This is a difficult and scary time because of the coronavirus. We know that it is made worse by the need to be separated from family and friends. I wanted to speak because... [A or B]

A. Covid present: Despite our best efforts, some of our staff/residents tested positive for coronavirus.

B. Covid absent: We are doing our best to prevent infection in our residents and staff but are preparing for the possibility that it may affect our facility.

I’m hoping we can talk about how to provide the best care for you/[resident] if you/he/she became sick. Is that okay?

What have you heard about how the coronavirus might affect your/his/her health?

May I share with you my understanding of how the coronavirus could affect your/[resident]’s health?

Most people in nursing facilities who get the coronavirus get better on their own. But if they become very sick, people who live in nursing facilities are less likely to survive. [Pause, respond to emotion]

I’d like to make sure that we continue to provide you/[resident] with the best care possible. This includes talking about whether or not to send you/him/her to the hospital if you/he/she became very sick. Can I ask some questions to help us think about that?

Tell me about some of the things that are important in your/his/her life.

What are you most worried about right now with the coronavirus?

If you/he/she became very sick due to the coronavirus, how much would you/he/she be willing to go through to try to get better?

Prompt: Some people would want any treatment to survive, even if it was unlikely to work. Others would want to stay here, with treatment focused on comfort, even if they might not survive.

This can be hard to talk about. And, it is so helpful for us to know what matters most for your/[resident]’s care at this time.

I’ve heard you say ____. Keeping this in mind, and given the treatments that we can provide at [facility] I recommend that we... [A or B]

A. Focus on supporting you/[resident] here at [facility]. We will provide treatments to help you/him/her get better and not suffer. If you/[resident] became very sick, we would not send you/him/her to the hospital. We would focus on your/his/her comfort here. Is that ok?

B. Provide as much supportive care as possible here at [facility] but send you/[resident] to the hospital to receive additional treatment, if necessary. We can let the hospital know if there are certain treatments you/he/she would want to avoid. Is that okay?

We will do everything we can to help you/[resident] and your family through this.
COVID-19 Conversation Guide for Long Term Care

CONTEXT AND DESCRIPTION

What? This communication tool assists health professionals in having conversations about values and care preferences with patients who reside in long-term care or other skilled nursing facilities or their caregivers. These conversations can help ensure the highest quality care.

Why? Communication with patients and/or surrogates about Covid-19 presents unique challenges in long-term care or other nursing facilities. If Covid-19 enters a facility, the speed with which it spreads can result in significant fear and distress among residents, surrogates, and staff. Frail nursing home residents are at higher risk of death and disability from Covid-19. Family members experience disconnection from their loved ones and worry about their safety and care. Nursing facility teams face daily challenges: understaffing, infection control, and changing workflows and protocols. Proactive conversations can facilitate shared decision-making and care planning.

Who? The guide is for all health professionals who work in long-term care and other skilled nursing facilities. This conversation is for all residents in long-term care or other nursing facilities who are able to participate and/or family or other caregivers.

Tips for successful use

To prepare for the conversation
- When planning to speak with a caregiver, review the patient chart or examine the patient in advance so you can provide an up-to-date clinical assessment.
- Review the currently available supportive treatments in the facility (e.g. oxygen, fluids, antibiotics) so you have a sense of what is possible to provide there.
- Review the latest facility policies for infection control, visitation, safety, and transfer.
- Consider arranging a video call if possible.

To prepare to use the Conversation Guide
- Watch the demo video of the conversation guide.
- Read the guide aloud slowly.
- When working with interpreters, review plan and guide with the interpreter beforehand to discuss potential challenges.

During the conversation
- Use the exact words on the Conversation Guide to reduce your cognitive load
- Use silence and acknowledge emotions when they arise

After the conversation
- Document what you heard, including information about what is important to patients and their treatment preferences.
- Never struggle alone: Debrief with a colleague for support and self-care.