

# **GUIDELINES FOR END OF LIFE CARE IN THE HOME DURING THE PANDEMIC**

## **BY AVENIDAS CARE FORUM**

To address some of the challenges of the present time, Avenidas of Palo Alto is providing guidelines from our Care Forum experts.

Dr. Ellen Brown, a pioneer in developing the role of the hospice physician in the Bay area has provided care in the home to thousands of hospice patients in her 20 years at Pathways Hospice. She has trained countless Stanford Palliative Medicine and Geriatrics fellows. [www.ellenbrownmd.com](http://www.ellenbrownmd.com).

### **IMPORTANT TIPS**

- 1. Hold online family meetings: it is important to let your loved ones and your designated decision-makers know your values and wishes about treatment options should you develop the coronavirus 19. These conversations may be hard to get started. If you need tips on how to start the conversation, check out the coalition for compassionate care of California website at [coalitionccc.org](http://coalitionccc.org). They have a COVID Communications Toolbox to help with decision making.**
- 2. Keep your physicians informed of critical changes in your health care.**
- 3. Have your POLST- (Physician's Orders for Life Saving Treatment) posted on your refrigerator. If you do not have a POLST, discuss with your primary care provider how best to get one completed.**
- 4. If you wish to have either palliative care or home hospice care notify your physician of these requests. They can order an evaluation for these services in the home. Hospice care is for when someone is in their final months, weeks or days of life and is choosing comfort care and to remain home. Palliative care can be provided at any stage of an illness and provides supportive care to you and your loved ones.**
- 5. Home care agencies are providing professional full -time caregiving in the home which is a private pay service. These caregivers work in support of palliative and home hospice care but are not medical providers and they are not part of the palliative care and home hospice team.**

6. Home hospice and palliative care teams visit in the home to provide medication monitoring, check vitals and provide interim support. They do not stay for hours at a time in the home with patients. The hospice team can provide telephone triage support 24/7 to avoid having to make a trip to the emergency room. Both hospice and palliative care teams ensure that the necessary comfort medications are available in the home should you decide to remain at home and not be hospitalized.

7. There are medications for shortness of breath, pain, nausea, anxiety, etc. that can be ordered and monitored by nurses from the hospice or palliative care teams. If equipment is also needed for comfort, it can be ordered. Oxygen can also be ordered in the home if needed for comfort while on hospice. Medicare has requirements for oxygen in the home if you are not on hospice.

**CONTACT INFO**

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**Services available: Help with facilitating end of life conversations, preparing for end of life, medical questions and support at end of life**