Residential Aged Care Facility (RACF):

_____

Date Commenced: _____

Date Reviewed: _____

RACF Palliative Care Lead (PCL): _____

Contact Details for Your Palliative Care Supports and Services:

_____

_____

_____

_____

_____

_____

Palliative Care Preparedness Checklist for COVID-19
Residential Aged Care Facilities

PalliativeCare
QUEENSLAND
PALLIATIVECAREQLD.ORG.AU

Palliative Care Queensland is the peak body and leading charity for palliative care in Queensland. This checklist was developed to support Residential Aged Care Facilities (RACFs) to embed palliative care into COVID-19 outbreak and management planning.

Background

Palliative Care Queensland (PCQ) is aware that while much of the focus of the pandemic is on prevention, curative treatments and planning, it is essential not to forget that dying, death and grief are also outcomes of this pandemic. During the pandemic, residents in Residential Aged Care Facilities may die from COVID-19, however, there will also be residents that die during the pandemic for non-COVID-19 reasons. The important point is that people are dying when their facility and the health, social and community systems around them are not operating as they usually do. Palliative care must be embedded into all pandemic planning to ensure that a good death is also possible during a pandemic.

Palliative Care Queensland recommends that all Queensland RACFs plan for:

- The palliative care needs of COVID-19 positive residents who are in their last days, weeks and months of life; generally, during the pandemic and in the event of a facility outbreak

- The palliative care needs of COVID-19 positive residents who, where indicated and in accordance with public health advice, remain in the facility (COVID-19 Outbreak Management Guidance for Transfer of residents of aged care facilities in the event of a COVID-19 outbreak)

The checklist items are a guide only and should be considered in a Public Health context and in conjunction with local facility outbreak management plans.

Useful resources to support planning include:

- Queensland Public Health Directions

- Queensland Health Aged Care Directions and Commonwealth updates

- Queensland Health's Checklist for RACF preparation for COVID-19 prevention and outbreak management (includes links to important infection control and aged care guidelines)

- Principles of Palliative Care for Residents of Residential Aged Care During COVID-19

- Guidance for persons in quarantine visiting residents receiving end-of-life care

This checklist has been developed based on lessons learnt internationally, nationally and locally during the COVID-19 pandemic. As with best practice, we recommend beginning palliative care discussions with residents and their families if the answer is *'no'* to the *'surprise question[1]'* – *"Would I be surprised if this resident died in the next 12 months?"*

PCQ believes in continuous improvement – if you have any feedback or suggestions for improving this checklist, please email them to: covid19@palliativecareqld.org.au

PCQ would like to thank everyone involved in the development of this checklist, particularly the Gold Coast Specialist Palliative Care Services team, the Palliative Care Response to COVID-19 Working Group and Queensland Health.

---

[1] The surprise question: would I be surprised if this resident died in the next 12 months? (Pallipedia.org)

Checklist for your *Organisational-wide pandemic planning team*

☐ Review your existing individual organisational outbreak management plan and identify where palliative care has or has not been included

☐ Identify opportunities to embed palliative care strategies (i.e., all elements of holistic care - physical, social, emotional and spiritual) into the existing organisational outbreak management plan

☐ Ensuring that you follow your individual organisational outbreak management plan, advice from your local Public Health Unit and Public Health Directions, plan for how a family may connect with the resident on 'compassionate grounds' during an outbreak. For example: consider residents' room access in an outbreak and if a family could access their room directly via a verandah

☐ Identify a *"pandemic palliative care lead"*[2] (PCL) within your team, to take the lead on liaising with specialist teams and families in relation to palliative care and ensure palliative care remains a priority in the organisational outbreak management plan

☐ Noting that the PCL will not always be rostered on, ensure that all staff are upskilled and provided with the support necessary to meet the palliative care needs of residents. For example, undertaking mock training activities in relation to palliative care[3]. Further staff education/information is available at the ELDAC "Being Prepared for COVID-19", Centre for Palliative Care Research and Education (CPCRE) and PalliAged sites

☐ Identify staff who have a special interest or training in palliative care and consider including development/mentoring opportunities and or specific activities in your Workforce Management Plan that support staff who may not have the same level of experience/knowledge

Checklist for your *RACF Pandemic Palliative Care Lead (PCL)*

☐ PCL to coordinate and action the planning tasks in this checklist in conjunction with the RACF Manager

☐ PCL to organise a team meeting to action the RACF team planning for palliative care checklist items

☐ Review available linkages with local specialist palliative care teams who can review the palliative care needs of residents on a daily (or near-daily) basis, as required

It is recommended that the relationship be strengthened now between specialist palliative care services and your facility's clinical/allied health staff and any geriatric support services so that all teams can come together quickly in a crisis.

