

February 20, 2018

LuAnn M. Eidsness, MD, FACP Hospice and Palliative Medicine, Ethics Sanford USD Medical Center Sioux Falls, SD 57104 Sent via email to: LuAnn.Eidsness@SanfordHealth.org

Dear Dr. Eidsness,

As the Executive Director of the National POLST Paradigm, I wanted to congratulate you, and the entire LifeCircle SD group, on your work to be recognized as a developing state. Our online map has been updated to reflect this change in status: www.polst.org/map.

As you know, the POLST Paradigm is a voluntary approach to end-of-life planning that emphasizes eliciting, documenting, and honoring the treatment preferences of seriously ill or frail individuals using a portable medical order called a POLST form. We appreciate your participation in the National POLST Paradigm, which serves to provide the framework to ensure all POLST Programs have the same fundamental programmatic and form elements (there is some flexibility based on state needs).

Our vision of having the POLST Paradigm adopted by all states is only possible when POLST program leaders, like you all in South Dakota, recognize the importance and value of being part of the larger national movement. When we share the same framework for program implementation, messaging, and form elements, we build the consistency in process that helps us improve patient care and give patients greater control and direction over medical treatments they receive- *wherever* they are during a medical emergency in the United States.

Some quick additional highlights of participating:

- You are helping support every patient wanting to use the POLST Paradigm. In following our POLST Paradigm framework, your coalition is helping to ensure reciprocity: that POLST forms of patients in South Dakota can be honored in any other state (and, likewise, those patients using POLST forms from other states can be honored in South Dakota).
- Increasing our national credibility. There is activity at the federal level (legislation and policy) and our ability to effectively support the POLST Paradigm and help ensure patients have access to quality POLST Programs depends on our having a single voice.
- Benefit of accessing resources. Since all POLST Programs share the same framework, it is easy for programs to share and build on currently existing materials and resources, saving time and money.

To the last point, I wanted to make sure you were aware of a few key resources:

(1) The POLST Legislative Guide. Many states who considered a legislative approach for implementing the POLST Paradigm, like South Dakota, have found this guide incredibly useful. www.polst.org/legilsative-guide-pdf

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- (2) National POLST Program Development Guide. Since South Dakota is still in the early stages of developing its program, this guide (created through interviews with POLST Program leaders) may offer some good advice and tips. I especially urge you to look at suggestions for coalition or task force members—one of the best pieces of advice any POLST Program leader would give you is to have identify and invite all stakeholders to participate in the early stages of program development. www.polst.org/implementation
- (3) POLST Forum. This online resource is only available to POLST Program leaders, including task force or coalition members. Email <u>admin@polst.org</u> for access.
- (4) Webinars. Most of our webinars are posted here (some select ones are only available through the forum). <u>www.polst.org/webinars</u>

Finally, I wanted to make sure you all were aware of our new governance structure. We are in the process of setting up a structure that will allow each POLST Program—regardless of development level—to participate in making decisions about the programmatic elements of the National POLST Paradigm. We have information on our <u>forum</u>; please email <u>admin@polst.org</u> for access.

If you have any questions, please feel free to contact me at <u>amy@polst.org</u>.

Take care,

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Amy Vandenbroucke, JD Executive Director, National POLST Paradigm

CC: Michelle (Shelly) Roy DNP, NEA-BC, CCTM, ACM