

how to implement the care companion

GUIDE FOR HEALTHCARE TEAMS

This is a guide for healthcare teams who would like to implement the *Care Companion* in their setting. See below for the key steps involved, which are based on existing implementation resources from the Ottawa Hospital Research Institute, current literature, and learnings from local field testing.



1 Identify local decision-making needs

What are the common decisions that patients in your setting face?

When do these decisions need to be made?

What are the decision-making needs of patients and carers?

Consider mapping the patient journey, starting with how patients are referred, timing of key appointments, when decisions need to be made, and who is involved in decision-making

Gather information from patients, carers and healthcare professionals via informal conversations, surveys, review of local quality data or literature specific to the health condition or setting

2 Decide if the Care Companion is right for your setting

Do you care for patients with serious health conditions who face difficult preference sensitive decisions?

Do you want to facilitate early, honest conversations about your patient's health condition?

Do you want to support patients to make higher quality decisions and feel more comfortable with their decision?

Examples of serious health conditions include advanced cancer, lung disease, liver disease, renal failure, neurological conditions, frailty and many others

Examples of preference sensitive decisions include commencement or withdrawal of treatment, treatment and care in the event of deterioration, place of care toward the end of life and many others

If you answered **YES** to these questions, the *Care Companion* may be right for patients in your setting

If the *Care Companion* is **not** right for your setting, you can search for an existing high quality decision aid [here](#)

3 Explore implementation barriers

Determine how you will use the *Care Companion* in your setting

Explore what barriers might present

Develop local strategies to make introducing and using the *Care Companion* easier

Capture the views of key people that will use or complete the *Care Companion* including patients, carers, and all members of the healthcare team

Consider all possible barriers that may relate to patients, healthcare professionals, settings, or resources

See the last page for barriers identified by patients, carers and healthcare professionals during field testing of the *Care Companion* and suggested strategies to overcome them

4 Employ implementation strategies

Use the information gained in steps 1-3 for tailored implementation strategies

Empower patients and carers

Provide training for the healthcare team

Secure senior-level buy-in

The best strategies for implementation will be guided by the local needs of patients, carers, and healthcare professionals

Ensure *Care Companion* resources are accessible and invite patients and carers to use them

Healthcare professionals who receive training in shared decision-making have greater confidence and more positive attitudes towards it

Link the *Care Companion* with organisational priorities, values, and standards and highlight how it will support your organisation in achieving them

5 Monitor use and outcomes

To monitor use, determine the number of patients who were eligible to receive the *Care Companion* and whether they received it and engaged with it

To monitor outcomes, consider using one of the measurement tools below, depending on the outcome of interest

Capture feedback from patients, carers, and healthcare professionals to understand how it was used, if any additional barriers were experienced, or if any questions arose

Healthcare teams will be more likely to embed the *Care Companion* into their routine clinical practice if they can see evidence of improved patient outcomes

SURE Test



Screens for decisional conflict

Decision Conflict Scale



Measures the 5 dimensions of decision-making

Decision Regret Scale



Measures regret or remorse for the health decision made

Decision Support Analysis Tool



Evaluates the quality of decision support provided by healthcare professionals

Implementation barriers and strategies

See below for barriers identified by patients, carers and healthcare professionals during local field testing of the *Care Companion* and suggested strategies to overcome them



TIME

Healthcare professionals are time poor

STRATEGIES:

Provide a copy of the *Care Companion* to the patient in advance of the clinical encounter, allowing time to complete the relevant sections in Truth Telling and Values and Preferences

Develop evidence-based 'summary cards' for common decisions and their treatment options for healthcare professionals to use during the clinical encounter

Use the short version of the *Care Companion* to support quick decisions, or if it is more practical for use during the clinical encounter



OVERWHELM

Patient overwhelm or cognitive burden can make shared decision-making difficult

STRATEGIES:

Consider using the simplified version and tailoring communication, information, and timing of the conversation to their needs

Employ additional strategies to ensure equal opportunity for shared decision-making (using paper versions, drawings, plain language, etc.)



COMPETING PRIORITIES

Healthcare professionals have other priorities and forget to introduce it

STRATEGIES:

Generate awareness of the *Care Companion* among the entire healthcare team and integrate into existing workflows

Measure outcomes that are linked to organisational values, so that healthcare professionals can easily see the improvements

Empower patients and carers to introduce the *Care Companion* by ensuring that resources are freely available to them in waiting rooms or online



FEELING UNPREPARED

Healthcare professionals feel unprepared for shared decision-making

STRATEGIES:

Engage with or provide local training, using this guide and accompanying resources to support your healthcare team

Seek out additional training opportunities relating to shared decision-making, communication, and interpersonal skills



SENIOR-LEVEL BUY-IN

Healthcare leaders are not involved in implementation planning

STRATEGIES:

Engage with healthcare leaders, managers and executives throughout implementation

Secure senior-level buy-in by linking the *Care Companion* with organisational priorities such as shared decision-making and person centered care

Ensure that healthcare leaders are part of the core team driving implementation forward