

MOST – Supplemental Component to Assist With End-of-Life Decisions

End-of life discussions may be difficult to conduct and awkward for a resident, their families and caregivers, and healthcare providers. Every life is important and deserving of dignity. Nursing home staff have the responsibility of protecting the rights of their residents. Nine out of ten people say they should have a conversation about their end-of-life wishes, but only three out of ten people have had that conversation. It is empowering for residents to be able to share their healthcare wishes and it is important in developing their individualized care plan. Improving the acknowledgment and implementation of end-of-life decisions in nursing homes also reduces unnecessary care and healthcare costs.

How can a Resident Enhance Documentation for End-of-Life Wishes?

Kentucky is fortunate to have the Medical Order for Scope of Treatment (MOST) form available, which is a **voluntary** end-of-life planning tool designed to give those who are seriously ill or medically frail the opportunity to make their healthcare wishes known in the event they are unable to speak for themselves. MOST is used to supplement ADs, living wills and/or durable healthcare power of attorney and can facilitate advance care planning more broadly for providers and residents. It also allows the resident to share their desires for when they want to seek comfort care and helps the family, caregivers, and power of attorney for healthcare in making a decision when it comes to the difficult choices in stopping or not beginning treatments that will prolong life.

Residents in Kentucky are also privileged to have the [Kentucky MOST Coalition](#), which represents a state-wide stakeholder group promoting use of the MOST form. The Coalition seeks to transform how Kentucky approaches end-of-life medical care and provides education and awareness about the MOST Form.

Facts Residents Need to Know

The MOST form:

- Documents a medical order that the resident develops with their physician. The MOST document must be **signed by a physician and the patient (or patient’s surrogate) in order for it to be valid.**
- Helps residents put in writing what their **personal wishes and values** are for their treatment.
- States that full treatment will be provided if there are **incomplete sections** on the MOST form
- **Must not conflict** with a living will, advance directive, or durable healthcare power of attorney. For example, if there is conflicting information on a living will and the MOST form, the living will is followed.
- **Can be revoked or changed** at any time by the patient or patient’s surrogate.
- **Should be reviewed annually** or when there is new knowledge of a change in the patient’s condition or medical wishes.
- Is printed on **bright pink paper** that can be easily recognized by nursing home staff

What is included in the form?

There are five different sections on the MOST form.

1. Section A: Cardiopulmonary Resuscitation (CPR)
2. Section B: Medical Intervention
3. Section C: Antibiotics
4. Section D: Medically Administered Fluids and Nutrition
5. Section E: Surrogate Information

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The [Kentucky MOST Coalition](#) website provides additional [information and resources](#) about the interventions considered to aid in guiding the right decision that aligns with the resident’s desires. The MOST form is located at <https://www.kymost.org/most-form-v2>.

What are Key Steps for Nursing Home Staff

It is essential that all members of a nursing home’s team are aware of a resident’s end-of-life decisions. A few key steps for team members include the following:

1. Provide education on end-of-life decision processes for all staff members.
2. Assess for end-of-life decisions on admission for each resident. If missing, assess for the desire to have the difficult conversation about end-of-life decisions.
3. Review all end-of-life decisions documents and evaluate for any discrepancies.
4. Keep all end-of-life decision documentation in the same area of the medical record.
5. Educate staff members on end-of-life decisions for each resident, as applicable.
6. Review end-of-life decision documentation with the resident and physician annually and when there is a change in the resident’s condition or medical wishes.
7. Contact the [Kentucky MOST Coalition](#) for education and questions.

Reach out to Qsource for Guidance!

Scott Gibson is a Qsource Quality Improvement Advisor for Kentucky. Scott is an expert on quality improvement and offers education on a wide variety of topics, including end-of-life conversation facilitation. He and others at Qsource are also available to provide trainings on ADs and the MOST form. Please contact Scott by email at scott.gibson@area-G.hcqis.org or by phone at 502-680-2669 to receive free technical assistance. Also available are past articles on other healthcare-related issues, such as Composite Scores, pain management, and behavioral health strategies. Connect with Scott for copies of past articles on these topics and more.



Scott Gibson

More on atom Alliance

Formed as a partnership between three leading healthcare consultancies, atom Alliance is working under contract to CMS throughout Alabama, Indiana, Kentucky, Mississippi and Tennessee to improve quality and achieve better outcomes in health and healthcare and at lower costs for the patients and communities. Through [atom Alliance](#), AQAF in Alabama, IQH in Mississippi and Qsource in Indiana, Kentucky and Tennessee are carrying out an exciting strategic plan, with programs in place to convene, teach and inform healthcare providers, engage and empower patients, and inspire, share knowledge and spread best practices with communities across the entire healthcare continuum. Please visit the atom Alliance website at www.atomAlliance.org for helpful educational resources on various topics.

Residents are at risk for [pneumococcal disease](#). Encourage everyone who is 65 years or older and those 19 through 64 years old with certain health conditions or who smoke cigarettes to receive a pneumococcal vaccine!

Article Resources:

- o <https://www.cdc.gov/nchs/data/databriefs/db54.htm>
- o [Kentucky MOST Coalition](#)