

Erie St. Clair CCAC eShift

An innovative model of care for high-needs home care patients

What is eShift

eShift is an innovative way to support caregivers who are caring for patients with 24/7 needs at end of life at home.

- The model uses specially-trained Healthcare Technicians (HCT) in the home, working in close partnership with a Directing Registered Nurse (DRN) in a remote location.
- The HCTs are trained to make accurate clinical observations at the bedside, which they relay to the directing nurse using a smartphone.
- The nurse uses the observations to do full assessments of the patients, and then instructs the HCTs about care.
- Technology connects the HCT's smart phone and the RN's computer via a secure web portal.

Why was eshift developed?

Initially, eShift was developed to deal with a shortage of nurses available for "shift nursing." Shift nursing is usually overnight care that enables caregivers to get some rest. The eShift model enables one nurse to provide overnight care for patients in three or four homes by directing to a team of HCTs.



Although eShift started as a way to deal with an HR shortage, we now know it also improves the patient and caregiver experience. eShift helps more people to be supported safely at home, and as they near the end of life, to experience a peaceful death at home.

Who is eShift for?

Any caregiver who is providing 24/7 care, doesn't have a robust support system at home, and is showing signs of stress or burnout. To date the model has been used primarily with families caring for patients at end of life.

Who can refer to eShift

Any member of the care team - care coordinators, physicians, hospital staff, visiting nurses and others. Patients and caregivers are also welcome to make referrals when they anticipate a need. To make a referral, simply connect with the current care coordinator at 1-888-447-4468.



What is eShift for?

When signs of caregiver stress are observed, or the patient's needs increase sharply.

eShift is not just for the final days of life. It's important to look for early signs of burnout and use the eShift model to help keep caregivers healthy.

For patients at end of life, a PPS of 30 is considered a good indicator that it may be time to start eShift, but other factors should also be considered.

When early signs of stress appear, it may be appropriate to start one or two overnight shifts, and then add more as the patient's condition changes. In the final days, eShift can be used seven days a week, enabling the caregiver and family to focus on their relationships with the patient, rather than ongoing care needs.

What are the benefits of eShift?

For patients, eShift means:

- Avoiding hospital or long-term care home.
- Dying in the place of choice (93% of eShift patients die in the place of their choice.)
- No emergent trips to the hospital (eShift has resulted in a dramatic decrease in patient ED visits and hospitalizations, because care and symptom management can be handled at home.)
- Peaceful final days of life.

For caregivers and families, eShift means:

- Staying rested and well.
- Being emotionally present for patients at end of life and better able to handle family dynamics.
- Peaceful final days of life for their loved one.
- Access to an electronic patient record, enabling more family members to share the responsibility.

For health care providers, eShift means:

- Access to a real-time electronic patient record.
- The assurance that patients are cared for and symptoms are managed well at home.

For other health system partners, eShift means:

- Better collaboration among the care team supported by a real-time electronic patient record, resulting in safer, more responsive care.
- A sense of team support while providing at-home overnight care.
- Better use of scarce human and financial resources.
- A rich source of data to further our understanding of the best ways to manage care at home.

Contact Us:

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