

Having significant conversations to support those most vulnerable to coronavirus

There are particular groups of individuals who are at [increased risk](#) of severe illness from coronavirus. These people would benefit from having a 'Key Information Summary' created or updated. Many will also benefit from Anticipatory Care Planning.

There is a second group of people who are at [much higher risk](#) of becoming seriously unwell from coronavirus, and are already at greater risk of dying from infections and other health problems. This group should be prioritised for Anticipatory Care Planning. This template can be used to document these discussions and shared on the Key Information Summary.

This is an important opportunity for people to have conversations with carers and loved ones about the type of care that they would like to receive should they become unwell.

We know that treatments for coronavirus focus on supportive measures, and specific care options like ventilation are of low benefit or do not help people who are already in poor health. However, there are many other aspects of care that can be discussed and planned. People may well be worried about the future, and so there is an opportunity to have a helpful conversation about what matters to them if they become very unwell and die.

These discussions can be extremely difficult to start, but they are important and helpful. The aim is to have an open and honest conversation with people and their families and carers so that we can plan future care as well as possible.

The [RED-MAP framework](#) can be helpful to guide discussions about ACP

<https://www.ec4h.org.uk/covid-19-effective-communication-for-professionals/>

R eady:	Can we talk about how coronavirus might affect you?
E xpect:	What do you know? What do you want to ask?
D iagnosis:	We know that coronavirus.... We don't know.....
M atters:	What matters to you if you were to become unwell?
A ctions:	What we can do to help is....
P lan:	Let's plan ahead for 'just in case'

Depending on how the conversation goes, you may consider exploring other relevant aspects of [Anticipatory Care Planning](#). Some people may not be ready for this conversation and it may be necessary to revisit it at another time. Focus on the benefits of having a plan for each person and, if possible, offer another opportunity with you or a colleague.

An essential ACP for those most vulnerable to coronavirus

Name		Preferred name	
CHI or DoB		Phone number	
Address			

Ask: 'If you were to become seriously unwell due to an infection such as the coronavirus, how would you like to be cared for?'

Ask: 'Is there anyone that you would like to be involved in future decisions about your care, if you were to become unwell (e.g. a friend, family member or carer)?'

Note: Specific care options e.g. ventilation in intensive care may not be available or appropriate. It may help to explore this further and consider whether comfort options such as symptom control would be a priority.

The things you would like:

The things you do not want:

Any other information around preferences for care:

Discussions about cardiopulmonary resuscitation:

Is this person to have cardiopulmonary resuscitation? Yes No

If NO, Is a DNACPR form completed? Yes No

The people you would like to be involved in decisions about your care. (List names and contact info.)

Do any of these people have [power of attorney](#) or welfare guardianship? YES NO

If so, what are their names?

Other important contacts (next of kin / carer / neighbour):

Key worker (social / health care worker/ mental health support/ others)

Name and contact details of Responsible Clinician (Consultant/ GP/ Other)

Name and designation of person who has led this ACP discussion

Date completed:

Consent obtained to share in Key Information Summary (good practice but not mandatory)

Yes No

Please send this completed electronic word document to the GP practice so that the above information can be copied and pasted into the special notes section of the Key Information Summary