**Literature search results**

|  |  |  |
| --- | --- | --- |
| **Palliative care** | **Search date:22/04/2020** | **Time Taken:** 120 mins |
| **Search query: Staff and family liaison during Covid-19 to communicate updates and support difficult decision making; virtual and by telephone** | | |
| **Sources searched: Cinahl, Embase, Medline, PsychInfo, NICE Evidence, Clinical Key, Google** | | |
| **Limits: None** | | |
| **Search terms used in HDAS:**   |  | | --- | | (coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab AND | | ((engage\* OR decision\* OR liaison OR communicat\* OR updat\*) ADJ4 (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*)).ti,ab |   coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab AND   |  | | --- | | (telephone\* OR phone\* OR video\* OR virtual OR remote).ti,ab AND | | (engage\* OR decision\* OR liaison OR communicat\* OR updat\*).ti,ab |   **Please let us know if you would like any additional keywords added to the search or if the search requires amending.** | | |
| **Comments about the results:**  **How?** I have used the search terms that you provided in your original request, alongside further synonyms and alternative terminology, to formulate the search strategy. I have searched the above databases and used Boolean operators to ensure the highest success rate. I have also hand sifted the final results.  **What?** I have found the following articles that I believe are relevant to your search query. There doesn’t appear to be very much on this topic. I have included a couple of links to palliative care organisations that have collated Covid-19 resources. I can carry out further searches to look at staff-family liaison by telephone/virtual communication more generally if needed. | | |
| **Requesting full text papers:** If you would like to consult the full text of any of the papers from the search, please email [library@uhbristol.nhs.uk](mailto:library@uhbristol.nhs.uk) with the full bibliographic details.  Please be aware that we cannot request full text papers for conference abstracts as the abstract you see is all that has been published. | | |
| **Disclaimer:** Every effort has been made to ensure that the information supplied is accurate, current and complete. However for various reasons it may not represent the entire body of information available. No responsibility can be accepted for any action taken on the basis of this information. Searching the literature retrieved the information provided. We also recommend checking the relevance and critically appraising the information contained within when applying to clinical decisions. | | |
| **Feedback:** It would be really useful for the future development of our literature search service if you could complete this short feedback survey: <https://www.surveymonkey.com/r/9PBVQKT>. | | |

|  |
| --- |
| **C:\Users\thornalleycla\Pictures\download (13).png** |
|  |

|  |
| --- |
|  |
|  |

|  |
| --- |
|  |
|  |

|  |
| --- |
| **Google search** |
| Centre to Advance Palliative Care. Covid-19 response resources  <https://www.capc.org/toolkits/covid-19-response-resources/>  Scottish Partnership for Palliative Care. Covid-19: Making and communicating decisions.  <https://www.palliativecarescotland.org.uk/content/covid-comms-and-ethics/>  Effective Communication for Healthcare. Covid-19: effective communication for professionals  <https://www.ec4h.org.uk/covid-19-effective-communication-for-professionals/>  Marie Curie. Coronavirus and end of life care  <https://www.mariecurie.org.uk/professionals/palliative-care-knowledge-zone/proving-good-quality-care/covid-19> |

