

Goals of National POLST

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The original National POLST entity, the National POLST Paradigm Task Force (NPPTF), was convened in September 2004 to establish quality standards for POLST forms* and POLST programs and to assist states to develop such programs. At that time only a few states had such programs. The NPPTF included one representative chosen by each state that had met the requirements to be an endorsed POLST program.

*POLST forms are called by differing names depending on the state. For example, in New York it is called a MOLST Form and in Idaho, Tennessee, and West Virginia a POST Form. In this statement the form will be referred to as a POLST Form.

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In the early 1990s POLST was developed to improve patient care and reduce medical errors by creating a system that identifies patients' wishes regarding medical treatment and communicates and respects them by creating portable medical orders. The system focuses on a growing segment of the United States population, those seriously ill patients with advanced, chronic progressive illness. While National POLST supports the completion of advance directives, clinical experience and research demonstrate that these advance directives are not sufficient alone to assure that those who suffer from serious, advanced, progressive chronic illnesses will have their preferences for treatment honored unless a POLST form is also completed.

A key component of the system is thoughtful, facilitated advance care planning conversations between health care professionals and patients and those close to them to determine what treatments patients do and do not want based on their personal beliefs and current state of health. In these conversations patients are informed of their treatment options and, if they wish, their health care professional completes a POLST form based on the patient's expressed treatment preferences.

A number of states have implemented POLST and most others have expressed interest in doing so. POLST research shows that POLST use results in treatment consistent with patients' wishes more than 90% of the time, significantly reduces unwanted hospitalizations, and decreases medical errors.

National POLST is continuing to conduct research and develop quality measures to further assess the impact of POLST on patient outcomes. The goal of National POLST is to assure that the wishes of those with advanced illness and frailty are elicited, recorded and honored.