### QI 3: Comparing a “NO CPR” order in Section A with Treatment Provided to Out-of-Hospital Decedents

**Measure**

<table>
<thead>
<tr>
<th>Was cardiopulmonary resuscitation provided to decedents with POLST containing “do not resuscitate” or “allow natural death” orders?</th>
</tr>
</thead>
<tbody>
<tr>
<td>This measure is intended for out-of-hospital decedents, such as hospice, nursing homes, emergency services, etc.</td>
</tr>
</tbody>
</table>

**Rationale**

POLST orders not to attempt resuscitation in the event a patient is found pulseless and apneic should be honored. Evaluation of treatments received by patients who died can demonstrate whether health care professionals provided treatment consistent with the medical order.

**Note**: this measure does not evaluate the treatment provided to patients without a POLST or patients with a POLST that contains orders to Attempt CPR.

**Supporting National POLST Policy/Guidance**

- Appropriate POLST Form Use Policy
- Intended Population Guidance
- Patient/Resident Appropriateness for POLST Form

**Approach**

1. Evaluate decedent patients to identify which patients had a valid POLST that contained an order not to resuscitate. If more than one POLST, use the latest valid POLST.
2. Evaluate life-sustaining treatments received by the patient between the time of POLST completion and death. Compare these treatments to the orders contained in the POLST.
3. “Appropriate treatment” means that treatment the patient received was consistent with the orders in their POLST (or, for the Advanced Approach, if clinically documented discussions override the orders contained in the POLST). Inappropriate treatment is if the patient received treatment inconsistent with the orders in the POLST.

[see 3 approaches on next page]

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2 Process indicator measures reflect what is being done to maintain or improve health care. Examples relevant to POLST include how many hospitalized patients with a DNR order are discharged with a POLST form or whether appropriate nursing home residents have POLST forms.
<table>
<thead>
<tr>
<th>Easy</th>
<th>Intermediate</th>
<th>Advanced</th>
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<tr>
<td>Review the medical records of 20 decedent patients with a valid POLST that contained an order not to resuscitate. If more than one POLST, use the latest valid POLST. Evaluate the proportion of patients that received treatment concordant with the POLST. Troubleshoot with appropriate clinical team.</td>
<td>Conduct the “Easy” evaluation for 20-50 consecutive decedent patients within a clinical service or for an appropriate time period in a facility. Identify patterns of care that failed to meet the QI in order to provide feedback by service and venue.</td>
<td>Conduct the “Intermediate” evaluation. If there is discordance between the treatment provided and POLST form, conduct a chart review of the notes to see if there was a verbal override of the POLST orders or other rationale (e.g., trauma).</td>
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