

A retrospective chart review to examine the consistency of Practitioner Order for Life Sustaining Treatment (POLST) forms and treatments given to residents in a skilled nursing facility

Rose Antony DNP,MSN,FNP-C

Nurse Practitioner, Optum, United Health Group, TX and NJ

INTRODUCTION

Provider Orders for Life Sustaining Treatment (POLST) are medical orders on a specific document.

POLST is a law in New Jersey and many other states .

POLST is based on the belief that individuals have the right to make their own health care decisions .

POLST provides a mechanism for assuring that a patient's decisions regarding end of life treatment are honored in all settings.

Long term care setting was selected for this study because:

-About 1.8 million Americans live in long term care settings.

-By 2020, about 40% of older adults above 65 years living in nursing homes will die there .

It is important to assess the end of life wishes of older population , because

-Older population grows very rapidly

-They live longer with the burden of chronic diseases.

-They require assistance with their activities of daily living .

OBJECTIVES

Purpose

The purpose of this project was to examine whether the patients in a long term care facility received the care they wanted as they expressed in Practitioner Orders for Life Sustaining Treatment (POLST) form

Objectives

To assess patients' preference on medical interventions, cardiopulmonary resuscitation and artificial nutrition.

To assess the consistency between treatment provided and the treatment expressed in POLST forms.

To assess the relationship between demographics and treatment preferences of residents with POLST forms.

To assess the number of hospitalization/emergency department (ED)visits of patients with POLST forms in a selected nursing home.

To determine whether there is a related increase in POLST forms and a decrease in nursing home residents' transfer to Emergency Department (ED)/hospital

Hypotheses

There is consistency between POLST form orders and treatment provided to residents in a selected nursing home.

There is a decrease in hospitalization/ED visits of patients with POLST forms

RESEARCH DESIGN AND METHODS

A retrospective chart review was done to assess the consistency of POLST forms and treatment preferences of patients in a selected nursing home. Record review was done on patients who were discharged from the facility from 1st July 2013 through December 31st 2015.

Study Variables

A demographic data collection tool included age, gender, race/ethnicity, admitting diagnosis, past medical history, type of insurance, length of stay, presence of POLST form, number of times patient transferred to the hospital or emergency department and whether patient returned to facility.

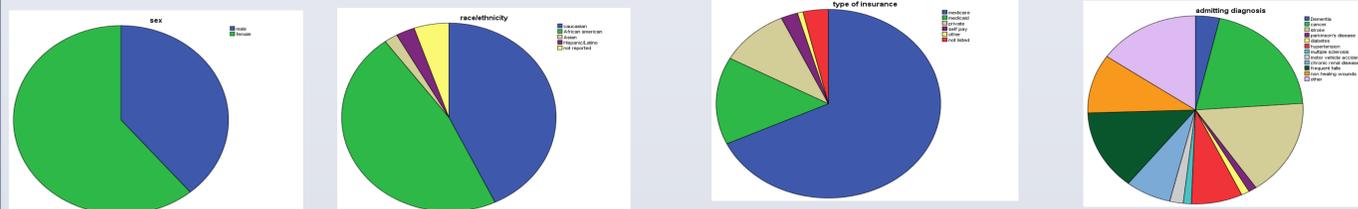
The variables on New Jersey POLST form included goals of care, medical intervention, artificially administered fluids and nutrition, cardiopulmonary resuscitation, airway management, health care representative identified, organ donor and provider signing the form.

Record selection

The number of patients discharged /deceased from the facility during the time period was obtained from the Admission Director of selected nursing home . The list of patients with POLST form was obtained from the social worker who usually track the patients with advance directive/POLST in the facility. The charts of selected patients were obtained from the medical record department. There were 247 patients discharged from this facility, either to home, another facility or deceased during the proposed study time period and 91 of those patients had POLST forms.

