Supportive Care for Nursing Facility Residents during COVID-19: Special Considerations

What is COVID-19 and how does it affect nursing facility residents?

COVID-19 is a respiratory virus. Symptoms include fever, cough, shortness of breath, fatigue, and sometimes gastrointestinal symptoms such as decreased appetite, nausea, vomiting, and diarrhea. Recent studies also report that some people have a diminished sense of taste and smell. Some residents who test positive for COVID-19 will be asymptomatic. Many others with COVID-19 will experience distressing symptoms but will survive with supportive care. Unfortunately, there are also residents with COVID-19 who will become severely ill and die. Residents who are the frailest and/or who have advanced chronic health conditions will have an even higher mortality regardless of the treatment they receive.

Proactive planning and supporting residents’ and families’ decisions

Code status and other treatment preferences can be difficult decisions for residents and families to make under the best of circumstances. Decisions about hospitalization, including life support measures in the ICU, become even more complex in the realm of the COVID-19 outbreak. All residents/families should have the opportunity to discuss and/or review treatment preferences and code status with an emphasis on providing accurate COVID-19 information in a thoughtful and caring manner.

Personal, cultural and religious beliefs often influence medical decisions and these values should be respected by facility staff. It is possible that additional discussions between residents/surrogates and their physician will be needed if resources become scarce. For example, if there are too few ventilators available for the number of hospitalized patients who need them.

Documenting treatment preferences

Ensure treatment preferences are documented on appropriate forms (i.e. POST), and communicated to the provider and care team. Residents with decision making capacity can sign their own POST form, but we encourage the surrogate to participate in the advance care planning (ACP) discussion via telephone. Obtaining signatures from surrogates can be challenging during this time of visitor restrictions. Signatures from family members who may not be able to come to the facility will involve more planning. Using an electronic version of a form, fax or mail service may be required. In the event a signature is delayed on advance directive forms, charting a note about the delay in obtaining signatures and the conversation with specifics of resident decisions is of highest importance.

Transfers to hospital

If COVID-19 is suspected or confirmed on a resident who needs to be transferred to the hospital, inform EMS and include this information when calling report to the hospital. Describe current symptoms to EMS and hospital. Send copy of POST form and/or any medical orders regarding advance directives, code status, hospitalization, treatment preferences, intubation, etc. Include the names and contact information of at least two family members for the resident if possible. Place a face mask on the resident during transport.

Symptom management for COVID-19 residents

Full assessments on COVID-19 positive residents are needed to identify sources of physical discomfort and/or anxiety. Sources might include physical pain, hypoxia, respiratory distress,
incontinence, nausea, vomiting, constipation, full bladder, positioning, wounds, hunger, thirst, loneliness, and spiritual distress. Symptomatic COVID-19 residents might require more robust interventions than are typically not used in nursing facilities. A helpful tool for managing symptoms can be accessed at https://www.optimistic-care.org/docs/pdfs/COVID_symptom_treatment_in_NHs_4-5-20.pdf. Prepare ahead of time by sharing this tool with providers. Medications should be readily available in the Pyxis and EDK because respiratory distress, pain, and agitation can occur rapidly with little forewarning. If residents have an urgent need for a controlled substance to manage symptoms, there will not be time to wait on a pharmacy delivery. Anticipating needs is essential.

**COVID-19 risks to staff**

The most important part of decreasing your risk of becoming infected with COVID-19 is to wear the appropriate PPE, putting it on and taking it off with care and frequent hand washing.

Aerosolization creates small droplets that can carry the virus to another person through the air. Aerosolization increases the risk of spreading COVID-19. Specific procedures/treatments that can cause aerosolization include CPR, CPAP, BIPAP, nebulizer therapy, suctioning of the airway, and manual ventilation. If possible, avoid aerosolizing procedures. These procedures require an N95 respirator and goggles in addition to a gown and gloves.

Performing CPR creates significant risk of contracting COVID-19 and additional precautions are needed. Proper donning of PPE is required BEFORE initiating CPR. It is also recommended to cover the patient’s body and head with a sheet. Ensure door to resident’s room is closed during resuscitation attempt. Move other residents away from the room and hallway.

We still have much to learn about COVID-19 but the supportive care you provide can relieve distressing symptoms, and it will be meaningful to your residents and their families.

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**References**

