

IPOST in the Home

For Linn and Jones counties – Beginning July 1, you may send an IPOST home with a patient. Please advise the patient they must keep IPOST in easily accessible location that the ambulance service could find if no family or friends present (example may be in an envelope or baggie on the refrigerator). Also remind them they should take their IPOST with them when going to see their doctor, the emergency department or if hospitalized.

All other counties – This will be a point of discussion for your coalition during your operational planning to implement IPOST strategy. Additional information will be available in IHC's toolkit as we refine this process in Linn and Jones counties. The home environment was not a part of the pilot project.

IPOST Community Coalition co-chairs

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The IPOST Update

News from the IPOST Community Coalition

IPOST becomes State Law

By Stephanie Anderson, MSN, RN, CHPN and
Christine Harlander, RN, CHPN

As a result of a four year successful pilot, IPOST (HF 2165) was signed into law by Governor Terry Branstad on March 7, 2012. This allows the IPOST to be recognized through the state in any setting (home, care facility, hospital, hospice)

So, your next question is, "What does this mean?"

We are pleased to announce that multiple state organizations have come together to provide education, administrative structure and to develop strategy for statewide implementation. The Iowa Healthcare Collaborative (IHC), led by Dr. Tom Evans, will coordinate the strategy.

The Iowa Department of Public Health (IDPH), IPOST oversight led by Jane Schadle, under the new legislative language, will prescribe the uniform IPOST form and shall direct availability of the form.

Also joining this collaborative effort is the Iowa Hospital Association, Iowa Health System, Iowa Healthcare Association, Iowa Emergency Medical Services Association and Hospice and Palliative Care Association of Iowa.

IDPH will have information posted on their website soon (www.idph.state.ia.us). IHC has developed a tool kit which will be available on their website (www.ihconline.org).

IPOST is a community strategy that creates a process to identify and respect treatment choices for a person with a chronic, serious medical condition, the frail and elderly or terminally ill. Health care providers from across the continuum coming together to develop the strategy and set an IPOST implementation date will ensure your success.

If your community is interested in implementing IPOST, your first step is to identify IPOST Champions and to create a Community Coalition involving key stakeholders. Suggestions include physicians/ARNP/PA's, hospital personnel (administration, ED, palliative care, social work), EMS, home care, faith communities, hospice, long-term care, residential and assisted living, an ethicist, legal, public health and interested community members.

IPOST Outcomes
1,595 IPOSTs have been initiated as of June 2012 in Linn and Jones Counties.

Data Collection Process to Change

Now that the pilot has concluded, outcome measurement systems will change.

- Facilities will receive new data collection templates requiring less information
- For other settings, data postcard information will change
- You will no longer need to make a copy of the IPOST

Continue to send information to:

St. Luke's Hospital
Attn: Stephanie Anderson
1026 A Ave. NE
Cedar Rapids, IA 52406

IPOST Becomes State Law

The following is an informational letter from the IPOST Physician Champions from Linn County. You may forward this to introduce the idea and recruit physician/APRN/PA champions for your local Coalitions.

We are pleased to announce Governor Branstad has signed the Iowa Physician Order for Scope of Treatment (IPOST) into state law effective July 1, 2012.

Many physicians in Linn and Jones counties are familiar with the IPOST project, which has been a legislatively driven pilot under the Iowa Department of Public Health for the last four years. To briefly summarize, IPOST is a one page form which translates a conversation about goals of care into an actionable format with the authority of a provider signature (this makes it different than, but complementary to, an advance directive). It is intended for individuals who are frail and elderly or have a chronic critical medical condition or terminal illness—including children. It covers resuscitation status, desired interventions in the event of abrupt decline, and artificial nutrition. The IPOST form may be signed by a physician, PA or APRN.

IPOST should be implemented after a careful conversation regarding goals of care, ideally by a trained facilitator. Physicians may be asked to validate the results of the goal setting that has already taken place and sign the form. However, physicians are obviously free to hold goals of care conversations and complete the forms themselves. The important thing is to maintain the integrity of the process, ensuring the conversation has been as thorough as is necessary. Additional information will be forthcoming about educational events on completing IPOST forms for interested providers.

Overall support will be provided by the collaboration between Iowa Healthcare Collaborative, Iowa Department of Public Health, EMS, Iowa Hospital Association, Hospice and Palliative Care Association of Iowa and the Iowa Health System. We are proud to have been part of a cooperative project that is going to improve health care in our state. Please feel free to call either of us if you have questions.

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Honoring Your Wishes

By Jane Dohrmann, MSW, LISW, Iowa City Hospice

Honoring Your Wishes is a community-wide advance care planning initiative that formally began in Johnson County in December of 2010. We have received consultation and education from *Respecting Choices*, Gundersen Health Systems, La Crosse, WI. *Respecting Choices* offers advance care planning training & consultation utilizing the following models:

- First Steps (for healthy adults & initial conversations with people affected by chronic illness). This includes introducing Advance Care Planning as a process, assisting in the selection and preparation of a qualified healthcare agent, exploring a person's goals for life-sustaining treatment in the event of a severe neurologic illness where a full cognitive recovery is unlikely, and completing an advance directive.
- Next Steps (disease-specific planning for people with a chronic progressive illness) and
- Last Steps (for people who are terminally ill, the frail, and elderly). This includes assisting individuals in clarifying goals of care and making treatment decisions/IPOST.

Our Initiative has focused on First Steps and will begin to explore how to incorporate IPOST utilizing best practices. Our vision is that the advance care planning process will be the standard for healthcare providers and the community to ensure every adult's healthcare choices are clearly defined and honored.