PoET
Prevention of Error-based Transfers
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Situation Guide: Proposing an end of life plan with care in the home to a Substitute Decision Maker (SDM) of a resident with COVID-19

This guide has been designed to be used by the resident's physician, or the physician's delegate (with appropriate modifications to wording). This guide requires the physician (or delegate) to include resident-or home-specific information in sections highlighted by "[…]" This guide can be used in conjunction with other PoET tools, such as the Treatment Plan Proposal Template.

NOTE: Check documentation **prior to** discussion in order to gather information about resident's previously expressed capable wishes, values, or beliefs.

		Goal	Possible Wording for Physician
INFORM	1	To summarize and review pre-COVID status	*"Up until this point your loved one has been dealing with [….] and we have been able to provide […."*
	2	To provide information on COVID-19 diagnosis and relationship to pre-COVID status	*"Due to your loved one's other chronic conditions, this new diagnosis of COVID-19 means […."*
	3	To communicate that you expect further deterioration	*"Based on what I'm seeing, I believe that your loved one will…"* *"I'm sorry to tell you that I think this means…"*
PROPOSE	4	To identify the purpose of the discussion	*"I would like to talk to you about the new recommendations that I have…"* *"I want to make sure we have the best plan in place when that happens…"*
	5	To describe the plan being proposed	*"We can make sure that we manage your loved one's [……] here in the home. This would mean that we use […."] and keep your loved one comfortable."*
	6	To describe alternatives and why you are **not** recommending them at his time	*"If this plan isn't put into place, and […."] occurs, we would send your loved one to hospital, which would include […."]. I am not recommending this for your loved one because […."]*
Pause and answer the SDM's questions about the treatment plan, if any			
ASK FOR CONSENT	7	To inform or remind SDM of principles of substitute decision making	*"It's important to make this decision based on what your loved one said he or she wanted"* (if there are known wishes) **or** *"It's important to make this decision in line with what was important to your loved one"* (if there are no known wishes)
	8	To remind SDM of resident's previously expressed wishes, values or beliefs if any are known	*"I checked our documentation, and your loved one told us […]"* **or** *"I believe the plan I'm proposing is in line with […]"*
	9	To ask the resident's SDM for consent to the plan	*"Do I have your permission to put this plan into place?"* *"Do you agree that we should put the plan I am recommending in place?"*

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