

The University of California San Francisco Palliative Care Program
San Francisco, CA

Program includes - Inpatient, Outpatient, and Home-based Programs

Current COVID Status – Preparing for the Surge

Preparation for COVID-19

- System-wide
- At Level 2 - to address the shortage of PPE, minimizing in person visits for patients with COVID 19 that is recognized by all the teams.

Community Support for Care of COVID+ Patient

- Able to transfer palliative care patients to some hospice and home health agencies
- LTC is scare due to exposure of residents from people entering or returning to a site
- Challenges to locate in-home custodial caregivers for patients, as well as placements in facilities

Role of Palliative Care

- Part of leadership committees designing COVID response
- Providing support to critical care teams
- Educating clinician colleagues about primary palliative care (ED, ICU, Primary Care, Oncology, Respiratory Screening Clinics)
- Educating clinician colleagues about advance care planning and goals of care conversations

Clinical Role

Advance Care Planning

Creating a process to streamline ACP conversations

- Creation of special place in information platform with universal access

Clinical Partners

Real-time consultants

- Routine consults for COVID + patients in the ICU
- Daily check-in with teams in the special Respiratory Inpatient Unit (RIU) for COVID+ patients
- Urgent outpatient palliative care consults for COVID + patients to address goals of care
- Developing communication strategies with ED team
- Disseminating CAPC Symptom Guidelines and Valtalk resources.
- Available 24-7 to colleagues for consultation about communication (advance care planning, goals of care conversations), symptom management, hospice referrals.

Telehealth

All patient visits (home, clinic, and inpatient) have been converted to video visits in all specialties

- Usual outpatient palliative care patients seen by video visits.
- Visiting patients with COVID to address goals of care, symptom management, offer support, and help arrange caregiving plans
 - Participating in staffing of Respiratory Screening Clinics
 - Staffing care for inpatients with respiratory symptoms potentially related to COVID
 - Providing urgent outpatient palliative care consults to help clarify goals of care for outpatients with suspected COVID

Use of Interdisciplinary Team

All disciplines being used

- CNS as liaison to various floors
- Chaplain and SW doing work by telehealth
- Additional fellows will be diverted to needed areas, if there is a surge.

Observations

Palliative care census lower with COVID

- Referring partners are currently focused on COVID response, but preparing for a surge.

Advice to Prepare for COVID

1. Learn from others' experience

2. Inpatient lessons learned

- Be as strict as possible with visitors.
- Be strict with rules of PPE early.

3. Video visits

- Make sure there is a system in place to do video visits
 - Ensure right equipment (device, camera, and platform (i.e. Zoom))

4. Teamwork

- Continue to support each other – have regular meetings and provide consistent information.
- Find time for team self-care
- Get regular updates from leadership.

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Consolidated, edited and condensed by C Dahlin from interviews with Kara Bischoff MD, Associate Division Chief for Outpatient Palliative Care and Giovani Elia MD Associate Division Chief for Inpatient Palliative Care at UCSF.