

# Patients Receiving Support from their Designated Essential Care Partner at UHN

Process for Developing a Training Program to Support Essential Care Partners  
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*Laura Williams, Senior Director Patient Experience & Engagement*

*Farrah Schwartz, Manager Patient Education & Engagement*

*Kerseri Scane, Manager Patient Engagement for Healthcare Improvement*



# Overview

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1. What was happening in the system and within UHN
2. Development of the support program
3. Principles for ECPs as care partners
4. Process for training
5. Implementation
6. Evolving the support program




# A Compass for Our Care

## UHN Patient Declaration of Values

 Patient Experience

 **UHN**  
Toronto General  
Toronto Western  
Princess Margaret  
Toronto Rehab  
Michener Institute

 Respect and dignity

 Empathy and compassion

 Accountability

 Transparency

 Equity and partnership

### Navigating our values



To learn more:

Email [patientexperience@uhn.ca](mailto:patientexperience@uhn.ca)

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**UHN's  
foundational  
framework for  
exceptional  
patient  
experience**

 **UHN**  
Toronto General  
Toronto Western  
Princess Margaret  
Toronto Rehab  
Michener Institute

# What was happening in the Health System

- COVID-19 Omicron Wave (December 2021/January 2022)
- Staff shortages
- Model of care changes and staffing ratio changes
- Opportunity to formalize what many Essential Care Partners were already doing



# Development

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## 1. Partnerships

- a) Patient Experience
- b) Clinical Practice
- c) Patient Partners
- d) Patient Education
- e) Leadership

## 2. Role Clarity

- a) Clear definition of an ECP established and in place
- b) Determining what skills an ECP could perform safely

## 3. Creating an ECP Training Hub of vetted resources



# Principles for Safety & Support

- Determining interest & skill level
- Assessment of patient's care needs
- Training & Teach back
- Documentation
- Communication & Evaluation
- Support



## Role Clarity - Roles Initiated in the COVID-19 Pandemic

Regardless of what is selected below, ensure any work assigned to a team member/ partner is appropriate, and that the individual has the appropriate knowledge, skill and judgement.



Students from a variety of Professions provide care in clinical areas and need to work within within the appropriate scope and student guidelines as per usual.

When in doubt ask a clarifying question

● Focus of Role; \* Not typical of role but if pandemic requires

Activities	Essential Care Partners (If assessed and trained by the care team)	Personal Support Worker/ Health Care Aide/ Patient Care Assistant	Non-Clinical Support Aide / Redeployed	Hospital Support Aid	Constant Observer	Nursing Student Clinical Externs and Internationally Educated Nurses	OT/PT Student Clinical Externs	RT Student Clinical Externs
Communicates and raises issues with care team	●	●	●	●	●	●	●	●
Communication: calls from family/friends and supporting virtual calls	●	●	●	●	*	●	*	
Assist with Positioning/ Transfers/ Mobility / Proning	*	●	●		*	●	●	●
Oral Hygiene and Feeding	*	●			*	●	*	
Shower/ Personal Hygiene	*	●			*	●	*	
Tolieting, Bed Pan, Briefs Change	*	●			*	●	*	
Linen changes	*	●	●	*	*	●	*	
Assigned Therapies (Mobility, Transfers, ADLs, Cognition)	*						●	
Empty foley catheter		●	●			●		
Constant Observation		●	●	*	●	●		
Distributing Water		●	●	●		●	*	
Answering call bells		●	●	●		●	●	
Stocking supplies		●	●	●		●	●	●
Record Patient Weight and Height		●				●	*	
Hourly Patient Checks		●	●	●		●	*	
Stocking and preparing supplies and equipment cleaning, prep and maintenance		●	●	●		●	●	●

Given the current staffing ratios, ECPs may be asked to assist with specific patient care activities

**NOTE: List of resources and communication tools to support are at the end**

# Process

## Give Inpatient Letter\*

- Inpatient receives **letter regarding temporary care changes**
- For new inpatients, during registration letter is given and designated ECP is identified

