



ccac **casc**
Community
Care Access
Centre Centre d'accès
aux soins
communautaires

Implementation of Behavioural Supports Ontario (BSO) - HNHB

OACCAC Conference

June 21, 2013

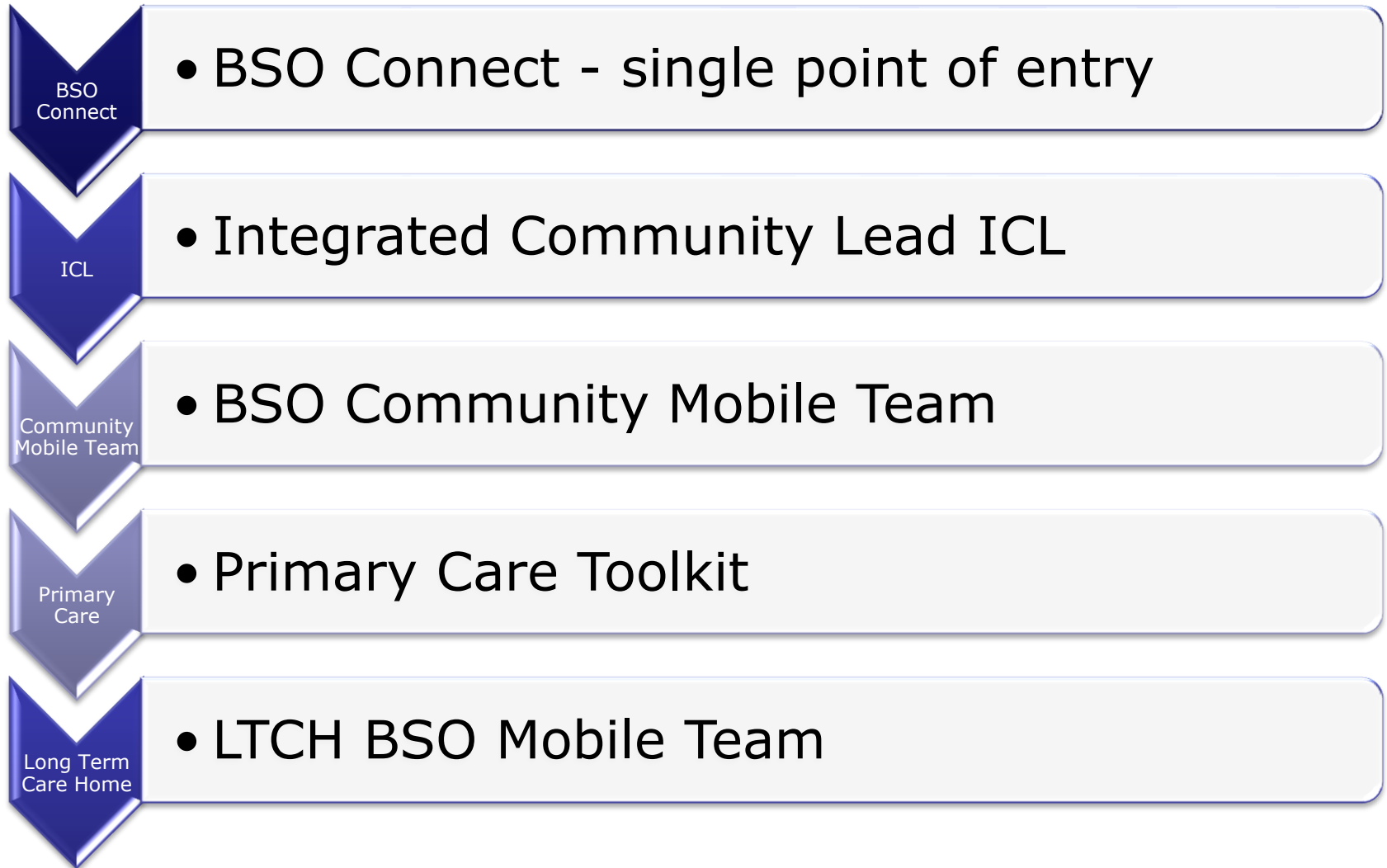
Hamilton Niagara Haldimand Brant CCAC

Agenda

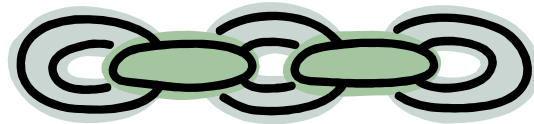


- HNHB BSO models
- BSO Connect
- BSO Connect Screening Tool
- Integrated Community Lead (ICL) Model
- ICL Community Collaborative Action Plan
- Identifying the Populations
- RAI Triggers
- Documentation for BSO
- HNHB Metrics

HNHB BSO Models



- Function completed by HNHB CCAC Information & Referral department
- Focus is on actively connecting callers to the appropriate agency



- BSO Connect has successfully connected 579 patients since implementation!

