PUBLIC HEALTH ADVISORY

Recommendations Regarding Hospice Referrals for Long-Term Care Facility Residents with Serious or Multiple Medical Conditions

September 18, 2020

Background

In Marin County, three out of every four deaths related to COVID-19 are among residents of long-term care facilities. The mortality rate among facility residents infected with SARS-CoV-2 in Marin County residents is over fifteen percent. Outbreak prevention, early intervention, and appropriate management of infected residents is vital. So too is anticipating the need for end-of-life care. On August 18th, Marin County Public Health issued a Public Health Advisory that aimed to improve medical oversight and care planning in long-term care facilities. This recommendation is designed to ensure timely response to the medical and social needs of SARS-CoV-2 infected long-term care facility residents.

Recommendation

Medical Directors and administrators in skilled nursing facilities and residential care settings (Residental Care Facilities for the Elderly, Intermediate Care Facilities and similar settings) should recognize the urgent need for discussing, reviewing and documenting the goals of care for individual residents who are at increased risk for serious illness or death due to COVID-19.

Residents of long-term care settings who are at increased risk for poor outcomes in the setting of SARS-CoV-2 infection, are to have their goals of care clarified and documented so that their preferences can be clearly understood. The benefits of hospice services and palliative care should be explained to the resident and the decision-maker or the individual who holds the Durable Power of Attorney for Healthcare. These discussions should be held in advance of any health crisis. Information about and access to hospice services should be available to individuals who may need or wish to inquire about these services.

When such individuals are diagnosed with COVID-19 disease, residents and/or their decision-makers or family members (when individual residents lack decision-making capacity) should have a medical evaluation within 24 hours of diagnosis. The review of resident goals of care should be done by the resident’s primary care provider (PCP) and should include appropriate documentation according to current
best practices. The review can be done by qualified providers other than the PCP when the PCP or medical director of a facility is not available for that purpose.

For residents who lack medical decision-making capacity and who are newly diagnosed with COVID-19 disease:

If the family member or decision-maker for a resident who lacks capacity expresses a desire to have an informational conversation about hospice and the PCP or covering physician is not available or cannot be reached within 24 hours, the decision-maker will be referred to a hospice provider for more information. At that time, if the patient is determined to be hospice eligible, and the decision-maker wishes to proceed with a hospice referral, and a referral to hospice is in line with the patient’s goals of care, then the request will be sent to Marin County Public Health for chart review and a physician order for hospice.