

**NAZARETH HOME  
ADMINISTRATIVE SERVICES  
POLICY AND PROCEDURES**

**TITLE:** MOST/POLST FORMS

**POLICY #:** 023

**EFFECTIVE DATE:** 08/25/2017

**REVISION DATE:**

**POLICY:** Nazareth Home supports the rights of each person to make decisions regarding their care and treatments. Advance Care Planning using the MOST/POLST as a document for MD orders and documentation of care planning conferences with elders, family and staff represents one way those rights are fulfilled.

**PURPOSE:** Nazareth Home is committed to person directed care. Advance care planning is a process used to identify the preferences of persons regarding their care and treatment at a future time including a situation where the person may lack the capacity to direct. The use of the goals of care conversations and completing of the MOST/POLST documents provide a significant component of person directed care.

**PROCEDURES:**

1. At the time of admission any directives or desires related to advance care planning or do not resuscitate orders is identified. (please see DNR policy:1418)
2. The facility will identify if the person has a MOST/POLST document that is legally executed and not revoked. If in place, it will be immediately actionable. The MOST/POLST form is placed in the medical record along with any advanced directives that are in place.
3. If a MOST/POLST is not in place at the time of admission, the form is considered with the plan for the first plan of care conference.
4. The attending physician/ARNP will complete the MOST/POLST with the person and their legally recognized health care decision maker after discussion options for care decisions.
5. The original form will remain in the patient medical record.
6. The MOST/POLST form is reviewed annually and at any request.
7. The initial goals of care and any discussion about continuing, reviewing or revoking the MOST/POLST is to be documented in the medical record. This documentation ought to include the time of the conversation and the parties involved and any needed plans identified.
8. At each care conference, the team will review the document with the individuals involved to make sure it matches the individual wishes.
9. Any discussion about revoking the MOST/POLST should be documented and the MD notified.
10. To void the MOST/POS LT, draw a line through the entirety of section A through E and write, "VOID." The form should then be signed, dated and remain in the record.