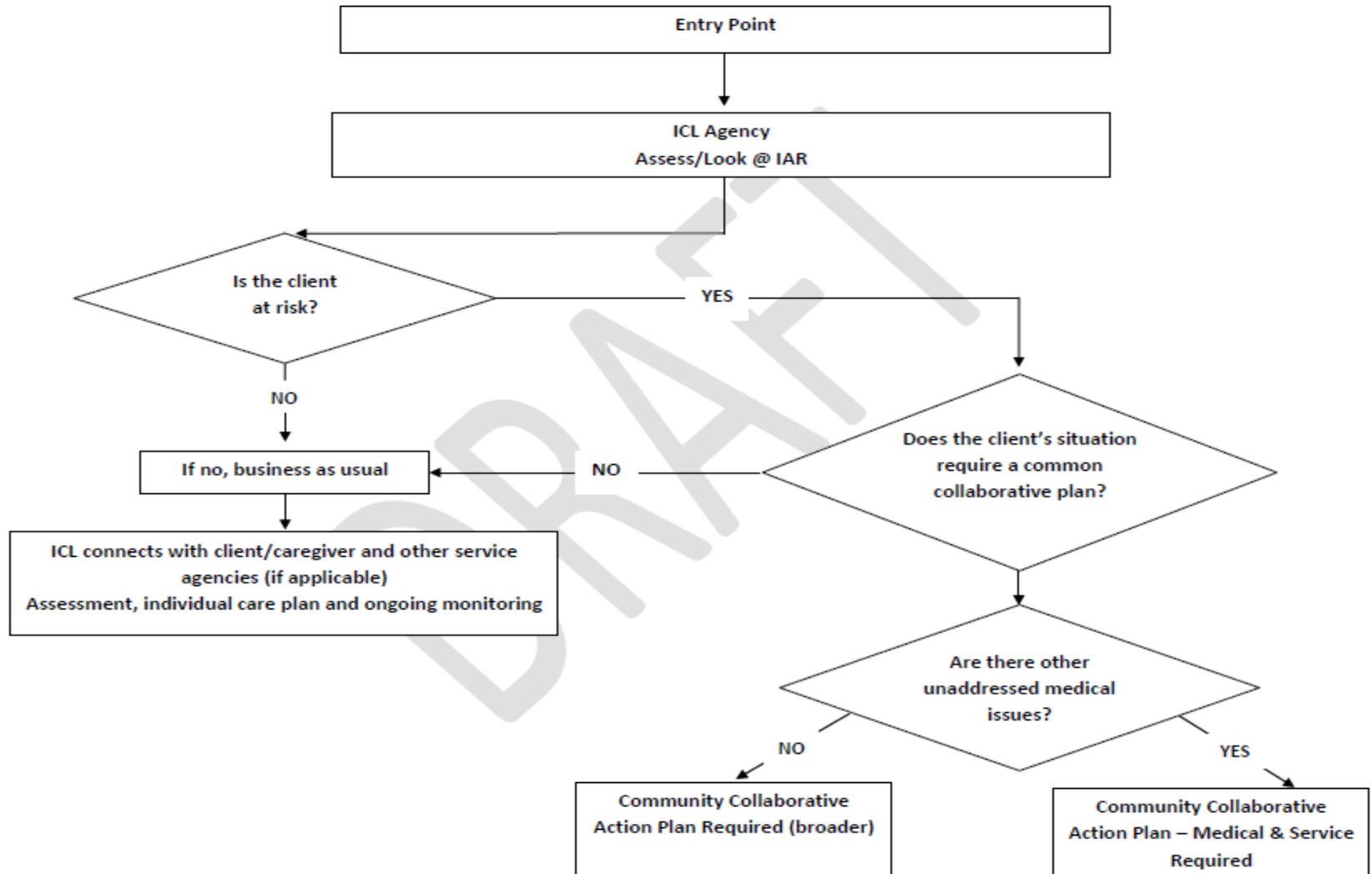
BSO Connect Screening Tool



RESPONSIVE BEHAVIOURS & Risk (by Behaviour)					
BEHAVIOUR	LEVEL OF RISK				CRITERIA
	Very Transient	Minor	Definite	Severe/Controlled	
					Is the person an older adult? Does the person exhibit responsive behaviors? Does the responsive behavior impair daily functioning and/or the ability to maintain relationships? Does the person have an age related cognitive impairment due to complex mental health problems/ dementia/addictions/neurological disorder? Detail Impact of Responsive Behaviours or Comments 1. What has changed? And since when? 2. Are there new behaviours being exhibited? and why? 3. How and or who is being affected?
Aggression - Physical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Aggression - Verbal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Agitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Bizarre behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Confusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Exit seeking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Grabbing onto people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Hoarding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Pacing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Refusing care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Refusing Meds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Repetitive sentences or questioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
Screaming	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Self-harm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Strange noises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Suicidal ideation/threat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Wandering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text.
Withdrawal/ isolation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Click here to enter text
