



ESSENTIAL CARE PARTNERS GUIDE



Partners In Care

WELCOME!

Patients at Hôtel-Dieu Grace Healthcare have the option of choosing an essential care partner to assist them during their time at the hospital. Your loved one has identified you to be their essential care partner and be part of their care team. We would like to extend a warm welcome to the Hôtel-Dieu Grace Healthcare team!



WHAT IS AN ESSENTIAL CARE PARTNER (ECP)?

When visiting a loved one in the hospital, we use the term, visitor. A visitor spends time with the patient providing valuable social and emotional support.

An Essential Care Partner (ECP) is someone who has a close and trustworthy relationship with the patient and is actively involved in the patient's day-to-day care, care planning and decision making. ECPs are familiar and know their loved one very well. They will notice subtle changes in the patient's appearance, mood or how they are feeling in general. This knowledge and insight is a valuable support to the patient and their health care team. An ECP can be a family member, friend or neighbour who provides physical and emotional support to a loved one for a variety of circumstances such as:

- Long or short-term illness
- Recovery from accident or surgery
- Degenerative disease
- Cognitive impairment
- Physical or mental disability
- Or other health-related circumstances

HOW CAN AN ECP SUPPORT A LOVED ONE?

ECPs can provide different types of support that can help improve their loved ones health. With direction from the patient or substitute decision maker, an ECP may provide:

- Emotional and social support, along with companionship
- Reality orientation, personal connection, memory support and communication assistance for patients who have cognitive impairment
- Assistance with personal care such as bathing, using the bathroom and other personal hygiene
- Help with eating and moving around
- Assistance with care planning and decision making
- Medical treatments such as tube feedings and some wound care
- Assistance with scheduling and coordinating appointments
- Transportation assistance
- Support for financial decisions
- Support for discharge planning discussions

ONGOING LEARNING OPPORTUNITIES

There will be opportunities for you to learn as your loved one progresses in their plan and goals of care. They may ask you to learn about certain aspects of their care plan, or the healthcare team may ask if you are interested in learning. This is especially important if you become the primary support to your loved one when they return home.

WHAT IS THE TIME COMMITMENT?

The time an ECP spends varies depending upon the patient's individual support needs and the availability of the ECP. Together, the patient, ECP and healthcare team can help establish the type and amount of support you can provide.



BENEFITS OF BEING AN ECP

According to research done by the Ontario Caregiver Organization, people have said that being an essential care partner has given them the opportunity to:

- Strengthen their relationship with their loved one
- Contribute to positive outcomes such as improved health and well-being, decreased hospitalization and possibly a better ability to stay at home
- Learn new skills and gain a sense of accomplishment
- Experience the reward of giving back
- Feel satisfaction being engaged with the patient and healthcare professionals, and knowing that their loved one is receiving good care
- Reflect on spiritual beliefs and values
- Improve the ability to cope

The support provided by ECPs is extremely valuable and can make a positive impact on a loved one's life.

PARTNERING WITH THE HDGH TEAM

Patients and their ECPs are vital members of the healthcare team. Along with physicians, nurses, social workers, rehab therapists, spiritual care practitioners, dietitians and pharmacists, you contribute to the well-being, goals and outcomes of your loved one. Benefits of this partnership are:

- Increased trust and continued alliance in support of the patient
- Your ongoing learning and increased knowledge may lead to better health outcomes for the patient
- The information you provide about the patient can lead to an improved treatment plan, especially if the patient asks you to participate in care planning and/or speak on their behalf
- Improve patient safety and inefficiencies
- Assist with discharge planning and answer questions if the patient has difficulty communicating
- With permission from the patient, you can educate the care team about their sleep patterns, diet, activities, hobbies health history, things that affect their mood and more

The information you provide helps healthcare professionals deliver more personalized care.



ASK, ADVOCATE, ACT

The patient and ECP are encouraged to offer helpful information and to **ask** questions. Sometimes, the patient or ECP are in disagreement with suggestions or decisions made by the healthcare team. An ECP can **advocate** by supporting the patient to express their views, desires and wishes. Conversations to understand the patient's point of view, as well as the perspective of the healthcare team, will lead to mutual understanding to **act** in support of the patient's goals.

TIPS FOR COMMUNICATION

Good communication contributes to trustworthy relationships. Organize your thoughts before conversations so you can effectively share your views. Give yourself time for any emotions to settle so that you can speak calmly and with composure.

Approaching the conversation with a question such as, *“Please help me to understand...?”* or *“I was wondering if you could explain this to me...?”* is a respectful way to capture the other person's attention.

