

COVID-19 Conversation Guide for Outpatient Care



What is the Covid-19 Conversation Guide for Outpatient Care?

- It is a scripted tool to help you elicit healthcare wishes and values of your patients in the context of Covid-19. By eliciting these wishes and values, better healthcare and Goals of Care decisions can be made.
- Additional Alberta specific resources, a video demo, and helpful links are on the second page of the script.

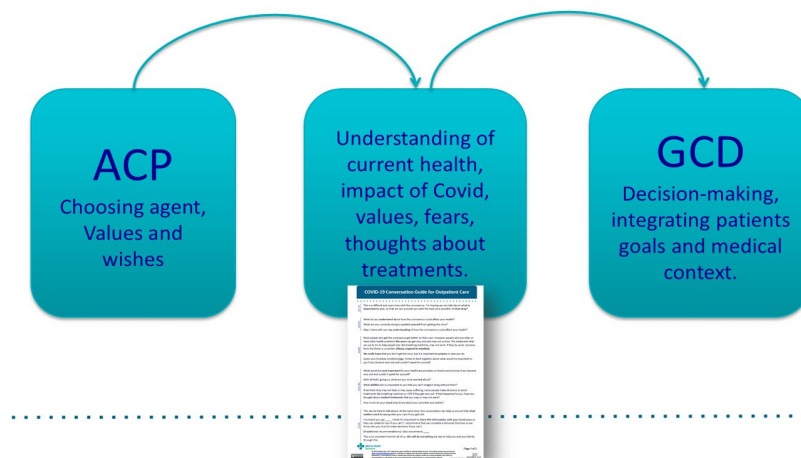
Who should I be having this conversation with?

- Use of this script is designed for your patients in the community who have underlying health conditions that put them at higher risk of critical illness or death from a Covid-19 infection.

When should I be having these conversations?

- Having these conversations in advance of a health crisis or Covid-19 infection is the best way to be prepared for decision making. This is how we can respect our patients' wishes even if they become too ill to speak for themselves.

Where does the Covid-19 Conversation Guide fit?



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SET UP

This is a difficult and scary time with the coronavirus. I'm hoping we can talk about **what is important to you**, so that we can provide you with the best care possible. **Is that okay?**

ASSESS

What do you **understand** about how the coronavirus could affect your health?

What are you currently doing to **protect yourself** from getting the virus?

May I share with you **my understanding** of how the coronavirus could affect your health?

SHARE

Most people who get the coronavirus get better on their own. However, people who are older or have other health problems **like yours** can get very sick and may not survive. The treatments that we use to try to help people live, like breathing machines, may not work. If they do work, recovery from the illness is uncertain. *[Pause, respond to emotion]*.

We really hope that you don't get the virus, but it is important **to prepare** in case you do.

Given your [medical condition]/age, I'd like to think together about what would be important to you if you became very sick and couldn't speak for yourself.

EXPLORE

What would be **most important** for your healthcare providers or loved ones to know if you became very sick and couldn't speak for yourself?

With all that's going on, what are you most **worried** about?

What **abilities** are so important to you that you can't imagine living without them?

If we think they may not help or may cause suffering, some people make decisions to avoid treatments like breathing machines or CPR if they get very sick. If that happened to you, have you thought about **medical treatments** that you may or may not want?

How much do your **loved ones** know about your priorities and wishes?

CLOSE

This can be hard to talk about. At the same time, this conversation can help us ensure that **what matters most to you** guides your care if you get sick.

I've heard you say _____. I think it's important to **share this information with your loved ones** so they can speak for you if you can't. I recommend that we complete a Personal Directive so we know who you trust to make decisions if you can't.

[If additional recommendations] I also recommend _____.

This is an uncertain time for all of us. **We will do everything we can** to help you and your family through this.

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Why? Communicating with patients about serious illness is challenging under the best of circumstances. The COVID-19 pandemic reinforces the need for conversations that enable patients with serious illness or other risk factors to understand the potential impact of COVID-19 on their health, to share their worries, values, and priorities, and to make informed decisions. This tool aims to make it easier for clinicians to have these discussions in a trustworthy and compassionate way during this time of uncertainty and distress.

Who? Patients in the community who have underlying health conditions are at increased risk of critical illness or death from COVID-19 infection. While there is still a lot to learn about this infection, the highest risk patients may include **older adults**, those who are **immunocompromised**, and/or **patients with one or more** of the following underlying conditions:

- Cardiovascular or cerebrovascular disease
- Pulmonary disease
- Advanced cancer
- Chronic renal disease
- Diabetes and hypertension
- Frailty

What? Engage in a conversation with the patient or alternate decision maker to:

1. Discuss [protective measures](#) to prevent infection
2. Share the risk of critical illness due to COVID-19 because of underlying health conditions
3. Understand their priorities, values, and preferences in this context
4. Acknowledge and respond to emotions
5. Make a recommendation about next steps
6. Document the conversation on the ACP/GCD Tracking Record
7. Reiterate your ongoing support to the patient and family
8. Direct patients to www.conversationsmatter.ca for more resources

Where? Ambulatory care via telehealth

When? Early! Ideally at a time when the patient is feeling well. Build this into an existing telehealth visit or schedule a separate telehealth visit for this conversation.

How?

1. Watch the [demo video](#) and review the guide
2. Try the Guide language for the conversation
3. Use silence to allow emotions to be shared
4. Acknowledge emotions with [empathic statements](#)
5. Recommend next steps, such as completing a [Personal Directive](#) or having a [GCD order](#) completed (by a physician or NP). More [COVID-19 communication](#) and [GCD algorithm](#) are available.
6. Don't struggle alone: Debrief with a colleague for support and self-care