



ECHO[®] MOLST: Honoring Preferences at End-of-life

Crucial Conversations: Use Both Sides of Your Brain



Presenter

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Learning Objectives

- Recognize MOLST is a communication process that requires both reason and compassion
- Apply the 8-Step Protocol
- Demonstrate effective communication skills

Crucial Conversations Require Wisdom



- When one prevents one's emotions from overtaking one's rationality it is called *reason*.
- When one prevents one's rationality from overtaking one's emotions it is called *compassion*.
- When one can do both, it is called *wisdom*.

Ancient Chinese Proverb

8-Step MOLST Protocol



1. Prepare for discussion

- Understand patient's health status, prognosis & ability to consent
- Retrieve completed Advance Directives
- Determine decision-maker and NYSPHL legal requirements, based on who makes decision and setting

2. Determine what the patient and family know

- re: condition, prognosis

3. Explore goals, hopes and expectations

4. Suggest realistic goals

5. Respond empathetically

6. Use MOLST to guide choices and finalize patient wishes

- Shared, informed medical decision-making
- Conflict resolution

7. Complete and sign MOLST

- Follow NYSPHL and document conversation

8. Review and revise periodically

Developed for NYS MOLST, Bomba, 2005; revised 2011



Step 1: Prepare for Discussion

- Understand patient's health status, prognosis & ability to consent (*Be sure patient is appropriate for MOLST, as discussed in Session 1*)
- Retrieve completed Advance Directives
- Determine decision-maker and NYSPHL legal requirements, based on who makes decision and setting (*as discussed in Session 3 & 4*)
- Invite important people to hear discussion (health care agent and family)

Effective Communication Skills

Thoughtful MOLST Discussions

- Express yourself clearly
- Ask open-ended questions
- Actively listen
- Reflect: paraphrase the message and communicate understanding back
- Resolve conflicts

Step 2: Determine What the Patient & Family Know re: Condition & Prognosis

- What have you heard from other doctors about your condition? (Start from there.)
- Inform the patient they are appropriate for a MOLST discussion based on MOLST screening questions.
- Offer the opportunity to continue. (MOLST is voluntary. Patient may not ready to accept his condition and prognosis. Return to discussion at a future date)
- Respond with emotion and empathy.

Estimate and Communicate Prognosis



- Physicians markedly over-estimate prognosis
- Accurate information helps patient / family cope and plan
- Offer a range for average life expectancy
 - days to weeks
 - weeks to 3 months
 - 3 – 6 months (PCIA, PCAA, Hospice*)
 - 6 months to 1 year (MOLST**)
 - > 1year (MOLST: e.g. persons of advanced age may have explicit wishes.)

* Would it surprise you if this person died in the next 6 months?

** Would it surprise you if this person died in the next year?

Discussing Prognosis

- What sort of information about the future would help you?
- Most people want to know about their prognosis – and don't want to know – at the same time. What about you?
- Would it be best to talk about the best case, the worst case and the usual case?

Step 3: Explore Values, Beliefs, Goals and Expectations

- Identify patient's personal values and beliefs
- Recognize patient's personal goals for care
 - What makes life worth living
 - What matters most
- Personal goals align with
 - Longevity
 - Functional Preservation
 - Comfort Care

Align Language with Person-centered Goals for Care



- Longevity: We want to ensure you receive the kind of treatment you want and needs in order to attend your son's wedding
- Functional Preservation: We'll do everything we can to help you maintain your independence
- Comfort Care: Your grandmother's comfort will be our top priority

Step 4: Suggest Realistic Goals

- Manage unrealistic expectations
- Clarify possibilities
- Negotiate goals

Managing Unrealistic Expectations: Clarify Possibilities. Negotiate Goals.

- What do you understand about your father's condition?
- What do you hope we can accomplish with our medical care?
- I wish for that too....
- Unfortunately, no medicine, surgery or all the love you have for him...

Step 5: Respond empathetically

- When you notice an emotion, respond with
 - **N**aming: put emotion into words
 - **U**nderstanding: explain how you see it from their perspective
 - **R**especting: admire what you genuinely feel good about
 - **S**upporting: offer your caring, expertise and presence
 - **E**xploring: when you're not sure where to go, ask for more data

Key Points

- The patient and/or medical decision-maker and family must understand health status and prognosis before progressing with MOLST discussion
- Discussing values, beliefs and goals should precede virtually all discussions about preferences re: Resuscitation and other Life Sustaining Treatment
- Understanding a patient's goals and values has the potential to humanize the relationship and improve decision-making at all levels

References

- [Thoughtful MOLST Discussions](#)
- [8-Step MOLST Protocol](#)
- Using the 8-Step MOLST Protocol [Video Series](#)
- Thoughtful MOLST Discussion: Hospital & Hospice Settings [Video](#) 43:52
- Thoughtful MOLST Discussion: Nursing Home Setting (Residential/Custodial Care) [Video](#) 20:18
- [VitalTalk.org](#) – Vital Talk app available