WHO TO SPEAK WITH IS:

The unit or program manager is your “go-to” person if you have any questions, concerns or special requests. They will introduce themselves to you and your loved one early in the admission process. Other people you may want to connect with are:

Patient Advocate: Ext. 74404

Infection Prevention and Control: Ext. 73877

Spiritual Care: Ext. 74817

Security: Ext. 72030



HDGH ECP SAFETY PROGRAM

HDGH Specific Safety Information and Requirements

For the safety of all, ECPs must remain in designated areas only. If there is a reason to attend a non-public area of the hospital, ECPs must be escorted by a HDGH employee. All ECPs are required to obey posted signs indicating the mandatory use of Personal Protective Equipment (e.g. masks, gloves, gowns, etc.).



Hazardous Materials – applicable if using or handling chemicals while at HDGH

In the event that a ECP will be handling chemicals while at HDGH, the ECP will comply with all aspects of the Workplace Hazardous Materials Information System (WHMIS). When using chemical wipes at HDGH, glove use is mandatory to protect skin from irritation.

Injuries/Illness/First-Aid/Critical Injuries

In the event of illness or injury that occurred at HDGH, all injuries must be reported to the HDGH Unit Manager or in the absence of the Unit Manager, the Responsible Person on the unit or Security.

HDGH Emergency Codes – Approved ECP Responsibility

ECP's are responsible for making themselves aware of the evacuation plan that exists for the specific area where they are visiting. This shall include knowing the particular evacuation plan, emergency exits, gathering location(s) and emergency contact numbers (HDGH's Emergency Number is extension 3333).

1. Code Red – Fire Alarm

- Code Red is the term to describe a fire emergency in a healthcare facility. An audible fire alarm system indicates that someone has activated a pull station or one or more automatic detection devices has been activated. After activation an announcement will be made stating “Attention all Staff... Code Red Zone XX”. The ECP is then required to:
- Refer to the HDGH Fire Zones document:

Building	Fire Zone	Building	Fire Zone
Withdrawal Management Service	A, B	Brown Auditorium	L
East Wing	C	CPH	M
Casgrain	D, E	Power House	N, P
Tower	F, G, H, J	TNI	Q, R, S
Phase 1	K	EMARA	T, U, V, X, X
RCC Pool	AA	RCC Glengarda	BB
RCC Huot	Y, Z		

- Elevators are not to be used during an active alarm
- In the event of a fire in your fire zone exit the building using the nearest safest exit route and await further instruction
- The ECP will find the fire zone map which is located on the wall in the department that you are visiting. The fire zone maps will identify the appropriate exit routes to follow.

2. Code Green - Evacuation

- Code Green refers to situations requiring a partial or complete evacuation of a specific HDGH building. In the event of a Code Green, an announcement will be made over the speaker system.
- In the unlikely event that this should occur, ECPs should leave the building in an orderly fashion following the identified evacuation route outlined on the fire zone map and once outside the building will await further instructions from HDGH Security.
- Do not re-enter the building until instructed to do so by HDGH Security.

3. Code Lockdown/Code Silver

- A “lockdown warning” differs from any of the standard healthcare colour codes in that it requires an immediate safety response from EVERYONE within the building. A “lockdown warning” indicates that an individual(s) has been identified on our campus/facility actively attempting to harm others.
- In the unlikely event of a lockdown scenario a warning announcement will be made via overhead speakers. At this point the following procedure should be followed:



a. RUN

- If an accessible safe escape path is available, evacuate immediately and flee the area.
- Have escape routes and plans prepared.
- Make your own decision to leave regardless of whether others agree.
- Disregard fire alarms and trust your own judgement.
- Leave your belongings behind.
- Warn others as you leave.
- Call 911 (9-911 if using a facility phone) when it is safe to do so.
- Keep your hands visible and follow instructions of law enforcement.



b. HIDE

- If evacuation is not possible, shelter in a place that you are less likely to be noticed.
- Be out-of-view and barricade your position (i.e., place patient bed with brakes activated against door).
- Hide behind solid walls or in rooms with locking doors as protection.
- Silence your cell phone, turn off noise sources (radio/television), and turn off lights.
- If you choose to, you can assist others with limitations/disabilities in taking cover and hiding.
- DO NOT exit your safe space unless directed by law enforcement or information received through the HDGH communication system that the “Lockdown” has ended.



c. FIGHT

- As a last resort, and only if your life is in imminent danger, attempt to incapacitate the assailant.
- Act as aggressively as possible; improvise weapons from the area in which you find yourself
- Commit to your actions

d. CONCLUSION OF LOCKDOWN

- The lockdown status will only be terminated upon direction from law enforcement.

