

Making MOST meaningful with proactive physician visits

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Dr. Valorie Masuda has been working in palliative care for seven years and has helped care for hundreds of people near the end of their lives. Unlike other areas of medical care, palliative care is not about prolonging life and “curing” patients, but about managing a patient’s care to ensure their goals of care are being met as they near death. Dr. Masuda said “I am responsible to make available the tools people can use as they reach the end of their life.”

One of the most effective tools for care teams to use when a patient is palliative is the Medical Orders for Scope of Treatment (MOST). Completed by a physician and patient, the MOST details the medical orders to identify one of six designations for scope of treatment. These designations provide direction on resuscitation status, critical care interventions and medical interventions. More importantly, they ensure that the care being provided is what the patient wants.

Dr. Masuda noticed the lack of completed MOST forms for residents of Cairnsmore Place, a residential facility in Duncan. Without a MOST, there’s a lack of identification of residents entering dying time and lack of understanding their goals of care. Dr. Masuda and her team saw the opportunity to undertake a Physician Quality Improvement project to increase the rate of MOST charts to 100 percent at Cairnsmore Place.

The Physician Quality Improvement initiative is the result of collaboration between Doctors of BC, the Ministry of Health and Island Health. Physicians with quality improvement ideas apply to the program and accepted applications receive one-year of support. This includes quality improvement curriculum delivered in a cohort workshop environment and support from a dedicated team to help their quality improvement project. The projects vary in scope - 2016 cohort projects range from sleep apnea-related heart failure to umbilical cord clamping processes.

Dr. Masuda and her team conducted two surveys; one of residents and one of staff, to determine if residents were discussing their goals of care and if staff were providing treatment that reflected patient’s goals. The team also audited patient charts every three months and encouraged and supported proactive physician visits. After the third quarter of the PQI project, proactive physician visits increased from 30 percent to 82 percent and 97 percent of residents had completed MOST forms.

Physicians interested in PQI should reach out to PQI manager, Carolyn Carlson (PQI@viha.ca 250-331-8626) for more information. Physicians are always encouraged to reach out about potential projects.