



Best Practice for Hospice Services in Long-Term Care Amidst the Covid-19 Pandemic

Addressing Your Concerns

- How did we respond to COVID-19 pandemic and national emergency?
- Why did Compassus commit to serve COVID-19 patients -when some other healthcare providers don't?
- What are our safety commitments? (What can partners expect?)
- How are our safety outcomes?

Prior to National Emergency Declaration – COVID Incident Command

- Create P&P and tools unique to COVID-19 (immediate and on-going)
- Focus on safety for patient/facility/colleague
- Perform colleague training and competency eval, more than once
- Deploy PPE rapidly - monitor par levels daily, acquire, forecast needs
- Communicate (intentional and frequent) to/from colleagues, patients, partners
- Respond, monitor and track colleague/patient exposures, quarantines, positive outcomes, provide guidance, identify trends & hotspots
- Utilize technology whenever possible – innovate
- Network with national and local groups/leaders

Additional steps...

- Collaborate with partners and support them in the care of COVID-19 patients
- Implement strong virtual platforms
- Support GOC/ACP for all residents
- Establish trauma/emotional support mechanisms to colleagues and partners dealing with loss, fear and stress associated with COVID-19
- Maintain perspective of intentional safety and COVID-19 integration for the long-haul

Why we serve COVID-19 patients...

- Consistent with our higher purpose and our commitment to patients, the community and our partners
- It is a false narrative that not serving COVID patients makes us safer
- What makes us safer is knowing how to provide care safely to all patients and in all environments and diligently practice safety

Safety Commitments

- Screen all colleagues daily regarding s/s and exposures
- Test all direct-care colleagues for COVID as frequently as required to be in step with states and partners
- Query/screen patients for s/s before every visit
- Wear PPE at every visit, consistent with patient condition
- Limit foot traffic in facilities to essential visits
- Notify facilities within 1 calendar day if we identify positive colleague

Communication Commitments

- Give the facts of the situation – staff and colleagues
- Emphasize what we ARE doing – help settle doubt and insecurity
- Words Matter – be realistic to outcomes
- Validate families feelings and expectations – ensure they feel heard
- Listen for the problem/concern and attempt to drown out the background
- Ensure regular contact/touchpoints - Be proactive!
- Return phone calls
- Provide sense of security – we are in control of the situation
- Collaborate - request feedback – shared commitment, offer choices, get them to be a part of the process

How is Compassus doing?

- Performed greater than 250,000 in-person visits in last 6 months
- Company served >1400 patients with terminal COVID-19 infection
- Maintain a long-term commitment to serve COVID patients and the partners who are doing the same

COVID-19 IMPACT

- Difficult to access patients
- COVID specialty wings – separate space to don and doff PPE safely
- 3-phases of patients – very short LOS; improved then decompensated; slow progressive decline
- Long-term suppression in oral intake; continued weight loss; more assistance with feeding
- More focused effort around ACP/GOC
- Caregiver fatigue and burnout – grief support
- Weekly nasopharyngeal swabbing

Where do we go from here?

- Level One Fix: Take care of the immediate problem
- Level Two Fix: Process improvement
- Level Three Fix: Look Beyond to systemic changes
 - Call upon the facility medical leadership to impart change
 - Focus on outcomes (from the lens of the patient not the system)
 - Utilize a process of continuous improvement
 - Support the development of a culture of commitment
 - Rebuild Trust among the community

What other questions do you have?