Any questions regarding the information found in this document can be directed to the HDGH Occupational Health and Safety Department at extension 77030.



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OUR MISSION

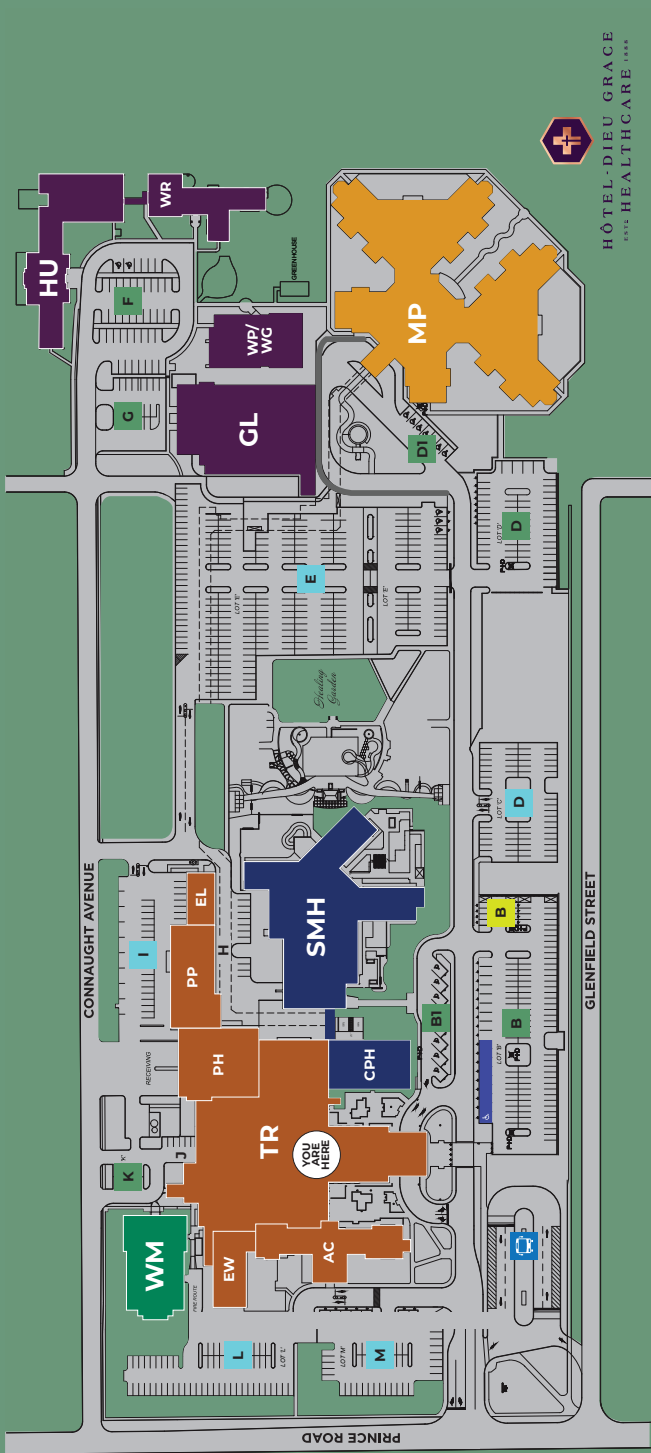
The mission of Hotel-Dieu Grace is to serve the healthcare needs of our community including those who are vulnerable and/or marginalized in any way be it, physically, socially, or mentally. As a Catholic sponsored healthcare organization, we provide patient-centred care treating the body, mind, and spirit. We do this by providing holistic, compassionate and innovative care to those we serve.

OUR VISION

A trusted leader transforming healthcare and cultivating a healthier community.

OUR VALUES

Respect • Teamwork
Compassion • Social Responsibility



- STAFF PARKING LOT
- PUBLIC PARKING LOT
- AC - CASGRAIN BUILDING
- EW - EAST WING BUILDING
- TR - DR. TAYFOUR TOWER
- EW - E.L.M.S BUILDING
- PH - PHASE 1 BUILDING
- PP - POWERPLANT
- CPH
- MH - TOLDO BUILDING (SMH)
- WM - WITHDRAWAL MANAGEMENT
- EL - EMARA BUILDING
- HU - RCC HUOT BUILDING
- WR - RCC RESIDENCE
- WP/WG - RCC NEW GYM POOL
- GL - RCC GLENGARDA
- CITY OF WINDSOR BUS TERMINAL
- PHYSICIAN PARKING ONLY

*“There are only four kinds of people
in the world: those who have been caregivers, those
who are currently caregivers, those who will be
caregivers, and those who will need caregivers.”*

Former First Lady, Rosalynn Carter



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