APPEAL: Advocating POLST Education and Adherence at End of Life

Carlo Reyes MD, Susan Hickman PhD, Neil Gerts MD, Mandeep Sablok, Jasprit Takher MD FACP HCA Healthcare; Los Robles Hospital & Medical Center

LOS ROBLES HEALTH SYSTEM

Results/Discussion

- Results are currently pending. Using these results, we will examine the best practices for the implementation of an ePOLST for first responders, with the eventual goal of implementing an ePOLST platform to all first responders in Ventura County.
- We hypothesize that increasing the feasibility of use of ePOLST forms by first responders in this study will be associated with a willingness to use the ePOLST platform again along with further implementation across Ventura County.
- We anticipate the findings from this research project will provide a foundation for implementation of ePOLST registry in any region throughout the United States demonstrating sufficient community-wide readiness and support from hospitals, physician groups, outpatient facilities, patient advocacy organizations, community-based organizations, and other entities vested in promoting the importance of ePOLST.
- The eventual aim is for a multi-center ePOLST registry project to be presented for publication in leading palliative care, EMS, emergency medicine, and academic journals.

with effective dates of 1/1/2009, 4/1/2011 or 10/1/2014 are a

References

•Dillon E, Chuang J, Gupta A, Tapper S, Lai S, Yu P, Ritchie C, Tai- Seale M. Provider Perspectives on Advance Care Planning

Documentation in the Electronic Health Record: The Experience of Primary Care Providers and Specialists Using Advance Health-Care Directives and Physician Orders for Life-Sustaining Treatment. Am J Hosp Palliat Care. 2017 Dec;34(10):918-924. doi: 10.1177/1049909117693578. Epub 2017 Feb 15. PMID: 28196448; PMCID: PMC6668349.

- •Tolle SW. Aligning POLST orders with wishes: Time to put evidence into practice. J Am Geriatr Soc. 2021 Jul;69(7):1801- 1804. doi: 10.1111/jgs.17150. Epub 2021 Apr 7. PMID: 33826762; PMCID: PMC8360100.
- •Zive DM, Cook J, Yang C, Sibell D, Tolle SW, Lieberman M. Implementation of a Novel Electronic Health Record-Embedded Physician Orders for Life-Sustaining Treatment System. J Med Syst. 2016 Nov;40(11):245. doi: 10.1007/s10916-016-0605-3. Epub 2016 Oct 1. PMID: 27696173.

Objectives

- To discuss the methods of incorporating an ePOLST registry to first responders in Ventura County.
- To discuss the acceptance of an ePOLST registry by first responders.

Problem Statement

- Physician Orders for Life Sustaining Treatment (POLST) forms have variations in adoption due to several behaviors including accessibility of forms, degree of understanding of how to fill out such forms, and the lack of immediate access by EMS and other emergency providers.
- The adoption of ePOLST registry across the continuum of care my face similar barriers and prevent full adoption.
- A study that identifies characteristics of an ePOLST registry that enhances adoption is critical for future success of ePOLST implementation throughout the country.

Background

- Currently in Ventura County, patients' code status is documented on a paper POLST form.
- These POLST forms are written medical orders from a medical provider which specifies the types of medical treatment a patient would receive during a serious illness and/or admission to a hospital in the case of incapacitation (see Figure 1).
- The main problem with these paper POLST forms is that they are often forgotten and not brought in by patients, first responders, and/or family members on arrival to the emergency room.
- These paper forms are often incomplete or filled out incorrectly, thus invalidating them. Finally, they are rarely updated to reflect the patient's current goals of care.

Research Question

What are the characteristics of an ePOLST registry that are important for the rapid adoption of the electronic registry among EMS providers?

This research was supported (in whole or in part) by HCA Healthcare and/or an HCA Healthcare affiliated entity. The views expressed in this publication represent those of the author(s) and do not necessarily represent the official views of HCA Healthcare or any of its affiliated entities.

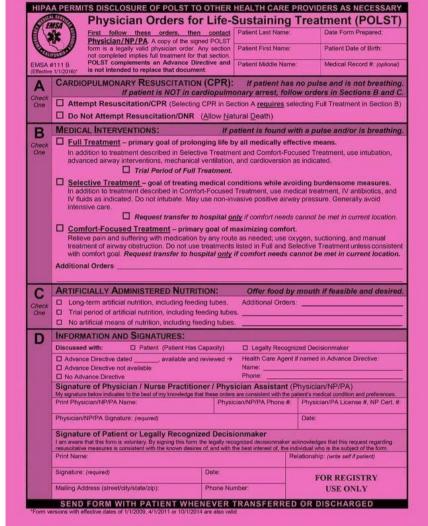


Figure 1. California POLST form.

Method

- The study is a mixed methods study investigating feasibility with a sample size of N=30
- First responders will be introduced to and trained on the ePOLST Registry and its basic functionality. The training will consist of in-person presentation of the paramedic user interface of the platform.
- Participants will be asked to provide demographic information including age, gender, years as EMT, medical field specialty were asked.
- The first responders will be presented with seven hypothetical clinical vignettes representative of typical paramedic runs designed to necessitate review of the patient's ePOLST. They will then be asked how they would respond in each situation based on the ePOLST orders.
- Ten questions, using a five-point Likert Scale, will be used to assess satisfaction with the ePOLST, ability to access and navigate the, perceived value in clinical decision, and willingness to use the form again.
- There is also a free response box which has ideas for improvement in the ePOLST registry.

