



# DESIGNATED CARE PARTNER PROGRAM



*A Patient Care Partnership*

## INTRODUCTION

---

**The Coordinated Care Program (CCP) is the partnership between the hospital care team, patient, and the patient identified care partner.**

Designated Care Partners (DCP) are an essential part of this program. A DCP is any person that the patient and/or substitute decision-maker (SDM) identifies as a partner.

The DCP provides specific aspects of the care plan\* to a patient within a defined period of time. The DCP is considered an integral member of the care team to accomplish goals set forth in the care plan. The DCP and the patient works in partnership with the hospital staff to define the care plan as well as the responsibilities of each partner.

The care team decides collaboratively about care activities, care planning, and decision-making. A DCP is not an alternative to or synonymous with a patient visitor nor is the CCP a substitute for the family presence policy. Therefore the CCP is not intended or designed to be in lieu of patient visitor policy or processes.

### **Patients who require DCP at HDGH have been identified as:**

- a. Those who are planning for discharge whereby a DCP is required for health teaching,
- b. Patients who have language barriers; patients who are non-verbal; patients with cognitive, emotional and/or physical disabilities.

*\*A care plan is the documented care journey of the patient that identifies the necessary goals and interventions to be completed.*

# PURPOSE

---

The CCP is designed to incorporate patients and families into the care delivery model at HDGH. A DCP can be asked to provide physical, emotional and cognitive care to their loved one. The DCP effectively functions as another member of the care team to be included in the care planning and decision making processes.

## SOME OF THE COMMON ASPECTS OF A DCP VISIT INCLUDE:

### Visits for cognitive reasons

- Reality orientation
- Current events
- Personal connection for those with dementia
- Communication assistance
- Memory support

### Visits for emotional reasons

- Palliative care, and end of life
- Supportive decision making as it relates to life altering events
- Compassionate care

### Visits for physical care

- Assistance with personal care
- Assistance with feeding
- Assistance with mobility





## PROCEDURES

---

The clinical unit will work with the patient and/or substitute decision maker to determine the need for an appointment of a DCP.

The clinical unit manager or delegate will contact the identified DCP to arrange the training and explain the CCP.

The DCP will be scheduled a time and date for training. The Care Team (inclusive of the DCP and Patient) will determine the portions of the care plan that will be carried out.

If there becomes a need to limit/reduce the number of DCP's to ensure the safety of HDGH patients and staff, the following method will be used:

# ROLE OF THE DCP

To work in cooperation with the clinical unit care team.

Circumstance	Description	Patient Population
Life altering events	Time limited, absence of a visitor may result in devastating long term emotional, psychological or other health effects.	<ul style="list-style-type: none"> <li>- End of life Care</li> <li>- Major Surgical intervention required</li> <li>- Critically ill</li> <li>- Mental Health Crisis</li> </ul>
Vulnerable patients	Designated care partner is the primary advocate for the patient.	<ul style="list-style-type: none"> <li>- Children under 18</li> <li>- Those with significant cognitive impairment (dementia, stroke, brain injury, etc.)</li> <li>- Significant developmental or intellectual disability</li> <li>- Unable to communicate effectively (aphasia, language barriers, etc.)</li> </ul>
Long stay patients that require DCP to support	Absence of DCP may result in unmet care needs.	<ul style="list-style-type: none"> <li>- Patients that require a caregiver to avoid undue hardship (physical, mental, cognitive)</li> <li>- Patients that are expected to be in hospital for a period of greater than 30 days</li> </ul>
Patients that require support for transitions in care	DCP provides support and coordination of care at major transitions (discharge, follow up instructions, orientation to new long stay or permanent care environment)	<ul style="list-style-type: none"> <li>- Discharge from HDGH</li> <li>- Admission to HDGH</li> </ul>
Short stay low acuity patients	DCP work augments the clinical unit work	<ul style="list-style-type: none"> <li>- Rehabilitation patients that are not expected to stay beyond 30 days</li> </ul>

# RESPONSIBILITIES

---

- Complete mandatory infection control training including the proper use of personal protective equipment prior to coming to hospital;
- Provide accurate self-assessment of being physically, cognitively and emotionally able to provide the care elements that have been identified for the patient;
- Read, understand and agree to the HDGH Coordinated Care Policy;
- Wear picture identification at all times.
- Be considerate and respectful of the patient and all members of the care team;
- Accept the responsibility for violating expectations laid out in the contract;
- To utilize a designated bathroom on the unit and will not use the patient's bathroom;



*You're a  
valued  
member of  
our team at  
HDGH*

# PATIENT FAMILY ADVISORY COUNCIL (PFAC)

---

The Patient Family Advisory Council established in 2015 is an Advisory Committee to the Executive Leadership Council of Hôtel-Dieu Grace Healthcare.

PFAC provides a voice that represents all patients and families who receive care at HDGH. PFAC is an important resource to the organization and is involved with leaders to review areas of opportunity and offer ideas on the best way to improve the patient experience.

## **Message from our PFAC Chair:**

“Patients and Families have a voice here at Hotel-Dieu Grace Healthcare. The ‘Coordinated Care Program’ and the role of the ‘Designated Care Partner’ invites you to be a valued member of our Health Care Team.”

## **What is a Patient Family Advisor?**

- Someone who wants to improve the quality of care for all patients and families and help co-design the patient experience
- Gives feedback based on their own experience
- Works with hospital for either short or long term committees
- Volunteers their time for 1 to 4 hours per month

## **Being a Patient and Family Advisor may be a good match with your skills and experiences if you can:**

- Speak up and share suggestions for potential solutions to help improve health care for others
- Talk about your experience as a patient or family member; but also think beyond your own personal experience
- Talk about both positive and negative care experiences, and share your thoughts of what went well and how things might have been done differently
- Listen and talk about what others say, even when you disagree and bring a positive attitude to discussions.
- Keep any information you hear as an Advisor private and confidential

## **If you are interested in joining PFAC:**

Please visit: [www.hdgh.org/PFAC](http://www.hdgh.org/PFAC) or contact our patient advocate at **519.257.5111 Ext. 74159**

CHANGING LIVES TOGETHER



HÔTEL-DIEU  
ESTÉ GRACE 1888  
HEALTHCARE



PATIENT & FAMILY  
ADVISORY  
COUNCIL

