



Event Questions & Answers

“Special Behavioural Support Unit at Sheridan Villa - Mississauga Halton LHIN”

Q: Is the admission process the same for current residents of Sheridan LTC? i.e. those who develop issues with dementia after being admitted as a regular LOS resident?

A: The admission process is the same for current residents of Sheridan Villa LTC. They do not get priority status. It should be noted that we have not had any transfers from normalized units of Sheridan Villa into the SBSU.

Q: Can you provide an overview of the treatments involved?

A: The resident is very closely monitored right from the time of admission; GPA along with the medications prescribed by the medical director as well the psychiatrist play a key role in a fulsome treatment of the individual in stabilizing the resident's behaviours.

Q: Was incremental funding required for the LTC facility to accommodate the patients?

A: Yes, the Mississauga Halton LHIN provides an additional 125/per diem/bed

Q: Currently, how many residents do you have waiting for placement elsewhere?

A: As of today we have 6 residents waiting to be discharged.

Q: Would you be willing to share the webinar material via pdf so those on the webinar could share with other senior leaders?

A: Sure; a copy is available on the AKE Resource Centre: www.akeresourcecentre.org

Q: Is there any relevance of the size of the unit (19), is there an optimum unit size?

A: 19 was the number of beds that fit into the space that was available. The staffing was built around the needs based on the number of beds.

Q: Staffing - are they PSWs, RPNs and RNs in the unit or do you have DSWs (Developmental Services Worker) in the Unit?

A: There are no DSWs working in the unit

Q: When the patients are hospitalized (d/t ALC or behavioral issues) is there a "choice" if family indicates they do not want their loved one in this facility?

A: Just as with Long Term Care home placement there must be consent in order to apply and be admitted into the unit. So yes they always have a choice, even if the unit is recommended.

Q: Beyond GPA training, what other training has been provided for the staff?

A: U-First, Montessori, PIECES, CPI

Q: Do you have current vacancies or a waiting list given the growing population?

A: There are currently no vacancies and there is a wait list. Although we suspect that the wait list does not accurately reflect the need as referring facilities are hesitant to apply given the wait list.



Q: From the hospital, how many come from mental health - either a unit or have been seen by psychiatry?

A: The majority of the residents admitted into the unit have been seen by psychiatry as a part of their treatment prior to being admitted to the unit

Q: What have been the major issues in flow?

A: Major issues have been the inability to discharge patients once their treatment plans are complete due to the lack of long term care beds as well as change of mind by resident families and choosing to stay in Sheridan Villa ONLY

Q: Would you please comment on any other factors (other than LTCH preference), which may impede flow/discharge?

A: At times the receiving long term care facility, may be hesitant to accept the transfer from the SBSU, but we work with them to get them to a comfortable level knowing that we are there to support them if need be and to assist with the transition

Q: What's your average length of stay (LOS) excluding the refractory person?

A: Average LOS is 330 days; Average Treatment days is 218 days

Q: Are the refractory residents of a specific gender--male?

A: No

Q: What is the staffing ratio and have you tracked the number of incidents of aggression, etc?

A: Staffing Ratio:

- For Days & Evenings: 1 RN, 1 RPN & 3 PSWs
- For Nights: 1RPN & 2 PSWs
- A fulltime OT and AT

Yes we do track monthly incidents of responsive behaviours as Resident to Resident & Resident to Staff.

Q: Are you using any BSO staff or resources on this unit?

A: No

Q: Can you talk more about the 2.1 priority status? Is this for all clients or only those who came from LTC?

A: The 2.1 Status is for all residents who are coming from a specialized unit as designated by the ministry waiting to go to LTC

Q: Do you work with a palliative care team for patients who may be refractory to treatment and require that approach to care?

A: Yes, as required

Q: Can you list some of your metrics?

- Origin of Referrals
- Refusals (actual count and reasons)
- Admissions (actual count and where they are being admitted from)
- Discharge Destinations
- Average Treatment days
- Average LOS/Average ALC days



Q: Do you provide family written information about the unit and discharge criteria?

A: The family is provided with a general admission package as is any other client for Sheridan Villa

Q: What are some of the behaviors that are presenting greater challenges?

A: Of course physically responsive behaviours along with inappropriate voiding, hoarding and rummaging

Q: What is the wait time e.g. the longest and the shortest given the 6 people who are on the list?

A: MH-CCAC maintains the waitlist depending on the choice of homes by the resident/families

Q: What performance indicators are you responsible for to the LHIN?

- Occupancy rates
- Wait lists
- Referrals and Acceptance rates and trends
- LOS (treatment time)
- LOS (post treatment)
- Transfer rates to ER during treatment phase
- Transfer rates to ER post treatment (for up to 12 months)
- ALC rates within the MHLHIN
- Discharge trends

Q: Sheridan is an example of an interim assessment unit; would you comment about the potential need for increased specialized resources within specific geographic homes versus having the transitional flow issues in an assessment unit?

A: This is not an assessment unit it's a treatment & transitional unit so that residents are able to be placed in regular long term care facility or destination of choice. The intent is that after the treatment is complete that residents are able to be transitioned to the long term care of their choice, or back home if that is what the family and resident want.

Q: How many residents do you assess and flow per year?

- 2011: 24
- 2012: 20
- 2013: 14
- 2014: 17 [as of June]

Q: Is the 125 per diem from MH LHIN BSO funding or from a separate source. If not BSO, do you receive BSO funding as well?

A: This funding is not from BSO funding. The BSO funding that Sheridan Villa receives does not support the SBSU at all; it is only for the normalized part of the home.

Q: Do residents come from LTCHs in other communities? If so, how does transportation to and from your Home work?

A: Yes clients do come from other LTCHs across all LHINs and a variety of facilities; Social Worker or Families arrange for transportation and the expense is covered by families/PGT



Q: What is the interface with the BSO program? If they aren't involved in the unit, do they play a role in the transition/integration into other facilities?

A: The BSO staff from Sheridan Villa are not a part of the unit but can play a role as they do with many other transitions into the normalized area of Sheridan Villa or other long term care homes that have their own BSO staff.

Q: Do you have BSO funded staff within the home as well as a BSO unit with BSO staffing?

A: Sheridan Villa has their own BSO staff but this staff is not utilized by the SBSU.

Q: Do you have photos of the unit you'd be able to share via e-mail as a resource for everyone participating today?

A: You can see general pictures of the LTC on the Region of Peel Website

Q: Do you have a "snoozelen" room?

A: Yes we do have a desensitization room.

Q: Is the environment structured like LTCHs e.g. wake up times or specific meal times??

A: ALL the rights of residents of Sheridan Villa are respected including wake times. Residents set the pace of the unit and it is incorporated in their customized care plan and it is followed.

Q: Why is Social Work not seen as a staff resource? Would you consider having a Social Worker or Social services worker on your team?

A: Funding limitations; If additional funding resources were provided

Q: The legislation directs SW or SSW support be available to residents in LTC - Is the Legislation different for this unit?

A: This support is available if required from the Social Worker of Sheridan Villa.



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Have a question? Please contact our AKE Knowledge Broker **Jocelyn Hunt**

To learn more about the BSU Collaborative, visit: www.akeresourcecentre.org/BSU-collaborative