Increasing Medical Durable Power of Attorney Documentation During Hospitalizations

Problem
• Acute hospitalizations present an opportunity for documenting a Medical Durable Power of Attorney (MDPOA)
• Advanced Care Planning such as documenting a MDPOA can help improve quality of care and diminish caregiver distress especially at end of life (1,2)
• At this large academic medical center, only 50% of patients discharge with a MDPOA on record
• Despite the benefits of advanced care planning, physicians only bring up MDPOAs limitedly, in one study only 19% of the time prior to a crisis, and only 16% for older hospitalized patients (3).

Aim
• The interventions aimed to improve MDPOA form availability based on provider feedback in the initial problem definition phase that forms were not readily available when needed
• The goal was to increase MDPOA rates by 10% from the baseline of 50% to 60% overall

Methods
• 6 hospitalist teams made up each intervention group
• For each intervention group, those without a MDPOA on file were identified on EPIC and underwent their corresponding intervention

Results
• Both intervention groups showed a shift of the median by 3% for MDPOA enrollment rates post 28 days of intervention
• There was no added benefit from the electronic chat reminder in intervention group 2 with the same median increase as intervention group 1
• There was a shift in the data (7 or more points above the original median (4)) in the MDPOA intervention group
• There was a near-shift (5 points above the median) in the MDPOA and nudge group
• No changes were noted in the “no intervention” group

Conclusions
• The interventions increased MDPOA rates in hospitalized patients by 3%
• An electronic chat reminder had no additional benefit
• 3% of hospitalized patients represents a large number of people that would benefit from this intervention
• Limitations include short duration of interventions (28 days) and language limitation of MDPOA forms to English and Spanish
• Given the ease of implementation, intervention 1 should be widely implemented
• Currently we are engaging palliative care nurse practitioners to train unit clerks to post MDPOA forms for patients’ who lack one

Reference