New Zealand Government

Health Quality & Safety Commission New Zealand
Kupu Taurangi Hauora o Aotearoa

Patient COVID-19 Serious Illness Conversation Guide

Prepare – before seeing the patient, make sure you know what treatments are appropriate and available, as this will frame your conversation. Think: 'What treatment decisions do we need to make in case this person deteriorates further?'

Stage	Patient-tested language
Set-up Introduction yourself and acknowledge the situation	'I am so sorry we are in this situation/you have had to come to hospital/you are feeling so unwell.' 'We want to make sure you have the best care possible at this difficult time. To do this it would be good to talk about what is happening with your health, what might be ahead and what things are most important to you. Is that ok?' 'This is an important conversation. Is there someone close to you we can contact [eg, by phone] who we should include in this conversation?'
Assess Check patient understanding Check how much the patient wants to know	'To make sure we are on the same page, can you tell me your understanding of what's happening with your health at the moment?' 'How much do you want to know about what might be ahead for you?' *If needing to clarify:* 'Are you the kind of person who likes to know everything about what's going on? Or do you prefer to take it as it comes?' 'That is very helpful to know – thank you.'
Share Provide information about their current condition. Choose one of these prognostic statements based on your assessment of the current situation and the patient's prognosis Acknowledge this is difficult news	'This is my understanding of where things are at…' *If recovery is hopeful:* 'It can be difficult to predict what will happen with your health. I hope that you will continue to do well, but it is possible you could become more unwell quickly. It is important we prepare for that possibility.' OR *If recovery is uncertain:* 'I hope that this is not the case, but I am concerned that you might not recover even if we give you all possible treatment. (In fact, some people are dying.)' OR *If death is likely imminent:* 'I wish this were not the case, but I'm concerned that time could be as short as a few hours (or days).' **AND** 'I know this is not what you wanted to hear/I am so sorry we are in this situation.'
Pause	Allow silence, respond to emotion with empathy before moving on.
Explore Find out what is most important for the patient	'What are your priorities if your health does get worse (despite everything we are doing)?' 'What worries you most right now/when you think about your health changing?' *If needing to make clinical judgements about whether a person is likely to recover to an acceptable quality of life:* 'What abilities are so important for you that you can't imagine living without them?' 'If your health does get worse, how much are you willing to go through for the possibility of more time?'
Close *[cont p2]* Summarise Recommend the goal of care and medical treatments	'I have heard you say […] is really important to you.' *SUGGESTED PLANS aligning with the goals of care on the shared goals of care form:* 'Keeping that in mind, I suggest that we …' A. '… do everything we can to support you to pull through this infection; if it becomes clear you might die despite our best efforts, we will do everything we can to keep you comfortable.' *[cont over]*

Close *[cont]* Document the plan on the shared goals of care form	OR B. '… do everything we can to support you to pull through this infection; we wouldn't attempt to re-start your heart if it stopped; if it becomes clear you might die despite our best efforts, we will do everything we can to keep you comfortable.' OR C. '… focus on improving your symptoms and your wellbeing; if it becomes clear you are dying, we will do everything we can to keep you comfortable.' OR D. '… focus on keeping you comfortable and allow a natural death.' **AND** 'How does this plan seem to you?' 'I will do all I can to help you get the best care possible.' 'Is there anything you would like to go over again/ask/talk about?' 'Is there anyone you would like me to contact to update them about this conversation?'

Conversation flow

Prepare *before* seeing the patient:

- Check which medical interventions are likely to help and are available to this patient if they deteriorate acutely (see local guidelines).
- Check for any pre-existing advance directives and/or advance care plans.
- Consider which prognosis statement you think is most appropriate.

Set up the conversation

- Introduce yourself and other members of the care team present.
- Introduce the idea and benefits of having this conversation.
- Ask permission.
- Check whether the person would like anyone else included in the conversation or to be kept up to date – negotiate how you might do that.

Assess health understanding and information preferences

- Ask what the person already knows and what they would like to know.

Share prognosis

- Choose the appropriate prognosis to use, deliver it clearly.
- Allow silence and acknowledge any emotion that arises.

Explore what matters most to the patient

- Specifically explore the patient and/or whānau priorities and worries now or if the patient's health does change.
- If you think you will need to make clinical judgements about whether a person is likely to recover to an acceptable quality of life, explore critical abilities and trade-offs.

Close the conversation

- Summarise what you have heard, making a recommendation that aligns with a goal of care on the shared goals of care form and agree any additional plans with the patient and their whānau.
- Affirm your commitment to them and check whether there are any other questions or concerns, or if there is someone else they would like you to update about this conversation.

Document the conversation on the shared goals of care form or local equivalent.

This material has been modified by the Health Quality & Safety Commission New Zealand (www.hqsc.govt.nz). The original content can be found at https://portal.ariadnelabs.org and is licensed by Ariadne Labs under the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International License. Ariadne Labs licenses the original content as-is and as-available, and makes no representations or warranties of any kind concerning the original content or concerning this material, which Ariadne Labs has not reviewed or endorsed.