your IRB and ask for them to help you make this determination. We have several IRB protocols included in the toolkit which may give you a place to start if you have never written one before.

Q6: I would like to evaluate whether the POLST forms in our institution are being filled out correctly according to patient/surrogate preferences. How can I do that?

Quality Indicator (QI 1- Process Indicator: Evaluating POLST Form Orders with Treatment Provided) provides some ways to approach this question. Otherwise, figuring this out is very tricky and we don't recommend trying to do it on a large scale because there are a lot of complexities. Your best bet would be to review the approach taken by Meyers et al in Washington. Their materials are available in PQRsT 'Instrument Q: Washington POLST Nursing Facility Project.' PWRsT Item MM is an IRB proposal for an ambitious research study that would address this question if cost were no object.

Q7: What is 'sampling'?

If you want to find out what a group of people think about an issue, you could ask all of them and tally the results – for example this is the approach used in voting. However, it is not necessary to ask every single person in a group for their response in order to characterize how the group will respond – this is like the straw polls that predict the outcome of elections before the whole results are tallied. Making sure that you get enough responses to accurately characterize the entire group requires good sampling. In most cases, groups can be characterized by the responses of 20-30 members, but only if the members are chosen randomly. For example, if you did your straw poll prior to election and only polled Democrats, you would conclude that the Democratic candidate was going to win. You would need to make sure that the sample you chose included a number of democrats and republicans and other voters that was close enough to the proportions of those parties in the whole state in order to accurately predict the outcome of the election in that state.

In the example I picked, you would be best off if you could put the names of everyone who voted in a hat and selected your sample at random from the pool of all available voters. Random selection can be achieved using a random number table, drawing from a hat, or a randomization program. Achieving a good sample that faithfully represents your entire population can be very difficult to do, because you do not always have access to everyone that you are interested in. Sometimes it's necessary to use what's called a 'convenience sample' – i.e. you survey the people who you have access to and will complete your survey. Often this is sufficient, especially for quality improvement work. You just need to make sure that you remember the limitations of this strategy so that you carry incorrect conclusions too far. In my election example, faulty sampling caused newspapers to prematurely declare that John Dewey, rather than Harry Truman was elected president of the United States.