- If you are unaware of your local specialist palliative care team, contact **PalAssist** 1800 772 273

- If you are unable to contact a local team, utilise the **PallConsult phone line**
  (Nurses and allied health should call 1300 PALLCR or 1300 725 527; GPs and NPs should call 1300 PALLDR or 1300 725 537 for advice

☐ Ensure your local specialist palliative care team and PallConsult phone numbers are easy to source in a crisis

☐ Ensure your RACF PCL has contacted your local specialist palliative care team and GPs with a special interest in palliative care to ensure they have each other's contact details and the opportunity to discuss additional planning items – including early identification of potentially complex cases

---

[2] Palliative care Lead (PCL) (Palliative Care Queensland)

[3] Email hello@palliativecareqld.org.au to request mock palliative care case studies for pandemics

Key items we recommend discussing:

☐ **Supports:** Confirm with GPs and specialist palliative care services what medical support will be available when needed - they may be able to offer in person or remote (Telehealth or other technologies) support for the RACF. Confirm what technical platforms would be required. Confirm with GPs what level of support they will be able to provide and their availability. Ensure after hours contact details are recorded and easily accessed by staff 24/7

☐ **Avoiding unnecessary transfers:** Discuss your RACF palliative care processes with the aim to avoid unnecessary/inappropriate Emergency Department and hospital transfers for residents with palliative care needs. Consider how this might differ during an outbreak, acknowledging that directions from the Public Health Unit will need to be followed and there may be infection control or other public health considerations

☐ **Pharmacy:** Identify supports that the specialist palliative care team and GP may be able to provide in relation to rapid access to pharmacy prescriptions

☐ **Equipment:** Identify supports that the specialist palliative care team and GP may be able to provide in relation to equipment

☐ **Personal Protective Equipment (PPE):** Additional PPE may be required to facilitate visits

☐ **Individualised care planning:** Identify supports that can support the RACF staff to identify individual care needs during an outbreak and create individualised care plans for palliative residents

☐ **Spiritual Care Services:** Ensure contact lists of faith and religious providers and/or of available spiritual carers/chaplains are up to date

Checklist for your *RACF Care Team*

☐ **Clinical linkages:** Discuss your RACF linkages to PHNs, RaSS services, GEDI/geriatric services, and public health and what may be different for people with palliative needs

☐ **PHN Pathways:** Discuss with PHN if they have any specific palliative care pathways that may be useful for your planning activities. Clinical Excellence Queensland has clinical pathways

☐ **Visiting Policies:** Review plans to ensure the RACF visiting policy reflects the COVID-19 risk in the community and Public Health Directions and compassionate grounds processes are included in this planning

☐ **Communication with families:** Discuss your RACF plans for communicating with families about residents' palliative needs (at the beginning of the outbreak/disaster, as the outbreak continues, and as a resident's needs change). Virtual meetings for family updates may be helpful; these can involve GPs/Palliative Care Doctors, RACF staff and family. Consider the use of additional telecommunications for face-to-face contact such as Skype, Microsoft Teams/use of an IPad or laptop. PCQ recommends including the role of a "compassionate connector"[4] in your outbreak management plan

☐ **Communication with other residents:** Discuss your RACF plans for communicating with residents (and their families) about other residents' palliative needs and what information is communicated and how when someone has died[5]

☐ **Care for the carers:** Carers often play a key role in caring for the residents. Discuss your RACF plans for including them in providing palliative needs and/or enabling them to stay connected to the residents particularly during the last days and weeks (both in an outbreak and generally)

---

[4] A **compassionate connector** is a role (voluntary or paid) that is tasked to connect residents with their family during outbreaks. They can read letters/emails to the residents, organise and support them to have a video/teleconference or relocate the resident to their windows so they can connect with family through the glass. The compassionate connector role provides specific focus on the resident and ensures family have access to their loved ones, which enables staff to focus on care needs

[5] We recognise that this is different in all RACF's and encourage continuing existing systems, however, to consider that due to social distancing and outbreaks residents (and their families) may not see noticeboards and other usual communication techniques

☐ **Cultural and inclusive care:** Discuss your RACF plans for enabling individualised care for residents with palliative needs, particularly in relation to cultural needs

☐ **Spiritual care:** Discuss your RACF plans for ongoing access to spiritual care for residents during an outbreak, including up to date contact lists of Faith & Religious Providers and/or of available Spiritual Carers/Chaplains. Confirm their availability for onsite/telehealth visits, end-of-life rites, funeral and support services for carers and families

☐ **Pharmacy:** Discuss your RACF pharmacy supplies policy and procedure processes to ensure rapid palliative medication access

☐ **Equipment:** Discuss device and equipment needs - including syringe drivers and particularly infection control guidelines for these devices and equipment. Consider auditing what equipment is available to support non-pharmacological management of palliative residents and assist in individualised care planning (e.g. fans for dyspnoeic patients)

