February 2013 – March 2013

With most models now at the stage of full scale implementation, there are more and more success stories coming into the HNHB LHIN providing concrete examples of the great work being accomplished. The LHIN and BSO teams have been able to see quantifiable outcomes and correlations to the work with care providers, clients and community organizations.

Jane's Story

The Behavioural Supports Ontario (BSO) project strives to improve the quality of life for both individuals and their caregivers. This is particularly important when the caregiver is a family member fulfilling the role for a relative experiencing cognitive decline and behavior changes.

The BSO Community Outreach Team (COT) received a call from "Jane" who was the primary caregiver for her live-in aunt who was having difficulty with her memory and displaying behavioural shifts. Jane was experiencing caregiver burnout after caring for her aunt for over a year without support. Prior to being referred to the BSO COT Jane had no knowledge of dementia and cognitive impairment and her aunt had no previous diagnosis for her cognitive impairments.

Jane's aunt's increasing confusion and memory loss had resulted in episodes of verbal aggression and frustration with herself and her family. She also stopped taking her daily walks which she used to do for many years. In the six months prior to the BSO COT interventions, Jane's aunt would routinely get lost and expressed daily resentment and frustration due to her inability to perform simple tasks that included eating and bathing.

This frustration was directed at Jane through verbal aggression. Jane was attempting to balance long shifts at work, caring for her aunt and her autistic son, and attending school, which left her exhausted and in need of support. Thanks to connecting with the BSO COT, Jane and her aunt were able to see tremendous improvements in their daily lives and relationship.

The Community Care Access Centre (CCAC) and a respite companionship program have Jane's aunt walking with someone twice a week, attending an Adult Day Program twice a week, bathing with assistance weekly and eating three meals a day. Jane's aunt has been displaying positive behavior and is enjoying a 100% improvement compared to previous frustration and loneliness.

Jane and her family have also been provided with a greater knowledge of the resources and tools available in the community, as well as techniques that can help in their daily routines. The assistance and companionship programs have reduced Jane's anxiety and stress by 90% and she now experiences a stronger relationship with her aunt.

Action Plan Highlights

- Single point of contact for individuals and caregivers to connect with multiple resources and services
- Organization to support individuals and caregivers by taking a lead role in coordinating programs and services across multiple organizations
- Mobile outreach teams to support individuals and caregivers in the community when in crisis
- Mobile outreach teams to support individuals and caregivers in long-term care
- Toolkit for primary care providers to help them assess and manage patients with responsive behaviours

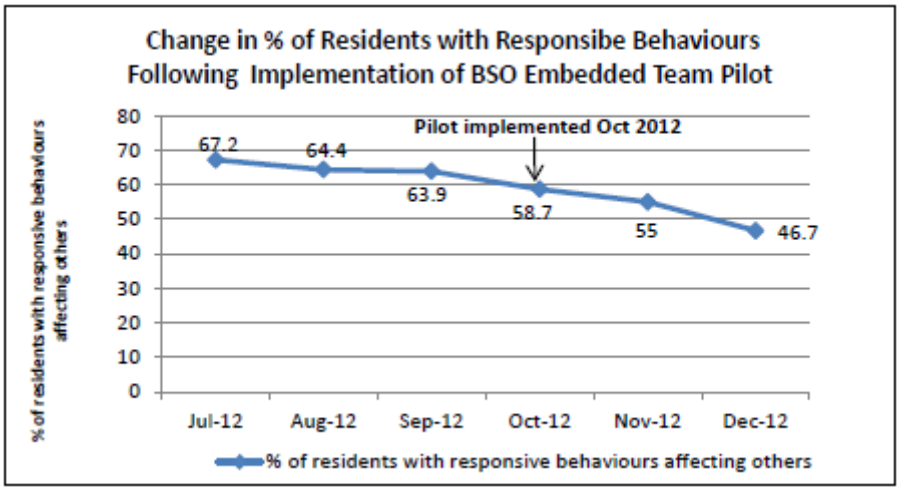
Front line staff and Mobile team Collaboration

The Behavioural Supports Ontario (BSO) project helps not only individuals with responsive behaviours, but also their caregivers and health care providers to provide the best possible environments for delivering quality care for these clients. As part of continuous quality improvement, the BSO Long-Term Care Home (LTCH) Mobile Team initiated a pilot program to assist those long-term care homes experiencing a higher number of incidences of responsive behaviours.

One particular long term care home collaborated in a pilot where the same members of the mobile team were embedded into the home, working daily over a number of months. The members consisted of Registered Practical Nurses (RPNs) and Personal Support Workers (PSWs). Through coaching, mentoring and modeling, Mobile Team members helped build capacity among front line staff in the management of residents with responsive behaviours. This formal and informal learning included topics such as use of Montessori techniques to promote resident engagement and the PIECES assessment tool, brain function in dementia, and use of other assessment tools. The team also started the engagement process with residents that were seen as at risk of presenting future responsive behaviours.

The first three months of the program, which began October 2012, yielded tremendous results with a 27% decrease in the number of residents with responsive behaviours that were affecting others.

All staff in the home, including allied health care providers, front line staff and management, have expressed and acknowledged the positive impact the BSO Mobile Team has had for its residents.



Learn More

- BSO in HNHB LHIN
- BSO Provincial Website

The Behavioural Supports Ontario (BSO) Project is about enhancing care for older adults and seniors with responsive behaviours and their caregivers. The HNHB LHIN's Action Plan outlines four key solutions to enhancing care locally.

***Responsive behaviours:** Includes pacing, wandering, verbal aggression, and physical aggression toward oneself or others.