OTHER: Specify					Click here to enter text.

Integrated Community Lead Model

THE INTEGRATED COMMUNITY LEAD (ICL) MODEL



Community Collaborative Action Plan



BSO Community Collaborative Action Plan



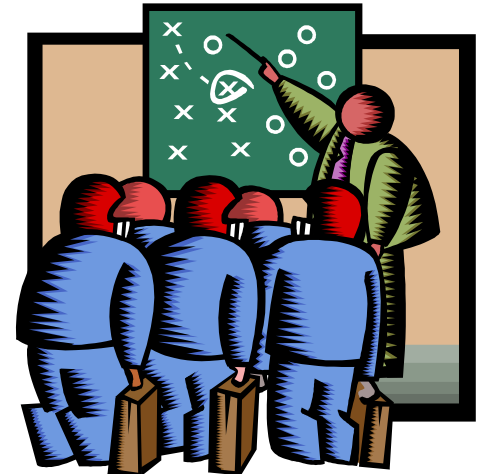
Client Name: _____

Meeting Date: _____

ICL: _____

CARE PLAN (formulated in collaboration with community partners, client, caregiver and/or SDM)

* Goals should be **Specific, Measurable, Appropriate, Realistic, Time limited**)



Presenting Issues	Goals/Targeted Outcomes	Intervention/Action Plan	Responsible Person/Agency	Timeline

Identifying the population

BSO Population:

- Older adults with complex and responsive behaviours associated with cognitive impairments due to complex mental health, addictions, dementia, or other neurological conditions



Identifying the Population: RAI Triggers



In order to ensure we are maximizing utilization of the Integrated Community Lead Model, we looked to the RAI-HC.

- Cognition (B2a = 1 or greater)
AND/OR
- Dementia (J1g and/or J1h = 1 or 2)
- PLUS any behaviours (E3a, E3b, E3c, E3d, and/or E3e = 1 or 2)

Documenting for Behavioural Supports Ontario



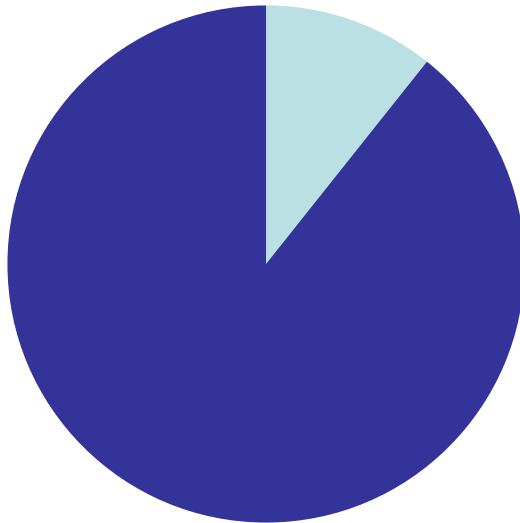
- Needed to identify a method to document Behavioural Supports Ontario in CHRIS
- Needed to identify a method to document Primary Integrated Community Lead (PICL) for each BSO patient
- Used CHRIS referral code to flag patients identified as BSO. PICL is entered in the comments section of the referral code.

HNHB Metrics



HNHB CCAC is reporting BSO metrics quarterly to our LHIN

In our 4th quarter we had 589 patients identified as BSO.



- 376 patients had a documented PICL.
- CCAC was the identified PICL for 334 patients.



Connecting you with care
Votre lien aux soins

CCAC **CASC**

Community
Care Access
Centre

Centre d'accès
aux soins
communautaires