

Policy & Procedure Harmony Healthcare International (HHI)

Department:	Submitted By: Kris Mastrangelo
Approval Date:	Page Number: 1 of 6
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Policy

It is the policy of this facility to assure that Residents have been informed, in writing and in a language that is understood, of their rights regarding decisions concerning medical care, including:

- The rights to accept or refuse medical or surgical treatment
- The right to formulate and to issue Advance Directives to be followed should they become incapacitated and unable to make those decisions.
- The right to complete Medical Orders for Life-Sustaining Treatment (MOLST), a voluntary form consisting of patient's wishes for current care treatment.

Definition

The MOLST Form is a medical order for Do Not Resuscitate and provides opportunity for an individual's wishes regarding life-sustaining treatment. It is designed to be a statewide mechanism for an individual to communicate his or her wishes about a range of life sustaining and resuscitative measures.

The MOLST Form:

- Is a standardized form that is clearly identifiable.
- Is used voluntarily and can be revised or revoked by an individual with decision-making capacity at any time.
- Is legally sufficient the first page which functions as a legal order; the 2nd page is the designated wishes of the Resident.

Procedure

- 1. When a Resident is admitted to this facility, a designated staff member will request a copy of their Health Care Proxy and/or Medical Durable Power of Attorney for their Health Center record.
- 2. At that time, Residents are offered the Massachusetts Medical Orders for Life Sustaining Treatment (MOLST).
- 3. The MOLST is the Massachusetts official medical directive and provides medical orders for a Resident's choices or medical treatments



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When is the right time to fill out the MOLST form?

It may be time when:

- It is medically appropriate based on the Resident's current health condition, and The Resident wants to use the MOLST form, and
- The Resident (and ideally the Resident's health care agent and loved ones) have had discussions with their doctor about their illness, prognosis, personal values and goals of care, and the possible benefits and burdens of treatments.

Can a Resident be required to use the MOLST form?

No. Using MOLST is voluntary.

Can a Resident change his or her mind about treatment after they fill out the MOLST?

Yes. They can ask for and receive needed medical treatment at any time, no matter what the MOLST form says. A Resident can also void the MOLST form and/or ask a physician, nurse practitioner or physician assistant to fill out a new form with different instructions at any time.

Who follows MOLST instructions?

Health care professionals (nurses, emergency responders, etc.) honor valid medical orders, including MOLST.

Is MOLST the same as a "health care proxy"?

No. A health care proxy form is used to appoint a Resident's health care agent- the only one legally authorized to make medical decisions for them in the future if they cannot make medical decisions (e.g. because of unconsciousness, coma, dementia or other mental limitations). Every adult age 18 and older in Massachusetts should fill out and sign a health care proxy form.

If a Resident has written "final wishes" or a "living will," isn't that enough?

Those are forms that may be used as evidence of a Resident's wishes, but they are not authorized by law in Massachusetts. They do not carry the same authority as a medical order like MOLST. Valid medical orders are to be honored by health care providers in all settings.



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If a Resident already has a "Do Not Resuscitate" (DNR) order, can he or she still use the MOLST form?

Yes. The MOLST Form includes instructions about resuscitation and other life-sustaining treatments. And, unlike a DNR order, the MOLST form can be used to refuse OR request treatments.

Who keeps the signed MOLST form?

The original MOLST form will be kept in the Resident's chart at this facility. Copies are also valid and can be given to the health care agent and/or family members. A copy will also be sent with the Resident to the hospital.

Will the MOLST form be honored outside of Massachusetts?

It may be honored in some states but not others. However, a MOLST form is always a good record of a Resident's treatment preferences.

4. Initiating a MOLST:

- A nurse or social worker can explain the MOLST Form to the Resident (or authorized representative). The physician/NP is responsible for discussing the efficacy or appropriateness of the treatment options.
- Once the MOLST Form is completed, it must be signed by the Resident or, if the Health Care Proxy has been activated, by the authorized representative and the physician/NP.
- Physician orders are to be written to follow the MOLST instructions located on the front side of the form.
- Residents (or authorized representatives) have the option of indicating additional advance care planning preferences by indicating on page 2 (back side) of the MOLST Form. These preferences, when signed by the Resident (or authorized representative) and physician/NP will become part of the clinical record and indicate to the physician/NP their wishes regarding further advance care planning if and when such a treatment option may be indicated. Medical orders regarding preferences noted will be written by the attending physician/NP only when such advance care planning discussions are felt appropriate by the physician with the Resident (or authorized



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representative). A Residents' preferences will not become a physician's order until which time it is indicated by the attending physician.

• Discussion regarding the MOLST should be documented in the medical record.

5. Frequently Asked Questions

What is "Medical Orders for Life-Sustaining Treatment"?

Written instructions about certain life-sustaining treatments, from a physician or nurse practitioner to other health professionals (e.g., nurses, emergency responders), based on the patient's own preferences.

What is "life-sustaining treatment"?

Medical treatments that attempt to keep a Resident alive. Cardiopulmonary resuscitation (CPR) is one example. Health professionals are required to attempt CPR when a patient's heart or breathing stops, unless they have medical orders (like a MOLST form) with other instructions.

What Resident might want to fill out a MOLST form with their doctor?

Persons of any age (including children) who have a serious advancing illness, or injury, or medical frailty, that could end their life.

Who fills out the MOLST form?

The Resident with the advancing illness (or their health care agent, if the Resident lacks capacity) and a physician, nurse practitioner, or physician assistant. If no health care agent is appointed, a guardian or the parent/guardian of a minor may fill out the MOLST form to the extent permitted by Massachusetts law (seek legal counsel with questions about a guardian's authority).



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6. Residents admitted with a completed MOLST form

- Upon admission, the nurse will note the existence of the MOLST Form and review the form for completeness (signatures). A completed MOLST is a legal medical order and is immediately actionable.
- The MOLST should be copied and the date of the copy written on the form. This copy and the original MOLST Form should be put in the Consent section of the Resident's chart.
- When the attending physician's orders are verified, the order for MOLST instructions will be written. It is the attending physician's responsibility to review this order with respect to the Resident's wishes and goals of care.
- If "Do Not Resuscitate" is indicated on the MOLST, the facility procedures for "Do Not Resuscitate" will be followed. Likewise, if "Do Not Hospitalize" is indicated, the facility policy for "Do Not Hospitalize" will be followed.
- The initial review and any discussion about continuing, revising or revoking the MOLST should be documented in the medical record.

7. Reviewing/Revising the MOLST

- The MOLST orders will be reassessed periodically by the attending physician/NP when the Resident's orders are renewed and as warranted by a change in the Resident's health, medical condition or preferences. The physician/NP may document reviews and update in their progress notes.
- The MOLST will be reviewed by the interdisciplinary team at the annual care plan meeting or when there is a significant change in the Resident's status and also anytime the Resident or authorized representative/Activated Health Care Proxy requests review.
- The MOLST Form can be revoked or preferences can be changed. This can be completed by a physician or NP. The MOLST Form needs to be voided by drawing a line on both sides of the form and writing "VOID" on the form along with the date and signature of the nurse posting the order.



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 When revoking or changing preferences, a new MOLST Form should be completed and signed. All discussions should be documented in the Resident's medical record. (If no new form is completed and no limitations on treatment are documented, full treatment may be provided.

Important Notes:

- A Resident may have Advance Directive orders in place without the MOLST Form having been completed.
- Comfort Care/DNR Verification forms are not necessary, if a signed MOLST form has been completed.