

The Australian and New Zealand Society of Palliative Medicine (ANZSPM) offers guidance on [solutions to supply and access issues for palliative care medication during COVID-19.](#)¹

Residential Aged Care: Palliative Care Resources and Planning during COVID-19

COVID-19 Symptoms and Timeframes

[Symptoms will usually appear approximately 8-16 days](#)³ post infection. [ANZSPM's resource on further symptom management](#)⁴ outlines the common symptoms as:

- **Respiratory:** Breathlessness, cough and respiratory secretions
- **Neurological:** Anxiety and delirium
- **Gastrointestinal:** Diarrhoea, nausea and vomiting

In addition, older people may present with [other symptoms](#)⁵ such as fatigue, reduced alertness, decreased mobility, loss of appetite and absence of fever. Clinical deterioration indicating progression to severe disease can begin [between 5 to 8 days](#)³ after symptoms are apparent.

Specific COVID-19 advice for people in aged care facilities is available on the [Department of Health website.](#)²

Advance Care Planning

Knowledge of a person's care preferences is fundamental to quality palliative care provision. Proactively documenting the values, goals and treatment preferences of older Australians through [Advance Care Planning](#)⁶ is an integral part of COVID-19 care and management.

Clinical Management Guidelines

Planning of holistic and person-centred care and the prudent use of resources and equipment is particularly important during COVID-19; such as [how](#)⁷ and [when](#)⁸ to wear Personal Protective Equipment (PPE).

Social distancing measures and issues around the supply of PPE have necessitated the use of [telehealth consultations](#)⁹ and this is being supported by [temporary Medicare items](#)¹⁰ that can be used in the residential aged care setting.

[Clinical flowcharts](#)¹¹ are available for assessment of suspected COVID-19 and to guide the management of COVID-19 cases ranging from mild to critical. In addition to personal preference, care decisions will need to be made according to the availability of medications, PPE and respiratory support equipment. ANZSPM provides guidance for [further symptom management](#)⁴ in palliative care.

Use assessment tools, such as [SPICT](#)TM¹² to recognise which residents may deteriorate rapidly, identify symptoms, score their severity and monitor the effect of treatment.

Guides to communicating¹³ and explaining difficult information and decisions should be available to all clinical and care staff.

A factsheet on restricted visits for residential aged care, including palliative care, is available on the **Department of Health website**.¹⁴

Monitoring Vital Signs

The elderly and those with chronic health conditions such as diabetes, lung disease, cancer and heart disease are at **much higher risk**⁵ of developing severe disease or dying from COVID-19.

Bilateral **pneumonia**¹⁵ is typified in COVID-19. As hypoxia and increased dyspnoea will be one of the first signs of pneumonia, the use of pulse oximetry to identify decreased oxygenation is essential.

Monitor vital signs regularly from onset of symptoms. This should include:

- Pulse oximetry,
- Respiratory rate,
- Blood pressure,
- Temperature.

Early recognition of changes in condition enables timely response to deterioration, optimal management of symptoms and provision of palliative care.

Anticipatory Prescribing and Subcutaneous Medications

Anticipate supply shortages of palliative care medications and equipment for subcutaneous administration and infusion. As deterioration can be rapid, upon COVID-19 diagnosis for the frail elderly and those with co-morbid health conditions, organise anticipatory prescribing of end of life medications as outlined in **ANZSPM's essential palliative and end-of-life care in the COVID-19 pandemic**.¹⁶ Prescriptions can be created during telehealth consultations with general or nurse practitioners.

National Coronavirus Helpline: 1800 020 080

Call this line if you are seeking information on Coronavirus (COVID-19). The line operates 24 hours a day, seven days a week.

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