

Issues At-A-Glance: POLST/Provider Orders for Life Sustaining Treatment

WHAT IS IT?

Provider Orders for Life Sustaining Treatment (POLST) is a form that seeks to standardize orders and communication between patients and the health care community on end of life care and interventions. The POLST initiative seeks to use one style of form, signed by a patient or their surrogate and a health care provider, and is applicable across health care settings.

Over the past three decades, there has been growing recognition for informed and shared decision making between patients, their families, and health care providers around end of life care and life sustaining treatments. Over time, new laws and communication tools were developed to support patients that elected to define their care decisions and advanced directives. However, despite these changes, patient wishes for life sustaining treatments are not consistently followed. A primary reason for the failure to honor patient wishes has been a lack of a portable, standardized order form that would be accepted across multiple care settings.

To address this issue, an Oregon task force developed the first POLST form and began using them in 1995. Since then, the majority of other states have adopted similar standardized forms for communicating and documenting a patient's selection of life sustaining treatments. In 2005, the National POLST Paradigm initiative was formed to assist other states with affecting state policy and developing similar orders for communicating patient wishes with the health care community. These initiatives and forms may use the names of POLST (physician/provider orders for life sustaining treatment), MOLST (medical orders for life sustaining treatment,) COLST (clinician orders for life-sustaining treatment,) or some similar variation, depending on the state.

POLST complements, but does not replace, advanced directives. POLST provides more specificity about the types of treatments and interventions a patient wishes to receive for those patients who are facing serious, life-limiting or terminal illness. The form requires signature of both the health care provider and the patient (or their surrogate) and seeks to ensure that patient wishes are known and honored by health care providers, including Emergency Medical Services (EMS) personnel. The form also seeks to address care and interventions as the patient wants, and it is thought to potentially decrease the frequency of medical/care errors.

WHERE IS IT?

Twenty-three states have codified their POLST programs in to their laws for documenting life sustaining treatment orders. These states are California, Colorado, Connecticut, Delaware, Georgia, Hawaii, Iowa, Idaho, Illinois, Indiana, Louisiana, Maryland, Montana, Nevada, New Jersey, New York, Oregon, Rhode Island, Tennessee, Utah, Vermont, West Virginia, and Wyoming. An additional sixteen states

have also developed POLST forms. These states are Florida, Kansas, Maine, Massachusetts, Michigan, Minnesota, Missouri, New Hampshire, New Mexico, North Carolina, Oklahoma, Pennsylvania, South Carolina, Texas, Virginia, and Washington. The majority of states authorize NPs to sign POLST forms. Currently, NPs are recognized to sign the POLST form in California, Colorado, Connecticut, Delaware, Georgia, Hawaii, Idaho, Illinois, Iowa, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, New Hampshire, New Jersey, North Carolina, Oregon, Pennsylvania, Rhode Island, Tennessee, Utah, Vermont, Virginia, Washington, and Wyoming. Several other states continue to pursue similar legislation and programs. The growing trend is for states whose POLST forms are currently limited to physician signatures to modernize POLST laws and forms to authorize NP signatures on this patient care document.

Current AANP efforts in the area of POLST state legislation can be located on the AANP Advocacy Center. The most current listing of states that are working toward POLST can be found on the POLST website, which is linked to in the Additional Resources section at the end of this document. Specific authorization for NP signatures on POLST form may also be found on the AANP POLST State Policy Map, which is also listed at the end of this document.

HOW IT WILL IMPACT MY PATIENTS and MY PRACTICE?

When fully implemented, POLST and similar standardized orders will help patients and their families have their desires for various types of interventions and end-of-life care honored. Care transitions and hand-offs between facilities will no longer require additional advanced directive orders.

Because some state laws still vary in recognition of NP signatures on POLST forms, policy changes may be needed in some of the states with existing programs, and future POLST programs and laws should also allow for NP signatures. This recommendation is in line with the National POLST Paradigm 2014 NPPTF POLST Legislative Guide, which recognizes that in order to maximize patient access to POLST, NPs, in addition to physicians and physician assistants, should be able to sign the POLST form.

ACTION STEPS:

If POLST, advanced directive, or other end of life care legislation is introduced in your state, please alert AANP's State Government Affairs Office. AANP also encourages you to analyze the bill for impact based on your state's current laws and requirements.

Key considerations:

1. Does the proposed legislation conform to national trends for informed consent, documentation, and ordering for advanced directives? Will these changes be portable for patients across health care settings?

2. Does the form and state law provide for physician, nurse practitioner, and physician assistant signature? If not, consider working with legislators and other stakeholders to add these providers to the list of approved signers.
3. Want to be more proactive? NPs are encouraged to seek out and join state task force and stakeholder groups that are engaging in shared decision making and advanced directive legislation in their states. The POLST national website and one of the NP Organization Members of AANP in your state may have local connection information available.

LINKS TO ADDITIONAL RESOURCES:

- [POLST national website](#): Official website for the POLST initiative.
 - [2014 NPPTF POLST Legislative Guide](#)
- [Sample POLST Forms](#)
- [Caring Connections](#): Consumer outreach of the National Hospice and Palliative Care Organization. Offers resources and a downloadable state-specific advanced directives guide.
- [AANP POLST State Policy Map](#): Available to AANP Members for download from the [AANP State Policy Toolkit](#)

If POLST or other advanced directive legislation is proposed in your state, please contact the AANP State Government Affairs Office at (703) 740-2529 or statepolicy@aanp.org. AANP welcomes the opportunity to work with state stakeholders to shape legislation that is beneficial and appropriate for patients, nurse practitioners, and the entire health care community.

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