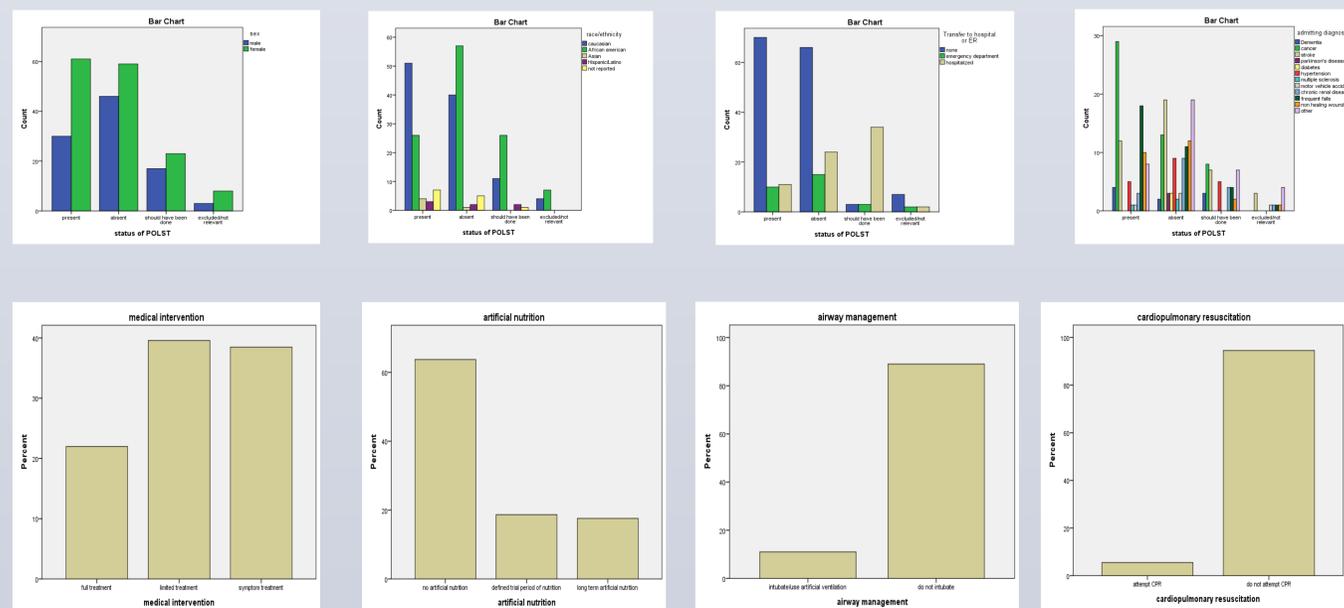
The electronic medical record named Point click care was used to collect demographic information on patients. All POLST forms which are in paper record was reviewed manually.

Demographic data



RESULTS

Data Analysis



CONCLUSION

There was a wide distribution in the age of participants. The age of the residents varied from 44 to 104 years old.

-The mean age was 79 and the median was 82.

-39 % of residents were male and 69% were females.

-20% Percentage of residents had cancer(N=50) as admitting diagnosis ,next to stroke (16 %), N=41).

-Race /Ethnicity were largely Caucasians and African Americans (43 % whites and 47 % Black)

-37 % of total residents had POLST

The number of hospitalizations of residents with POLST was 11 and those who did not have contributed 24.

-Those residents who should have a POLST (N=40) contributed to 34 hospitalizations

-The residents with DNR and DNI status were 95 % (N= 86) and 89% (N=81) respectively

-64 % (N=58) did not want any artificial nutrition

CONCLUSION

Conclusions

No residents received the care against their wishes as documented in POLST during their stay in the selected facility.

POLST is an effective method to communicate treatment preferences and It is important to convey end of life wishes to health care providers

Interesting information that physicians and advance practice nurses almost equaled the number of forms signed.

No published studies on POLST in New Jersey at the time of this project and need more studies.

Findings of this study is also consistent with similar studies done in Oregon .

Future recommendations

Educate health care providers on end of life care and POLST

Make public aware of POLST law in NJ.

Implement POLST policies in long-term care settings

Introduce POLST in out patient settings and have end of life conversations by primary care providers.

Recommendations for Reimbursement by private insurance companies for end of life discussions

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