Important Milestones: Improving the Serious Illness Care and MOLST Process

An Update from the MA MOLST Advisory Subcommittee,
Department of Public Health Palliative Care & Quality of Life Interdisciplinary Advisory Council.
Submitted by Ellen DiPaola, Esquire, Chairperson, MA MOLST Advisory Subcommittee

Here is a brief summary of important milestones to date and next steps:

- In May 2017, Governor Baker's office announced Massachusetts was joining the <u>National POLST Paradigm</u>, a 43state initiative that fosters a national standard to empower serious illness conversations and document choices to ensure adults receive quality person-directed care.
- 2. In June 2017, Elizabeth Chen, PhD., former DPH Assistant Commissioner, instructed the MA MOLST Subcommittee to expand its members and bring the MA MOLST form and process into compliance with the National POLST standard. Being in compliance mandates Massachusetts:
 - a. Change our current MOLST form to include evidence based treatment options;
 - b. Build in key components such as professional training, consumer education and quality assurance;
 - c. Collaborate with major stakeholders such as EMS, Hospitals, Nursing Facilities, and Probate and Family Court to align policies and procedures under a DPH MOLST Governing Structure.

Our 28-member MA MOLST subcommittee set to work!

- 3. At the same time, National POLST was creating a first-ever national POLST form with the input of its 43 state members. The MA MOLST Subcommittee contributed significantly to the new national form. In September 2019, the national form and educational materials were released for state adoption.
- 4. After a comprehensive review, the 28-member MA MOLST Subcommittee voted to recommend to the Department of Public Health that the state adopt the national form and process for use in the Commonwealth.
- 5. The benefits of adopting the new national form and process are numerous:
 - a. It immediately brings us into compliance with the national standard;
 - b. Provides access to evidence based programs, materials, professional trainings at no cost to the state;
 - c. Offers national expert consultation to help us address our current problems while we create a MA governing structure and effective implementation components.
- 6. If the Commonwealth does <u>not</u> adopt the national form and process, the MA MOLST Subcommittee must create a singular new MA MOLST form that complies with the national standard. A new MA MOLST form would mirror the national form which contains the best evidence of treatment options and other decisions. We would also have to create our own materials, trainings, and programs at a significant cost to the state.
- 7. With timely adoption of the national form and process, the MA MOLST Subcommittee can immediately set to work to create a governing structure and collaborate with major stakeholders, many of whom have enthusiastically volunteered to help with implementing key components. Rollout of the new form will not begin until all is in place.
- 8. Additionally once the new form is adopted, the E-MOLST Advisory Group can work towards creating an e-registry, and the Guardianship MOLST Advisory Group can begin to standardize and improve the guardianship process for adults with serious illness.

Read More Here. For more information, contact Ellen DiPaola, President & CEO, Honoring Choices Massachusetts, edipaola@honoringchoicesmass.com