**\*Process can be initiated by non-clinical staff**

## Determine Interest\*

- Discussion with ECP to support patient's care

## Train ECP

- Utilize **ECP Training Checklist** to determine patient care needs that require support
- Interprofessional team to provide appropriate education, training and teachback

## Provide Resources

- Utilize **ECP Training Checklist** as a discussion and documentation tool
- Keep ECP Training Checklist in patient's room for ECP and Care Team
- Direct ECP to **Webpage for further ECP training videos**

## Communicate & Provide Ongoing Support

- Report at **daily huddle** which patients have ECPs supporting care and ensure a check-in occurs for support or breaks





Always keep this document in the patient's room/whiteboard

## Essential Care Partner (ECP) Training Checklist

Patient: \_\_\_\_\_

Designated ECP: \_\_\_\_\_

Complete the following checklists with the Patient and their ECP:

### A) Identify ECP and determine their interest and prior knowledge.

1. The patient or SDM identified an ECP from their circle of care who is willing to provide support.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. The ECP is currently on the approved visitor list.  ** Approved ECPs will need to have their names on the visitor list. ECPs must show proof of vaccination and pass screening in order to enter the building.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. The ECP is interested in helping with patient care needs while they are in the hospital.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. The ECP is already providing care support for the patient.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

<input type="checkbox"/> Information provided about <b>Safety and Infection Control Practices</b>	
The ECP demonstrated proper hand-washing and hand-sanitizing techniques.	<input type="checkbox"/> Skills checked and education provided by:

# ECP Training Checklist

# Resources required to support process

- Guiding Documents
  - Role Clarity Poster for staff (attachment)
  - ECP as care partners principles document
- Tools
  - ECP Training Checklist for staff
    - Possible care duties, including infection control
    - Space for documentation of learning for care activities
  - [UHN ECP Training Hub Webpage](#) of online videos and instructions on care to supplement unit-based teaching (link)
  - Inpatient letter – Temporary Care Changes
  - UHN ECP Brochure – [“What ECPs need to know before coming to UHN”](#)



# Other considerations

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- Process to engage ECP in this role can be initiated by non-clinical staff, education, training and teach back to be completed by interprofessional team.



## Next Steps (Example)

### Escalation of Urgent or Emergent Concerns by Patients and Families

Notice any of these Changes in  
your Health Condition?

Please Tell Us

You and your Essential Care Partners are an important member of the care team. Working together is the best way to keep you safe.

You know yourself best, if you or your Essential Care Partner notice any of these changes in your condition, don't wait – tell your healthcare team.

1. **Body temperature** – is too high or too low. Report temperatures below 36°C or above 38°C.
2. **Heart rate (pulse) or respiratory rate (breathing) changes.** A heart rate that stays less than 60 or greater than 100 beats per minute, or a respiratory rate of less than 15 or greater than 20 breaths per minute, may need to be evaluated.
3. **Blood pressure** numbers are out of the normal range. If the systolic (top number in the blood pressure reading) is less than 90 or greater than 180 mmHg, ask for an assessment.
4. **Changes in mental state** including confusion, delirium, or an acute change in personality, memory or alertness.
5. **Changes in urine output or appearance.** A decrease in amount of urine is a concern (less than 50 ml over 4 hours), as is urine that appears darker in colour or looks “concentrated”.
- 6.
6. **The patient states that something is wrong** with them. Patients often have a sense that they are experiencing a sudden decline in their health.
7. **The patient doesn't look right** to the family or your Essential Care Partner. Someone who knows the patient personally is often a better judge of a change in normal appearance or behavior.
8. **Shortness of breath** or having a tight feeling or discomfort in the chest. Shortness of breath can be a sign of heart attack, pulmonary embolism (blood clot), infection or pneumonia.
9. **Acute pain**, especially in the abdomen. This could be a sign of an infection (including peritonitis), intestinal obstruction, a perforated ulcer and other potentially life-threatening problems.
10. **Very pale** appearance of the skin or breaking out in cold sweats. These symptoms could indicate internal bleeding, shock, infection or heart attack.

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It is Safe to Ask  
We are Here to Listen