☐ **Advance Care Planning:** Review all residents EPOA/AHD/SOC/ARP[6] and discuss appropriate goals of care

- It is important to have these conversations prior to a crisis, as each conversation takes time and requires great sensitivity

- Please review each resident's EPOA/AHD/SOC/ARP as soon as you can (in a widespread crisis, your team is unlikely to have the time to have these lengthy conversations)

- Contact your Queensland Health's Office of Advance Care Planning for advice and resources

  o Ensure QCAT Orders/SOC/ARP are up to date and are in place for residents under guardianship

  o Ensure the EPOA/AHD/SOC/ARP are easy to access, and goals of care are reflected in the resident's care plan

  o Ensure clear discussions have occurred with key decision-makers regarding the decisions within the EPOA/AHD/SOC/ARP so they understand how this may be interpreted during an outbreak and document these discussions

  o Download the Compassionate Conversations tool by Queensland Health, for guidance on how to break bad news compassionately

  o Discuss within your team how your facility enables open and safe discussions about what is important to residents in relation to palliative needs

☐ **Additional supports for staff:** Review plans and identify staff supports to help staff who may experience distress or trauma when their residents are dying and/or not being provided with optimal care because of the crisis

☐ **Self-Care for staff:** Ensure staff have access to self-care resources and support. Consider linkage to Palliative Care Australia's Self-Care Matters Aged Care Toolkit and encourage staff to complete the self-care plan and where available to Spiritual Care Services (either onsite/offsite or via 'telehealth')

☐ **Bereavement care:**

  o Discuss your RACF plans for ongoing access to bereavement care for residents during an outbreak

  o Discuss your RACF plan for communicating grief issues with families

  o Discuss your RACF plans for how you support staff who are bereaved

  o Download Palliative Care and COVID-19: Grief, Bereavement and Mental Health

☐ **After death care:**

  o Review your RACF policy and procedures for care of the body after death, including to ensure it meets infection control guidelines and liaising with funeral directors and families

  o Consider individual facility rituals and ensure that staff are aware of the importance of maintaining them where possible i.e. placing a photo of the deceased resident and a message in the entrance in consultation with the family of the deceased

RECOMMENDED WEBSITES

SERVICE	CONTACT DETAILS
Planning Resources	**COVID-19 Outbreak Management Guidance for Transfer of residents of aged care facilities in the event of a COVID-19 outbreak** www.health.qld.gov.au/__data/assets/pdf_file/0031/1006879/racf-resident-relocation-covid-outbreak.pdf
	Queensland Public Health Directions www.health.qld.gov.au/system-governance/legislation/cho-public-health-directions-under-expanded-public-health-act-powers
	Queensland Health Aged Care Directions www.health.qld.gov.au/system-governance/legislation/cho-public-health-directions-under-expanded-public-health-act-powers/aged-care
	Commonwealth updates www.health.gov.au
	Queensland Health's Checklist for RACF preparation for COVID-19 prevention and outbreak management www.clinicalexcellence.qld.gov.au/sites/default/files/docs/improvement/racf-covid-19-preparation-checklist.pdf
	Principles of Palliative Care for Residents of Residential Aged Care During COVID-19 www.health.qld.gov.au/__data/assets/pdf_file/0021/1011594/principles-of-palliative-care-racf.pdf
	Guidance for persons in quarantine visiting residents receiving end-of-life care www.health.qld.gov.au/__data/assets/pdf_file/0016/1014280/eol-visits-facilities.pdf
Resources for Organisational-wide pandemic planning team	**Public Health Directions** www.health.qld.gov.au/system-governance/legislation/cho-public-health-directions-under-expanded-public-health-act-powers/aged-care
	ELDAC "Being Prepared for COVID-19" www.eldac.com.au/tabid/5953/Default.aspx
	Centre for Palliative Care Research and Education (CPCRE) www.health.qld.gov.au/cpcre
	PalliAged www.palliaged.com.au
Resources for RACF Care Team	**Clinical Excellence Queensland clinical pathways** www.clinicalexcellence.qld.gov.au/resources/clinical-pathways
	My Care, My Choices Advance Care Planning www.mycaremychoice.com.au
	Compassionate Conversations tool by Queensland Health www.clinicalexcellence.qld.gov.au/priority-areas/service-improvement/improving-care-end-life-queensland/resources/compassionate
	Palliative Care Australia's Self-Care Matters Aged Care Toolkit www.palliativecare.org.au/resources/self-care-matters-aged-care
	Palliative Care and COVID-19: Grief, Bereavement and Mental Health www.palliativecare.org.au/palliative-care-and-covid-19-grief-bereavement-and-mental-health

PalliativeCare
QUEENSLAND
PALLIATIVECAREQLD.ORG.AU