

COVID-19 REPORT

As expected, the numbers of confirmed cases of COVID-19 and deaths in long term care increases daily. There are now 14 deaths at Pinecrest Home in Bobcaygeon. Eleven residents have died at the Lynn Valley Care Centre in North Vancouver. There were six new deaths at Seven Oaks in Etobicoke yesterday, bringing their total to eight. Possible reasons for these cluster deaths in LTC include:

- These homes are unlucky. The virus was introduced before current precautions and isolation came fully into effect.
- Insufficient or delayed screening by viral cultures. This is an issue in for the community and not just long term care.
- Infection control is more difficult in smaller, older homes. For example, Pinecrest has residents in four-bed rooms.
- Like influenza and other infectious diseases, the clinical presentation of COVID-19 in the frail elderly is not typical.

Choosing Wisely Canada released nine COVID-19 recommendations yesterday. These recommendations are for clinicians and the public. This evidence-based guidance will help to avail limited health care resources for those that need them the most.

<https://choosingwiselycanada.org/covid-19/>

Don't send frail residents of a nursing home to the hospital, unless their urgent comfort and medical needs cannot be met. "Transfers can lead to risk for elder patients of contracting COVID-19. Furthermore, frail patients risk hospital-acquired infections, medication side effects, lack of sleep, and rapid loss of muscle strength while bedridden. Harms often outweigh benefits. If a transfer is unavoidable, give clear instructions to the hospital of the patient's advance directives for care." The WHO COVID-19 guidance for infection prevention and control (IPC) in LTC recommends restriction for movement or transport of residents, only for essential diagnostic and therapeutic. Avoid transfer to other facilities.

https://apps.who.int/iris/bitstream/handle/10665/331508/WHO-2019-nCoV-IPC_long_term_care-2020.1-eng.pdf

Don't intubate frail elderly patients in the absence of a discussion with family members regarding the patient's advance directives whenever possible. "In the COVID-19 pandemic, these decisions must be made urgently, hopefully based on prior discussions. Frail elderly patients who are sick enough to require intubation for any reason, including COVID-19, have very poor survival outcomes and poor quality of life. Early conversations with patients and families help to prevent rushed decisions or ones that do not reflect patient wishes." Our frail elderly patients may receive unwanted aggressive end-of-life care because there has not been a discussion about their wishes with a physician. There is not a care plan before they become seriously ill.

<https://www.cfn-nce.ca/project/cat2013-18/>

Assure the Best Palliative Care "Respiratory deaths are the worse deaths." Dr. Russell Goldman is the Director of the Tammy Latner Centre for Palliative Care at the Sinai Health System, Toronto. Their consultations to the community include long term care. COVID-19 patients present special challenges for optimal palliative care. For example, using a single sub-cutaneous access with a longer catheter for the patient in isolation. With redeployment staff, providers providing bedside care may be less familiar pain and symptom management. Provide proactive training for staff. Advise and monitor for dose adjustments. Greater supervision and consultation are necessary. Clinicians are encouraged to contact their local palliative care consultants. This is the time to expand use of virtual consultations. Consultations can also be provided through OTN. Dr. Goldman and his palliative care consultants can be contacted through the Mount Sinai switchboard, 519-586-5133. Identify yourself as a physician seeking the palliative care consultation service.

See yesterday's Report for the details of the COVID-19 SURVEY. As a provider in long term care, you are invited to complete the survey. The purpose of this study is to assess the perception of LTC clinicians about their LTC home's awareness and readiness in responding to COVID19. This survey is anonymous, unpaid, and should take you 10 minutes to complete. By following the link below to completing and submitting your responses, you will have indicated your implied consent to participate in this study. Only complete the survey once.

<https://surveys.mcmaster.ca/limesurvey/index.php/168726?lang=en>