

Program Description for: **NEVADA**

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Title:

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Date Completed: 07.16.06

Date Updated: 01.25.07

State or Region: Reno, Nevada

Area of Use: Washoe County, NV

- Program Status:**
- No Program (possibly state contacts)
 - Developing Program
 - Endorsed by National POLST Paradigm Initiative Task Force

Name of program / form: Summary of Physician Orders for Scope of Treatment

Yes	No	Optional	POSSIBLE POLST PARADIGM COMPONENTS
X			1. Form has a uniform, standardized color
	X		2. Decisions reflected in the form are medical orders that must be followed by emergency personnel in the field and emergency rooms.
X			3. The form accompanies the patient across care settings
X			4. CPR / DNR section
X			5. Levels of interventions for #3
X			6. Levels of interventions for #4
X			7. Feeding Tube
X			8. Antibiotics
X			9. Basis for orders
X			10. Person completing form
X			11. Physician / NP / PA signature
X			12. Physician / NP / PA name & office number
X			13. Patient / Legal agent signature
X			14. Designation of legal agent name and number
X			15. Space for review
	X		16. Statement about leeway (<i>is the patient's surrogate provided authority to interpret the goals and preference at the time decisions are made?</i>)

EXTENT OF USE:

Start year: 2006

Settings of skills: Nursing homes and community hospital in Carson City.

Range of use: Discharged hospital patients

Use by those under 18yrs: Yes.

Distributed per month: 50

Distributed per year: TBA

HISTORY:

Our progress has been slow, but sure. The POLST form was initially brought to our attention by an ER physician. The Nevada Center for Ethics and Health Policy accepted development of a Nevada version and created a Task Force in 2002. Many member's positions changed and left the Task Force, but NCEHP, driven by the encouragement of community providers, continued efforts to implement the SPOST, Summary of Physician Orders for Scope of Treatment. At the end of December 2006 our first hospital accepted the SPOST as a pilot program. It will be rolled out to the Carson City, Nevada community March 2007 through that community's hospital, Carson-Tahoe Regional Healthcare.

BARRIERS OVERCOME:

Current barriers are that most of our nursing homes, LTC facilities, etc. are corporately owned, mostly out of state. Administration of these facilities has been hesitant to adopt a form that is not required and not accepted in the home office state. Many providers were initially reluctant to adopt the form due to legal concerns. The Nevada Attorney General and health department expressed positive assessments. Led by an ethics consultant, Carson-Tahoe Regional Healthcare began to explore the SPOST. With the guidance of the consultant they agreed in December, 2006 to pilot the program in the Carson City community. This program is currently underway.

STATE LAW AND REGULATIONS:

The SPOST cannot be used outside of a facility because it violates NRS 450B.400 - NRS 450B.590 which sets forth a process for an out-of-hospital DNR requiring a unique identifying number for each form and DNR request.

POLST IN THE HEALTH CARE SETTING:**Policies (hospitals, nursing homes, EMS, etc.):**

Currently being drafted.

Management:

Nevada Center for Ethics and Health Policy, University of Nevada, Reno

Training for health care professionals:

Training for social workers and case managers at our pilot site is underway. Nursing home and EMS training is pending.

Social workers in facilities will be employed to discuss the SPOST form with patients. NCEHP is responsible for training. At our pilot site, we have trained case managers and social workers. ER staff will be trained by those at our pilot site.

Training for the public and patients:

Public information has been disseminated at NCEHP functions and nursing homes.

CQI projects and research: