

A Vision for Electronic Access to and Exchange of POLST in California

BACKGROUND

The purpose of this Vision Document is to begin to form a shared vision regarding future development and expansion of electronic access to current and accurate POLST information in California. Our hope is that this vision will guide all stakeholders who have a role in electronic access and exchange of POLST information toward adhering to practices that best benefit all Californians.

Foundational Tenets:

- Eliciting and honoring patient wishes are the foundation of the POLST process.
- A completed POLST form is only as good as the conversation on which it is based.
- POLST form completion is always voluntary for patients.
- The patient-physician relationship is at the center of any POLST-related work.
- Electronic exchange needs to fit into existing workflows and be easy to utilize.
- Successful electronic exchange depends on broad support from all POLST stakeholders in the community.
- Widespread, appropriate use of POLST and adoption of POLST best practices by a community's healthcare providers are essential components of community readiness for electronic exchange of POLST information.
- Funding and sustainability questions must be adequately addressed.

Assumptions:

- HIT and other technologies for electronic exchange of information will continue to evolve.
- Multiple versions of electronic POLST information exchange will continue to operate in California, and new versions may be developed.
- California law will continue to require that a valid POLST form be honored by licensed healthcare providers, unless the requested treatment would be medically ineffective health care or contrary to generally accepted standards.
- The law will continue to provide immunity to licensed health care providers who comply with POLST orders in good faith.
- As established in legislation, the California Emergency Medical Services Authority (EMSA) will continue to be the regulatory home of the POLST form.
- Coalition for Compassionate Care of California will continue to lead POLST implementation, including standardization, education, quality, and systems integration.

VISION STATEMENT:

VISION: We envision a future in which all Californians with advanced serious illness or frailty have their wishes for medical treatment at the end of life are elicited and honored and where ensuring person-centered care and honoring patient wishes is always of highest priority within health care.

MISSION: Promote widespread adoption of Physician Orders for Life-Sustaining Treatment (POLST). Essential elements of the POLST ecosystem include thoughtful conversations about end-of-life preferences with patients and family members by skilled practitioners, accurate and reliable documentation using the POLST paper or electronic format, and secure electronic information exchange among qualified medical personnel across care settings statewide.

STRATEGY: It is also a future where the following are key elements of new and evolving POLST registry programs and operations within California:

Consumer Needs

- POLST appropriate consumers are engaged in POLST discussions and quality conversations happen before POLST form completion.
- Consumers have access to view their own POLST form within the registry.
- A mechanism exists for consumers to correct inaccurate POLST information, revise POLST information to align with new wishes, or revoke a POLST form.

Health Professional Needs/Requirements

- Hospitals, skilled nursing facilities, primary and specialty care providers, emergency responders, and other stakeholders prioritize POLST and the community benefits of sharing POLST information across the continuum of care.
- Clarity and shared understanding regarding the minimum requirements for a “valid” POLST, best practices for a quality POLST, and what constitutes a “registry ready” POLST.
- Electronic exchange of POLST fits into existing provider workflows.
- Access to POLST information is streamlined for appropriate health professionals regardless of setting (hospital, E/R, EMS, SNF).
- POLST registry products/vendors routinely provide ongoing user support for their product in collaboration with the POLST program.

Standards of Practice

- Providers ensure the accuracy and completeness of POLST forms before submitting POLST information for electronic exchange.
- POLST forms not meeting quality standards are corrected or completed as soon as possible.
- Sufficient information is collected to ensure the POLST form is associated with the right individual.
- POLST information is submitted for electronic exchange in a timely manner.
- As the authoritative repository of the most accurate and current POLST information, the registry is consulted in preference to any local POLST form held by a provider organization.
- Protected health information is safeguarded as required by state and federal law.

Governance and Monitoring

- Leadership of POLST electronic exchange in California is established at the statewide level and expectations are clearly communicated.
- POLST stakeholders in each community are held accountable for meeting the highest standards of quality.
- POLST registry stakeholders in each community and across the state develop a shared sense of ownership regarding the electronic exchange of POLST information.

Sustainability

- Funding for electronic exchange of POLST information supports high-quality implementation and long-term sustainability.

Technology Design

- Technology design for electronic exchange of POLST information supports:
 - High-quality POLST form completion and prevents unsigned POLST, POLST with insufficient information for patient matching, and POLST with conflicting orders to be entered into the registry.
 - Reliable access to the most recent POLST information independent of where it resides, the care setting in which it was created, or the care setting in which it is retrieved.
 - Seamless integration into professional users' existing workflows for the creation, submission and retrieval of POLST forms.
 - Accurate matching of patient to POLST orders.
 - Accurate presentation of a patient's most current POLST orders (versioning).