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M E D I C I N E

Advance Care Planning: More important than ever before

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April 16th – National Healthcare Decisions Day

- NHCDD: encourages patients to express their healthcare wishes & providers to follow them.
- Key goal: normalize advance care planning & demystify healthcare decision-making.
- Emphasizes the process of choosing an agent and the content of the conversation.



Why is COVID different?

Confirmed Cases / Deaths by Age
Washington State, Updated April 4, 2020

Age Group	Percent of Cases	Percent of Deaths
0-19	2%	0%
20-39	27%	1%
40-59	34%	7%
60-79	26%	38%
80+	10%	55%
Unknown	1%	0%

	Case Fatality Rate (CFR)	
Age	China	ITALY (as of March 17 th , 2020)
0-9	0.0%	0%
10-19	0.18%	0%
20-29	0.19%	0%
30-39	0.02%	0.3%
40-49	0.44%	0.4%
50-59	1.3%	1.0%
60-69	3.6%	3.5%
70-79	8.0%	13%
≥80	15%	20%

Why is COVID unique?

- About 15-20% of residents with COVID-19 will die.
- Duration in ICU, duration on ventilator → impact on function?
- 4 Clinical profiles of patients seen: Geri-pal podcast
 1. Indolent, then convalescence
 2. Indolent, then deadly
 3. Acute respiratory failure
 4. Sepsis: altered mental status, hypoxia, hypotension +/- fever
 - [https://www.geripal.org/2020/04/covid-in-long-term-care-podcast-with.html?utm_source=feedburner&utm_medium=email&utm_campaign=Feed:+Geripal+\(GeriPal\)](https://www.geripal.org/2020/04/covid-in-long-term-care-podcast-with.html?utm_source=feedburner&utm_medium=email&utm_campaign=Feed:+Geripal+(GeriPal))
- Potential for resource constraints.
- <https://www.optimistic-care.org/probari/covid-19-resources/>
 - https://www.optimistic-care.org/docs/pdfs/NH_Advance_Care_Planning_During_a_Crisis.pdf
 - [https://www.optimistic-care.org/docs/pdfs/Advance_Care_Planning_and_COVID-19_Education_Sheet_\(002\).pdf](https://www.optimistic-care.org/docs/pdfs/Advance_Care_Planning_and_COVID-19_Education_Sheet_(002).pdf)

Thoughts for community living clients:

- NHCDD: Does your client have a MOLST, living will, healthcare proxy paperwork?
 - Easily accessible?
 - When last reviewed and updated?
- Does the proxy know they have been designated and what the client's wishes are?
 - Have back-up decision makers also been updated & educated
- What are the goals of healthcare treatments? *
- In the setting of COVID 19 illness, should these documents be amended/the proxy have additional information?

A framework for thinking about Goals of Care



Understanding which goal is most important to a resident and/or the family will help them make treatment decisions that reflect these goals.

Hospitalizations & Goals of Care



If the goal is to prolong life, the hospital may be the right place to get the treatments that are only offered in that setting.



If the goals are focused on maintaining function, hospitalization may be appropriate for selective treatments.



If the goals are focused on comfort care, hospitalization should be avoided unless intensive comfort interventions are needed that cannot be provided with available resources in place.

Thoughts for Senior Living/ALF:

- Are MOLST papers completed and easily accessible?
- Are emergency contact numbers and number of healthcare proxy easily accessible?
- Could the Senior Living community consider at NHCDD event?

Thoughts for Skilled settings:

For disaster planning:

- Has every resident had their MOLST and treatment goals reviewed and documented at last care plan conference?
 - ? Re-evaluation of all “full-code” patients → full treatment with limits?
 - ? Re-evaluation of all those with DNR → in the setting of COVID, is “comfort care” more consistent with goals?
- Are these easily available as a list?
 - Versus in each chart?
- Consider palliative care and/or hospice consults if necessary

Resources

- <https://www.optimistic-care.org/probari/covid-19-resources/>
- <https://www.johnahartford.org/dissemination-center/view/national-healthcare-decisions-day-1>
- <https://www.mylivingvoice.com>
- <https://theconversationproject.org/>
- <https://prepareforyourcare.org/welcome>
- <https://mydirectives.com/>

PALLIATIVE CARE

**HAS A PLAN
FOR THAT**

**Hope for the best
Prepare for the rest**

Thank you!
Questions?

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