

# COVID -19 in a Long Term Care Setting

## COVID-19 IN OLDER ADULTS

- COVID-19 is a viral illness that spreads like the flu.
- We know it is particularly serious in seniors, especially for those who have other medical conditions (such as heart problems, lung problems or dementia). Even those without such conditions can be at risk simply due to their old age and frailty.
- Most of those living in care homes are at an especially high risk of being affected by COVID-19 as well as suffering serious complications, including death.
- Our understanding of these risks comes from information from care homes who have already seen an outbreak.

## FRAILITY

This refers to the increasing weakness and vulnerability in a person as they age and/or their health declines. With time it progresses from mild to severe. How does this relate to COVID-19?

- Being frail makes one more vulnerable to illness and injury and affects the ability to recover from illness.
- As frailty progresses, treatments for issues like COVID-19 become less effective.
- Improving each person's experience of frailty means carefully selecting those medications and treatments that are most likely to improve quality of life.

## YOUR ROLE AS DECISION MAKER

Though some residents are still able to make their own decisions, most care home residents rely on another person – a substitute decision maker – to make decisions in their best interest. The substitute decision maker is a very important person in the resident's circle of care. Their job is to make decisions in keeping with what they believe the person would want in any given situation.

You may have already addressed your family member's "goals of care" with the care home staff, but it is important to review them now to make sure that these goals of care fit with the special situation of the coronavirus outbreak.

## WHAT DOES THIS ALL MEAN?

Over the coming days and weeks, you may be contacted by the healthcare team to make a plan about what to do if your family member contracts COVID-19. Here are some things to keep in mind for that discussion:

- For older adults in a nursing home, the risk of dying from COVID-19 is high – up to 30%.
- If the person is not doing better with extra oxygen, the chance they will survive is much lower.
- For those who may survive, their overall health status will likely be much worse after the infection.
- While some treatments may help, they often come with significant side effects which often outweigh the benefits.

## CONSIDERING THE TREATMENT OPTIONS

- **There is currently no vaccine to avoid COVID-19 and no specific treatment to cure the infection once it occurs.**
- There are three care options to consider:

OPTION	WHAT IS INVOLVED
<p><b>1. Send to hospital</b></p>	<p>The goal is to lengthen life. It is natural to want to send ones loved one to hospital for “more care.” However:</p> <ul style="list-style-type: none"> <li>• More does not always = better for the patient. <ul style="list-style-type: none"> <li>○ For instance, the use of ventilator/breathing machines may improve oxygen levels but usually only temporarily. For most, it will likely prolong the suffering</li> </ul> </li> <li>• Being cared for by strangers in busy environments can be very emotionally and physically distressing, especially for those with dementia.</li> <li>• Hospital staff usually have less time available to provide focused 1-to-1 patient care.</li> </ul>
<p><b>2. Treat at care home with hope to cure</b></p>	<p>This may involve:</p> <ul style="list-style-type: none"> <li>• Fluids, oxygen, antibiotics.</li> <li>• Tests such as chest x-rays, blood work.</li> <li>• Emergency Response Team Visits (to provide ER type treatments such as IV fluids/meds).</li> <li>• If the infection progresses, the care will shift to a focus on comfort rather than transferring to the hospital.</li> </ul>
<p><b>3. Comfort care only</b></p>	<p>This involves treating symptoms to minimize suffering.</p> <ul style="list-style-type: none"> <li>• Relieving breathlessness, pain, anxiety.</li> <li>• Avoiding transfer to the hospital.</li> <li>• Minimizing unnecessary tests, treatments, or hospital transfers.</li> <li>• Aiming to allow family presence at end of life where possible.</li> </ul> <p>Note: At this stage, it is common to worry about your loved one’s dehydration. While a short trial of fluid via “clysis” may be reasonable it can quickly lead to side effects (such as skin swelling and wounds) so should be reassessed every few days to determine it is still helping.</p>

The care your family member receives is a priority. If after reading this, you remain unsure or have further questions, please let us know as it is important for you to feel equipped with the right information so that you can make the most appropriate decisions.

*Together, you and the care team can ensure your loved one receives the best care possible.*