|  |
| --- |
|  |
| [Community Palliative, End of Life and Bereavement Care in the COVID-19 pandemic](https://elearning.rcgp.org.uk/pluginfile.php/149457/mod_page/content/22/COVID%20Community%20symptom%20control%20and%20end%20of%20life%20care%20for%20General%20Practice%20FINAL%20v2.docx.pdf) [PDF] Source:  [Royal College of General Practitioners - RCGP](https://www.evidence.nhs.uk/search?om=%5b%7b%22srn%22:%5b%22Royal%20College%20of%20General%20Practitioners%20-%20RCGP%22%5d%7d%5d&q=communication+and+covid+19+and+family&sp=on) - 07 April 2020 - Publisher: Royal College of General Practitioners (RCGP)  This guidance is produced during the COVID-19 outbreak in order to support the care in the community of patients and those important to them, at the end of their lives or who are unwell as the result of COVID-19 or other life-limiting illnesses. This document will be updated and adapted as further contributions are received and in line with changing national guidance. [Ethical dimensions of COVID-19 for front-line staff](https://www.rcplondon.ac.uk/file/20551/download) Source:  [Royal College of Physicians of London - RCP](https://www.evidence.nhs.uk/search?om=%5b%7b%22srn%22:%5b%22Royal%20College%20of%20Physicians%20of%20London%20-%20RCP%22%5d%7d%5d&q=decision+making+and+family+and+covid&sp=on) - 02 April 2020 - Publisher: Royal College of Physicians (RCP) |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Database results**  [1. Crisis Symptom Management and Patient Communication Protocols Are Important Tools for All Clinicians Responding to COVID-19.](#2d2086ee-a883-bed3-b792-1244afefe6e7-1)  [2. Secure communication conduits during COVID19 lockdown.](#ab8c59e9-b958-c87f-cb21-cb696303161e-2)  [3. Hospital Preparedness for COVID-19: A Practical Guide from a Critical Care Perspective.](#20a62bcf-f5cc-a3a7-d072-d953cb65b62d-3)  [4. Applying Palliative Care Principles to Communicate with Children about COVID-19.](#210c7d82-8ef4-1157-7d82-4ccbf284b7f3-4)  [5. Protecting the psychological health of children through effective communication about COVID-19.](#9003f4bf-8f60-e07d-ecb3-ea1610efdc9b-5)  Results  **1. Crisis Symptom Management and Patient Communication Protocols Are Important Tools for All Clinicians Responding to COVID-19.**  **Author(s):** Bowman, Brynn A; Esch, Andrew E; Back, Anthony L; Marshall, Nadine  **Source:** Journal of pain and symptom management; Apr 2020  **Publication Date:** Apr 2020  **Publication Type(s):** Journal Article  **PubMedID:** 32276102  Available at [Journal of pain and symptom management](https://auth.elsevier.com/ShibAuth/institutionLogin?entityID=https://idp.eng.nhs.uk/openathens&appReturnURL=https%3A%2F%2Fwww.clinicalkey.com%2Fcontent%2FplayBy%2Fdoi%2F%3Fv%3D10.1016%2Fj.jpainsymman.2020.03.028) - from ClinicalKey  Available at [Journal of pain and symptom management](https://doi.org/10.1016/j.jpainsymman.2020.03.028) - from Unpaywall  **Abstract:**Symptom management and skilled communication with patients and families are essential clinical services in the midst of the COVID-19 pandemic. While palliative care specialists have training in these skills, many front-line clinicians from other specialties do not. It is imperative that all clinicians responding to the COVID-19 crisis have access to clinical tools to support symptom management and difficult patient and family communication.  **Database:** Medline  **2. Secure communication conduits during COVID19 lockdown.**  **Author(s):** Black, S M; Ali, F R  **Source:** Clinical and experimental dermatology; Apr 2020  **Publication Date:** Apr 2020  **Publication Type(s):** Letter  **PubMedID:** 32302418  **Abstract:**We commend Deepak and colleagues in highlighting the virtues of instant messaging tools such as WhatsApp during the COVID-19 crisis1 . Whilst WhatsApp's advantages include being highly intuitive, widely used and accessible, there are concerns among clinicians about its use, as well as that of other commercially available communications apps. These include the loss of anonymity to patients, the need to reveal their personal telephone number as well questions over privacy and data security.  **Database:** Medline  **3. Hospital Preparedness for COVID-19: A Practical Guide from a Critical Care Perspective.**  **Author(s):** Griffin, Kelly M; Karas, Maria G; Ivascu, Natalia S; Lief, Lindsay  **Source:** American journal of respiratory and critical care medicine; Apr 2020  **Publication Date:** Apr 2020  **Publication Type(s):** Journal Article  **PubMedID:** 32298146  **Abstract:**In response to the estimated potential impact of COVID-19 on New York City hospitals, our institution prepared for an influx of critically ill patients. Multiple areas of surge planning progressed simultaneously focused on infection control, clinical operational challenges, intensive care unit surge capacity, staffing, ethics and maintenance of staff wellness. Protocols developed focused on clinical decisions around intubation, the use of high-flow oxygen, infectious disease consultation and cardiac arrest. Mechanisms to increase bed capacity as well as increase efficiency in intensive care units by outsourcing procedures were implemented. Novel uses of technology to minimize staff exposure to COVID-19, as well as to facilitate family engagement and end of life discussions were encouraged. Education and communication remained key in attempting to standardize care, stay apprized on emerging data as well as to review seminal literature on respiratory failure. Challenges were encountered, and overcome through interdisciplinary collaboration and iterative surge planning as intensive care unit admissions rose. Support was provided for both clinical and nonclinical staff affected by the profound impact COVID-19 had on our city. We describe in granular detail, the procedures and processes developed during a one month period while surge planning was ongoing and the need for intensive care unit capacity rose exponentially. The approaches described provide a potential roadmap for centers that must rapidly adapt to the tremendous challenge introduced by this and potential future pandemics. This article is open access and distributed under the terms of the Creative Commons Attribution Non-Commercial No Derivatives License 4.0 (http://creativecommons.org/licenses/by-nc-nd/4.0/).  **Database:** Medline  **4. Applying Palliative Care Principles to Communicate with Children about COVID-19.**  **Author(s):** Weaver, Meaghann S; Wiener, Lori  **Source:** Journal of pain and symptom management; Mar 2020  **Publication Date:** Mar 2020  **Publication Type(s):** Journal Article  **PubMedID:** 32240751  Available at [Journal of pain and symptom management](https://auth.elsevier.com/ShibAuth/institutionLogin?entityID=https://idp.eng.nhs.uk/openathens&appReturnURL=https%3A%2F%2Fwww.clinicalkey.com%2Fcontent%2FplayBy%2Fdoi%2F%3Fv%3D10.1016%2Fj.jpainsymman.2020.03.020) - from ClinicalKey  **Abstract:**Children are seeing rapid changes to their routines and facing an unpredictable future. Palliative care teams may consider expanding their communication training and skillsets to help families consider caring ways to communicate with their children and grandchildren about the coronavirus. Palliative care teams are wise to encourage families to ground their communication with children on key values: honesty and trust, self-compassion, safety, sensitivity, connection, preparedness, community-building, recognition of death as a part of the lifecycle, and legacy.  **Database:** Medline  **5. Protecting the psychological health of children through effective communication about COVID-19.**  **Author(s):** Dalton, Louise; Rapa, Elizabeth; Stein, Alan  **Source:** The Lancet. Child & adolescent health; Mar 2020  **Publication Date:** Mar 2020  **Publication Type(s):** Journal Article  **PubMedID:** 32243784  Available at [The Lancet. Child & adolescent health](https://doi.org/10.1016/s2352-4642(20)30097-3) - from Unpaywall  **Database:** Medline  Strategy   |  |  |  |  | | --- | --- | --- | --- | | **#** | **Database** | **Search term** | **Results** | | 1 | Medline | (coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab | 16074 | | 2 | Medline | (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*).ti,ab | 3379939 | | 3 | Medline | ((engage\* OR decision\* OR liaison OR communicat\* OR updat\*) ADJ4 (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*)).ti,ab | 29978 | | 4 | Medline | (1 AND 3) | 9 | | 5 | CINAHL | (coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab | 2398 | | 6 | CINAHL | ((engage\* OR decision\* OR liaison OR communicat\* OR updat\*) ADJ4 (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*)).ti,ab | 25281 | | 7 | CINAHL | (5 AND 6) | 5 | | 8 | EMBASE | (coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab | 16719 | | 9 | EMBASE | ((engage\* OR decision\* OR liaison OR communicat\* OR updat\*) ADJ4 (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*)).ti,ab | 32003 | | 10 | EMBASE | (8 AND 9) | 8 | | 11 | PsycINFO | (coronavirus OR covid\* OR sars-cov-2 OR 2019-ncov OR ncov).ti,ab | 83 | | 12 | PsycINFO | ((engage\* OR decision\* OR liaison OR communicat\* OR updat\*) ADJ4 (famil\* OR relative\* OR partner\* OR friend\* OR children OR wives OR wife OR husband\*)).ti,ab | 35725 | | 13 | PsycINFO | (11 AND 12) | 0 | | 14 | Medline | (telephone\* OR phone\* OR video\* OR virtual OR remote).ti,ab | 310531 | | 15 | Medline | (1 AND 2 AND 14) | 35 | | 17 | Medline | (engage\* OR decision\* OR liaison OR communicat\* OR updat\*).ti,ab | 906066 | | 18 | Medline | (1 AND 14 AND 17) | 25 | | 19 | CINAHL | (engage\* OR decision\* OR liaison OR communicat\* OR updat\*).ti,ab | 425193 | | 20 | EMBASE | (engage\* OR decision\* OR liaison OR communicat\* OR updat\*).ti,ab | 1227234 | | 21 | PsycINFO | (engage\* OR decision\* OR liaison OR communicat\* OR updat\*).ti,ab | 557993 | | 22 | CINAHL | (telephone\* OR phone\* OR video\* OR virtual OR remote).ti,ab | 120237 | | 23 | EMBASE | (telephone\* OR phone\* OR video\* OR virtual OR remote).ti,ab | 447816 | | 24 | PsycINFO | (telephone\* OR phone\* OR video\* OR virtual OR remote).ti,ab | 135528 | | 25 | CINAHL | (5 AND 19 AND 22) | 6 | | 26 | EMBASE | (8 AND 20 AND 23) | 24 | | 27 | PsycINFO | (11 AND 21 AND 24) | 2 | | 28 | Medline | exp \*"PROFESSIONAL-FAMILY RELATIONS"/ | 6471 | | 29 | Medline | (1 AND 28) | 0 | | 30 | EMBASE | exp \*"FAMILY DECISION MAKING"/ | 296 | | 31 | EMBASE | (8 AND 30) | 0 | | 32 | Medline | exp \*"CLINICAL DECISION-MAKING"/ | 3173 | | 33 | Medline | exp \*"DECISION MAKING, SHARED"/ | 98 | | 34 | Medline | (32 OR 33) | 3264 | | 35 | Medline | (1 AND 34) | 3 | | 36 | Medline | (family-centred care).ti,ab | 809 | | 37 | Medline | (1 AND 36) | 0 | | 38 | CINAHL | (family-centred care).ti,ab | 1026 | | 39 | CINAHL | (5 AND 38) | 0 | | 40 | EMBASE | (family-centred care).ti,ab | 654 | | 41 | EMBASE | (8 AND 40) | 0 | | 42 | PsycINFO | (family-centred care).ti,ab | 415 | | 43 | PsycINFO | (11 AND 42) | 0 | |