

Community Care Goals of Care and Clinical Guidelines

Purpose of the Preventive Care Guidelines and Goals of Care

Community Care in conjunction with the National PACE Association uses a Goal of Care Model and Preventive Care Guidelines (PCG.) PCG provides relevant diagnostic and management recommendations to Community Care and contracted primary care providers (PCPs). This model was adapted specifically for our participants from evidence-based published guidelines, using the collective review of experienced Community Care Clinicians, Community Care Medical Management Dept., PACE® Medical Directors and Contracted Primary Care Physicians and is offered with the belief that shared decision-making between individual PCPs and participants/caregivers is optimal. This PCG is not intended to replace the clinical judgment of the individual provider or establish a standard of care.

PACE® and Partnership participants are a heterogeneous group, with differing health profiles, prognoses, preferences, and goals of care. Life expectancy and quality of life issues require an individualized context within which to apply practice guidelines that may have been developed from and for a population of non-frail adults. We recommend that whether a PCP follows any of the summary recommendations for an individual participant will depend upon factors specific to that participant, including the participant's preferences, prognosis and life expectancy, co-morbid conditions, functional status, and goals of care.

This model assumes that the goals of care for participants can be divided into three broad categories: promoting longevity, optimizing function, and palliative care. Accordingly, the PCG suggests different approaches depending on whether the goal is life-extension, function, or palliation. The PCP will need to determine which recommendations are appropriate for each individual participant, considering the participant's preferences, life expectancy, and the expected benefit versus burdens of specific interventions.

Goals of Care:

Longevity-

Participant expresses a preference for life-prolonging treatment. A participant with a goal of longevity typically desires unrestricted use of medically-indicated treatments, including CPR, invasive procedures and life-sustaining treatments (ACLS, surgery, ventilator support, dialysis, IV fluids and tube feedings).

Functional-

Participant's main goal is to maintain function. Participant makes individualized choices to limit some invasive procedures that are not consistent with that goal. Limited procedures may include CPR, mechanical ventilation, and other life-sustaining treatments.

Palliative-

Participant desires treatments aimed at providing comfort only. Treatment choices focus on relieving pain and other symptoms and limiting invasive, life-sustaining treatments such as CPR, mechanical ventilation, dialysis and surgery.