

# Change Idea: CARE Resource Binders

## Why the CARE Resource Binder?

The CARE Resource Binder was co-designed with patients and family caregivers as an individualized tool to facilitate communication, involvement of patients and family caregivers as partners in care, and effective transitions. The binder, given at admission and updated throughout the stay, includes the following co-created resources with additional items added to cater to specific needs:

- General Information: This section includes a welcome and CARE Resource Binder instruction guide, site map, way finding, questions for the care team insert and a staff/provider roles list.
- Education and Discharge Section: A checklist was developed to formalize the discharge and education process. This section helps to prepare the family caregiver and patient for discharge.
- Community Resources Section: Throughout the care journey, a number of community organizations may be recommended for the patient/family caregiver. A list of organizations and contact numbers will be added in this section.
- Additional resources and information as appropriate: (e.g., home and community care information, medication lists, exercise programs). Upon discharge from St. Joseph's, the binder acts as a portable resource and record of the patient/caregiver journey for on-going care needs.

## Process and Implementation

In Spring 2018, co-design sessions were held with staff, patients and family caregivers to develop the CARE Resource Binder. This work started in Specialized Geriatric Services (SGS) including the Geriatric Rehabilitation Unit, Musculoskeletal Rehabilitation Unit and the Geriatric Day Hospital. A working group was established to develop the core components and tools of the binder. Multiple meetings were held over a two month period.

Once the tools were developed, the binder was implemented on a small scale to test the process (a Plan Do Study Act cycle). Five patients/caregivers were given a binder on admission.

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Project team members monitored the use of the binder over the inpatient stay, made notes and interviewed staff, patients and family caregivers at time of discharge. Information gathered was used to modify the binder and workflow process and then re-implemented across the unit with improvements.

Embedding the use of the binder into current workflow was key to the success of this work. The project team worked with unit champions to develop the process and develop a training plan to ensure all staff understood the binder and how to use it. The resulting training approach was multi-pronged: training sessions were held (e.g. staff meetings, team huddles, etc.), emails were sent out to staff and role-specific cue cards were created.

## Results

In Specialized Geriatric Services (inpatient units), over 300 binders have been distributed over a 10 month period. Ongoing evaluation is underway including experience surveys, staff, patient and caregiver interviews and binder audits.

### Patients:

"I would look at that (roles) list before I went and try to match up who was who... it is nice to put names with faces and roles."

"You know what I like the best; that everything is in one spot."

### Caregivers:

"All 3 of us (caregivers) used the binder. We kept it at her (patient) house and used it to check on what was happening with her care."

"Lots of people there so it is nice to have that (roles list) in the front and know what they are doing...I think it is a good idea, it is better for us than it is for her really... it is so helpful."

### Providers:

"This is exactly what we need – sometimes I am discharging a patient whose family I have never met. This binder helps me to communicate information to the caregiver more effectively."

"Every patient and family may use the binder in a slightly different way to suit the needs."

Based on the work in SGS, CARE Resource Binders are being rolled out across the organization. Small working groups are developed in each program to tailor the binder to suit the needs of the patient/caregiver population. Implementation is underway in the following programs: Complex Care, Stroke, Spinal Cord, Veteran's Care, Geriatric Psychiatry and the Breast Care Centre.

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