

Care Plan for Residents with COVID -19 or Suspected COVID -19

Use this care plan for all residents with suspected or confirmed COVID-19.

Supportive care improves comfort and outcomes for people with COVID-19. Regular huddles to discuss care needs improve communication, alerts staff to current status, provide guidance for staff, and improves outcomes for residents and quality of care. Follow IPAC/ CLEAR team recommendations regarding use of PPE and hygiene practices. <http://ipac.vch.ca/>

Need		Interventions – Check all that Apply
Communication and Serious Illness Conversation	<input type="checkbox"/>	<ul style="list-style-type: none"> • Inform residents and family members of COVID-19 outbreak, measures being implemented and available support. • Discuss with MRP - Update Goals of Care, MOST as per discussion with resident / family • Align care plan with Goals of Care / MOST • Review goals of care on change of condition
Vital Signs Respiratory Assessment	<input type="checkbox"/>	<ul style="list-style-type: none"> • Monitor Temp, BP, Pulse • Perform Respiratory assessment: Resp Rate, Oxygen Saturations, auscultate lung, observe for accessory muscle use, cyanosis. If respirations are rapid, shallow or using accessory muscles this signifies respiratory distress report to MRP to discuss initiation of oxygen therapy¹ and / or Respiratory Distress orders if SaO₂ to maintain SaO₂ > 90% and alleviate respiratory distress. Note: if oxygen requirements exceed 6LPM this is considered an Aerosol Generating Procedure – contact CLEAR team for guidance • Position to minimise respiratory effort e.g. elevate head of bed, high Fowler’s position • Promote respiratory hygiene and deep breathing exercises • Initiate Oxygen therapy as ordered. • Administer medications as prescribed and report response to MRP • If on nebulised therapy, discuss switch to Metered Dose Inhaler with a spacer device with MRP
Symptoms	<input type="checkbox"/>	<ul style="list-style-type: none"> • Assess for worsening COVID-19 signs and symptoms and initiate interventions to manage symptoms See Page 3
Hydration / Nutrition	<input type="checkbox"/>	<ul style="list-style-type: none"> • Monitor fluid intake, offer fluids regularly. Discuss with interdisciplinary team if intake inadequate and adjust care plan. Hydration Decision Support Tool http://shop.healthcarebc.ca/vch/VCHDSTs/D-00-07-30040.pdf • Monitor for signs of dehydration. Consider short term hypodermoclysis ONLY if hydration not maintained orally

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		<p>and this aligns with the resident’s goals of care (Hypodermoclysis Decision Support Tool: http://shop.healthcarebc.ca/vch/VCHDSTs/D-00-07-30041.pdf)</p> <p>Video Demonstration – Hypodermoclysis https://youtu.be/wFDKbT8PE2k</p> <p>Video Demonstration – Pumpette 2 https://youtu.be/6b-1sbFzYvA</p> <ul style="list-style-type: none"> • Support independence with meals as much as possible - MealtimeGuide
Mobility and Skin Care	<input type="checkbox"/>	<ul style="list-style-type: none"> • Assess skin for pressure injury at least each shift. If resident unable to self-reposition implement repositioning schedule q 2hourly. Consider OT/ PT consult to maintain mobility and safe positioning • For pressure injury prevention tips See –https://www.clwk.ca/buddydrive/file/qrg-pip-for-individuals-with-covid-ard-2020-june-final/ • Consider pressure redistribution mattress surface. For clinical decision support on choosing mattress surfaces: https://www.clwk.ca/buddydrive/file/bc-provincial-support-surface-selection-algorithm-2020-february/ • Use Mepilex Border Sacrum for prevention of shearing skin injury if unable to get out of bed or reposition independently. (Must not be used on skin that is already broken, select appropriate dressing as indicated by assessment). • https://www.clwk.ca/buddydrive/file/mepilex-border-for-pressure-injury-prevention/ (to view VIDEO Top Left Corner of document use google chrome) • Balance activity and rest. Where able encourage / assist resident to walk within room
Responsive expressions / behaviours	<input type="checkbox"/>	<ul style="list-style-type: none"> • Observe for signs of delirium if present report to MRP and follow Delirium Decision Support Tool • Track behavioural changes, determine underlying causes and risks. Implement interventions to support resident. Refer to Interdisciplinary Long Term Care Team (iLTC) Vancouver Coastal Health for additional guidance on interventions • Consider consultation with Interdisciplinary Long-Term Care team (iLTC)
Psychosocial	<input type="checkbox"/>	<ul style="list-style-type: none"> • Allow extra time when providing care • Use communication and observation skills to listen and validate verbal and non-verbal expressions of fear / worry. • Consider use of technology to enable resident to stay connected with loved ones / spiritual care
Mouth Care	<input type="checkbox"/>	<ul style="list-style-type: none"> • Regular mouth care maintained to prevent pneumonia -Mouth Care Decision Support tool http://shop.healthcarebc.ca/PHCVCHDSTs/BD-00-07-40041.pdf

Need		Interventions – Check all that Apply
End of Life Care	<input type="checkbox"/>	<ul style="list-style-type: none"> • Discuss resident condition with MRP and initiate Comfort measures /terminal care orders as needed • Assessing resident and family understanding about death and dying and determine support needs • Consider how to engage family / loved ones in maintaining connection with the resident • Consider palliative nurse consult for additional support

COVID-19 Signs and Symptoms	
<p>Adults and some Older adults over age 75 will display typical S&S:</p> <ul style="list-style-type: none"> • Fever, new or worsening cough, shortness of breath • Anorexia, diarrhea, abdominal pain, • Loss of sense of smell and taste, • Nausea /vomiting 	<p>Many older adults present with atypical S&S:</p> <ul style="list-style-type: none"> • Delirium • Low grade fever (>37.5°C or an increase of >1.5°C from baseline) • Increased frequency of falls • generalized weakness • malaise • functional decline • dizziness • headache • conjunctivitis • runny nose / nasal congestion • chest pain • increased sputum production +/- hemoptysis

Additional Resources

1. Oxygen Therapy : <http://www.bccdc.ca/Health-Professionals-Site/Documents/Clinical-Decision-Pathway-LTC-Residents.pdf>
2. Potential Treatment Options: <http://www.vch.ca/Documents/CTC-Antimicrobial-and-immunomodulatory-therapy-in-adult-patients-with-covid-19.pdf>