

## Session 4410 (Symposium)

### HOME-BASED CARE IN THE CONTEXT OF COVID-19: DISRUPTIONS, INNOVATIONS, AND LESSONS FOR THE FUTURE

Chair: Emily Franzosa

Discussant: Katherine Ornstein

During the initial surge of the COVID-19 pandemic, home-based primary and palliative care (HBPC) practices played a valuable role in maintaining access to health-related services and keeping older, medically complex patients out of hospitals and congregate settings that could heighten their risk for COVID-19. At the same time, these practices faced unique challenges in adapting a traditionally hands-on model of care to accommodate restrictions on in-person contact. In this symposium, we present innovative research highlighting the challenges faced by HBPC practices and patients during spring 2020, as well as their rapid innovations and adaptations. First, Ritchie et al. provide national context with findings from a survey of U.S. home-based primary care practices that highlights the field's most pressing challenges and successful strategies. Shifting to the initial epicenter of the pandemic in New York City, Reckrey et al. present a qualitative study of the perspectives of paid and unpaid caregivers of dementia patients served by an HBPC practice, while Franzosa et al. describe care disruptions among individuals with dementia who died during the initial surge, using a novel chart-based abstraction technique. Finally, two studies (Gorbenko et al. and Kalicki et al.) explore HBPC practices' experience of rapidly transitioning to telehealth through qualitative interviews with NYC-based practices and a provider survey exploring telehealth adoption and readiness in the homebound population. Together, these studies yield important insights into the challenges of providing community-based care for at-risk populations during a pandemic, and practical strategies for home-based models of care moving forward.

### DISRUPTIONS AND ADAPTATIONS IN END-OF-LIFE CARE DELIVERY FOR HOMEBOUND PATIENTS DURING COVID-19

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The initial COVID-19 pandemic surge in New York City caused widespread delays and disruption in end-of-life services. This study examined the impact of disruptions among homebound adults in an HBPC practice who died between March-June 2020. Through an in-depth mixed-methods chart review, we identified 113 patient deaths (mean age: 87, 73% female, 67% with dementia). Forty-nine (43%) of deaths occurred in April 2020. Through a content analysis of clinician notes, we identified key COVID-related themes, including a shift to intensive phone-based care and to a lesser degree, telehealth; delays in hospice referrals and admissions; and an increase in treatment for behavioral symptoms. Our analysis also demonstrated the central role of family and paid caregivers in coordinating care, and efforts by patients,

caregivers and providers to avoid hospital admissions. These findings demonstrate the importance of care coordination across medical, home and community partners to support end-of-life care in emergencies and beyond.

### COVID CHALLENGES AND ADAPTATIONS AMONG HOME-BASED MEDICAL PRACTICES: LESSONS FOR AN ONGOING PANDEMIC

Christine Ritchie,<sup>1</sup> Orla Sheehan,<sup>2</sup> Naomi Gallopyn,<sup>1</sup> Shanaz Sharieff,<sup>3</sup> Abraham Brody,<sup>4</sup> and Bruce Leff,<sup>5</sup> 1. *Massachusetts General Hospital, Boston, Massachusetts, United States*, 2. *Johns Hopkins University School of Medicine, Johns Hopkins University, Maryland, United States*, 3. *Massachusetts General Hospital, Boston, Massachusetts, United States*, 4. *NYU Hartford Institute for Geriatric Nursing, New York, New York, United States*, 5. *The Center For Transformative Geriatric Research, Johns Hopkins School of Medicine, Baltimore, Maryland, United States*

Home-based primary care (HBPC) practices rapidly adapted to maintain care during the COVID-19 pandemic. This mixed-methods national online survey of HBPC practices probed responses to COVID-19 surges, COVID-19 testing, the use of telemedicine, practice challenges due to COVID-19, and adaptations to address these challenges. Seventy-nine practices across 29 states were included in the analyses. Eighty-five percent of practices continued to provide in-person care and nearly half cared for COVID-19 patients. Most practices also pivoted to concurrent use of video visits. The top five practice challenges were: patient familiarity with telemedicine, patient and clinician anxiety, technical difficulties reaching patients, and supply shortages. Practices also described creative strategies to physically support the needs of patients. These findings illustrate the need to balance in-person and virtual care for this population, and attend to the emotional needs of patients and staff.

### WHO PROVIDES CARE IN A CRISIS? FAMILY CAREGIVERS' EXPERIENCES OF HOME CARE DURING THE COVID-19 PANDEMIC

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Many homebound individuals with dementia rely on both paid caregivers (e.g., home health aides, home attendants, other homecare workers) and family caregivers to live safely at home. We conducted semi-structured interviews with 15 family caregivers of individuals with severe dementia receiving home-based primary care in NYC to explore how caregiving changed during the COVID pandemic. Most individuals with long-standing paid caregivers experienced infrequent home care disruptions. In fact, paid caregivers were often the primary and sometimes only individuals to provide direct care; family caregivers themselves often stayed away and managed care from a distance. While most family caregivers described heightened attention to infection control, guidance about COVID prevention and safety rarely