

WHAT IS LaPOST?

LaPOST stands for **Louisiana Physician Orders for Scope of Treatment**. It refers to a physician's order that documents and directs a long-term care resident's medical treatment preferences when faced with a serious, advanced illness. LaPOST represents a model program for end-of-life care.

IS A LaPOST DOCUMENT VOLUNTARY?

The document is completely voluntary. The LaPOST document is not biased for or against treatment. It is nonjudgmental and allows residents to choose and clearly state their own preferences for medical treatment when faced with life-limiting and irreversible illnesses.

WHO SHOULD BE OFFERED A LaPOST DOCUMENT?

The LaPOST document is not for everyone. It is only appropriate for residents who are seriously ill with life-limiting and irreversible conditions and whose life expectancy is less than six months. It can be completed for a qualified resident, regardless of age.

WHO SHOULD DISCUSS AND COMPLETE A LaPOST DOCUMENT WITH A RESIDENT?

The diagnosis of a serious, advanced illness may leave residents and their families with many questions. Physicians and other health care professionals should discuss the facts about the illness and the kinds of treatment available with them. The LaPOST document provides a context for guiding this important conversation. The law allows health care professionals to assist with the completion of a LaPOST document. In many cases, physicians will initiate conversations with residents to better understand their wishes and goals of care. Other members of the health care team – nurses, social workers, chaplains, etc. – may also be involved in the conversation particularly to address physical, psychosocial and spiritual issues, as needed. The physician must sign the document to make the orders valid.

HOW DO YOU DETERMINE IF A RESIDENT'S HEALTH CONDITION QUALIFIES HIM/HER FOR A LaPOST DOCUMENT OR THE NEED FOR CONVERSATIONS ABOUT ADVANCE CARE PLANNING?

To identify a resident's eligibility for a LaPOST document, the screening questions below may aid in determining his/her health care status and the need for conversations about advance care planning:

1. Does the resident express a desire to avoid or receive any or all life-sustaining treatment?
2. Would you be surprised if the resident died within the next six months?
3. Does the resident have one or more advanced chronic conditions, a new serious illness with a poor prognosis or advanced frailty*?
4. Does the resident have decreased function, frailty, progressive weight loss, two or more unplanned hospital admissions in the last 12 months, inadequate social support or lack of help at home?

*Advanced frailty is defined as a clinical syndrome in which three or more of the following criteria were present: unintentional weight loss (10 lbs in past year), self-reported exhaustion, weakness (grip strength), slow walking speed and low physical activity.

CAN THE LaPOST DOCUMENT BE COMPLETED AND SIGNED ELECTRONICALLY BY THE PHYSICIAN AND THE RESIDENT/PERSONAL HEALTH CARE REPRESENTATIVE?

Yes, the LaPOST document can be completed and signed electronically by the physician and the resident or their personal health care representative via the LaPOST Registry.

The LaPOST Registry is a secure, statewide electronic registry that provides a single source of LaPOST and advance care planning documentation instantly accessible online to authorized long-term and other health care professionals in any care setting. For more information regarding this registry, refer to the *LaPOST Registry Handbook for Long-Term Care Professionals*.

WHO CAN SIGN A LaPOST DOCUMENT?

Because the LaPOST document is a medical order, it must be signed by a physician. To be valid, the document must also be signed by the long-term care resident or the resident's personal health care representative, if the resident is unable to speak for himself/herself.

WHAT SHOULD BE DONE WITH THE LaPOST DOCUMENT AFTER IT IS COMPLETED AND SIGNED?

As a physician's order, the LaPOST document transfers with the resident as he/she moves from one health care setting to another. If the resident will not be transferred or discharged for a period of time, the current completed original LaPOST document should be placed in the appropriate section of the resident's medical record. If the resident is transferred to another setting, the original LaPOST document must accompany the resident.

DO ALL PHYSICIANS HAVE TO HONOR A RESIDENT'S LaPOST DOCUMENT?

Physicians should honor the orders stated in the resident's LaPOST document immediately, but the resident's physician is obligated to examine, assess and review the orders any time the resident transfers to a new health care setting as the resident's health status and goals of care may have changed. The physician may then issue new orders consistent with the most current information about the resident's health status, medical condition, treatment preferences and goals of care. Any deviations from the resident's original LaPOST document must be noted in the resident's medical record.

WHEN SHOULD A LaPOST DOCUMENT BE REVIEWED?

A resident's LaPOST document should be reviewed and updated if the resident is transferred from one care setting to another, if there is a substantial change in the resident's health status, or if the resident's goals of care and/or treatment preferences change.

IS THE LaPOST DOCUMENT PART OF THE MINIMUM DATA SET (MDS)?

Completion of a LaPOST document is recorded as an integrated component of the MDS assessment in long-term care facilities. LaPOST remains voluntary, but its inclusion in the MDS emphasizes the importance for long-term care facility residents to document their wishes for care.

CAN PHYSICIANS BE COMPENSATED FOR HAVING ADVANCE CARE PLANNING DISCUSSIONS AND COMPLETING DOCUMENTS WITH THEIR RESIDENTS?

Effective January 1, 2016, the Centers for Medicare and Medicaid Services (CMS) began reimbursing health care providers and other health care professionals if they had advance care planning, or end-of-life care, discussions with their Medicare residents.

IS THE LaPOST DOCUMENT A LEGAL DOCUMENT?

Yes. The LaPOST program and document were approved by the Louisiana Legislature during the 2010 legislative session and revised during the 2016 legislative session.

WHAT IS AN ADVANCE DIRECTIVE?

An advance directive is a legal document that allows individuals to record the type of medical care that is acceptable in case of a life-limiting illness and is usually completed in advance of any illness. A LaPOST document, which is a medical order, complements an advance directive and is not intended to replace it. An advance directive is still necessary to appoint a legal health care decision maker, and is recommended for all adults, regardless of their health status.

WHAT IF THERE IS A CONFLICT BETWEEN AN ADVANCE DIRECTIVE AND A LAPOST DOCUMENT?

If there is a conflict between the documents, the more recent document should be followed.

WHAT IS A POWER OF ATTORNEY FOR HEALTH CARE?

A Power of Attorney for Health Care is also a legal document. With it, residents can designate someone they trust to make health care decisions for them when they are no longer able to make those decisions or speak for themselves.

WHERE CAN I FIND MORE INFORMATION ABOUT LaPOST?

For more information about LaPOST, or to download a copy of the document, visit la-post.org.



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la-post.org