



Practitioner Orders for
Life-Sustaining Treatment

**IL Public Act 102-0140:
Health Care Surrogate Act | POLST Changes
FAQ for Health Care Professionals**

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DISCLAIMER

- Note that this information provides clinical guidance for the POLST Model and should NOT be construed as medical or legal advice.
- For answers to legal questions, check with your organization's legal counsel.

What is POLST?

- In Illinois - POLST stands for **Practitioner*** Orders for Life Sustaining Treatment
 - Other states use POST, MOLST, MOST or similar.
- It is NOT just a form, **it is a process**
 - Approach to end-of-life planning based on thoughtful conversations with the patient, family and healthcare professional/s
 - Incorporates values, beliefs and priorities as these relate to prognosis, likely disease course & treatment choices

* Physician, Advanced Practice Registered Nurse, Physician Assistant, Licensed Resident in 2nd year or higher of accredited residency program

**Revisions to Health Care
Surrogate Act (HCSA): POLST
IL Public Act 102-0140**

Change #1: Removes the Requirement for a Witness Signature on the Form.

WHY WAS THIS CHANGED?

- The POLST form is like other medical orders (signed by the practitioner and patient/legal representative) which normally don't need a witness signature.
- The witness was never intended to attest to "informed consent" just that the patient/legal representative was the person who signed the POLST form.
- The witness signature requirement is inconsistent with best practices established by the National POLST organization.
- **The witness signature requirement has been a barrier for some who wish to complete a POLST form.**

Change #1: Removes the Requirement for a Witness Signature on the Form.

HOW TO IMPLEMENT:

- **EMS/First responders and healthcare providers should recognize POLST forms without a witness signature as **VALID**.**
- A NEW FORM -without a witness signature section- is pending IDPH approval & publication.
- **CAUTION!** Patient safety is the FIRST concern.
Continue to **include the signature of a witness when feasible** until IDPH issues a new form that will not have a field for the witness to sign.

Change #2: Revises Process When Surrogate Wishes to Limit Life-Sustaining Treatment on Behalf of Patient

WHY WAS THIS CHANGED?

- There are healthcare settings where POLST forms are commonly completed, but two physicians are not generally available.
 - Home
 - Nursing Facilities
 - Rural Hospitals
- Therefore, when a default healthcare surrogate wishes to limit life-sustaining treatment, they may need to be able to rely on a practitioner other than a physician.

Change #2: Revises Process When Surrogate Wishes to Limit Life-Sustaining Treatment on Behalf of Patient

HOW TO IMPLEMENT?

When a default health care surrogate wishes to limit life-sustaining treatment:

1. 1 physician + 1 qualified healthcare practitioner must examine the patient and document that the patient is non-decisional;
2. 1 physician + 1 qualified healthcare practitioner must examine the patient and document that the patient has a qualifying condition;
3. Other provisions of the HCSA continue to apply as in the past.

"Qualified health care practitioner" means an individual who has personally examined the patient and who is licensed in Illinois or in the state where the patient is being treated and who is a physician, advanced practice registered nurse, physician assistant, or resident with at least one year of graduate or specialty training who holds a temporary license to practice medicine and is enrolled in a residency program accredited by the Liaison Committee on Graduate Medical Education or the Bureau of Professional Education of the American Osteopathic Association.

"Physician" means a physician licensed to practice medicine in all its branches in this State or in the state where the patient is being treated.

*Highlighted text pertains to SB 2974 effective 5/9/22

Change #2: Revises Process When Surrogate Wishes to Limit Life-Sustaining Treatment on Behalf of Patient

HOW TO IMPLEMENT (cont.)?

A POLST withholds LST when:

- DNR in Section A
- Selective Treatment or Comfort Focused Treatment in Section B
- No Medically Administered Nutrition in Section C

In these cases:

Patient must have a qualifying condition & lack decisional capacity documented by attending physician + qualified healthcare practitioner before a surrogate appointed under the IL Health Care Surrogate Act can consent to POLST that w/holds “life-sustaining treatment” (LST). Other provisions of the HCSA also apply.

Change #3: Allows First Responders to Act on Out-of-State & National POLST forms

WHY WAS THIS CHANGED?

- Patients with serious, life-limiting illness travel in their last months of life.
- Portability and reciprocity of POLST medical order forms helps assure the honoring of a patient's wishes when visiting Illinois.
- Building in a presumption of validity for POLST forms signed by the patient or their legal representative regardless of the state or National form used, protects providers.

Change #3: Allows First Responders to Act on Out-of-State & National POLST forms

HOW TO IMPLEMENT?

EMS/First-responders and healthcare providers **should honor** a completed POLST form that is *formally authorized by a state or territory within the United States*, as well as the National POLST form.

- In some states, forms are called POST, MOLST, MOST or something else.
- Illinois has NOT adopted the National form, so completing a National POLST form for Illinois residents is not recommended.

Change # 4: Sets Guidelines for Surrogate Changing a POLST

WHY WAS THIS CHANGED?

The IL Health Care Surrogate Act has safeguards to make sure default surrogate decision makers are always:

- Acting to reasonably carry out a patient's expressed wishes
- Acting with patient's best interest in mind

Sometimes, a surrogate requests that the medical team void or change a lawfully executed POLST form that **the patient consented to** when competent to make their own decisions.

- Puts the patient at risk for receiving care they did not want
- Causes distress for providers

Change # 4: Sets Guidelines for Surrogate Changing a POLST

HOW TO IMPLEMENT?

When a default surrogate wishes to change an existing POLST, **consented to by patient themselves**:

1. Surrogate must consult with attending practitioner;
2. Review advanced directives/known wishes;
3. Use “substituted judgment standard” first, best interest of patient second;
4. Document new information and reason for change in EHR

Change #5: Reinforces Voluntary POLST Completion

WHY WAS THIS CHANGED?

- Some facilities complete a POLST form as part of the admissions process.
- The POLST form is always optional
- If a patient wants to receive all available life-sustaining treatment, they may choose not to have a POLST form.

HOW TO IMPLEMENT?

Never make completing a POLST form a requirement for admission to any facility or a precondition to the provision of services

Questions -

Please contact us!

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National POLST:

www.polst.org

**Consult the IL Health
Care Surrogate Act
(755 ILCS 40/)**