



POLST Implementation Check List *(Provider Orders for Life-Sustaining Treatment)*

The POLST Implementation Check List is designed to identify basic steps helpful to assist in ensuring a successful process:

- **Leadership support-** Do you have the necessary leadership support to ensure program commitment?
- **Implementation Team-** Have you established an Implementation Team comprised of “program champions”, QI, Nursing, Social Work, and other necessary representatives? Have roles been clarified?
- **Target Population-** Have you identified a target population to begin engaging in POLST discussions- such as a particular diagnostic group, specific care unit or team of providers?
- **Medical Providers-** Have the Medical Providers that are involved with POLST discussions and form completion been adequately trained?
- **Staff-** Have the staff been adequately trained to assist with patient/family questions and conversations and do they understand their role?
- **Storage & Retrieval-** Is there an identified location in the Medical Record where POLST forms will be stored and information can be easily retrieved to ensure timely access of patients’ treatment choices?
- **Education-** Has there been the appropriate level of education provided for staff, including those who engage in POLST discussions and those who may encounter the form? (including, but not limited to, Medical Providers, Nursing, Social Work, Unit-Based Clinical Staff, Unit Secretaries, Health Information Management Staff)

- **Portability-** Is there an established process to ensure portability of the POLST form when an individual transfers from one level of care to another? Is there an existing discharge check-off list that the POLST form should be included on? Is staff aware of this process and their specific role?
- **Work Flow-** Has a work flow been established to ensure that POLST forms are reviewed, and handled consistently across all levels of care to ensure that patients' choices for treatment are honored when, where, and how they need to be?
- **Organizational Communication-** Has there been adequate communication within the organization to ensure that there is opportunity for input and adequate understanding of POLST and how the process works for patients, staff, and physicians? (Forums might include: Grand Rounds, Manager Meetings, Medical News Letters, Department Meetings, Ethics Committee)
- **Policy-** Has there been a POLST Policy developed or embedded into another Advance Care Planning Policy?
- **QI-** Have Quality Performance indicators been developed and implemented to ensure quality and efficiency?
- **Collaborative Community Engagement-** Have the appropriate broad-base community partners been identified and included in a plan for on-going engagement to ensure quality and efficiency? (Hospital, Nursing Homes, Hospice, Primary Care/Specialty Practices, Assisted Living, EMS, Senior Service Agencies)
- **Planned Meeting Schedules-** Have meetings schedules been established for both internal and external stakeholder groups to ensure follow through with engagement and quality improvement?

Visit www.healthynh.com (POLST video, form, brochure, model organization policy for POLST, resources, power point slides, National POLST website)

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