Behavioural Supports Ontario

ANNUAL REPORT

2020 - 2021



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provincialBSO@nbrhc.on.ca



@BSOProvOffice



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Message from the Behavioural Supports Ontario (BSO) Provincial Coordinating Office (PCO)

WELCOME

This past fiscal year has been like no other. The challenges presented by the COVID-19 pandemic have compelled BSO teams across all sectors to rapidly adapt to ever-changing environments while continuing to support older adults presenting with responsive behaviours/personal expressions associated with dementia, complex mental health, substance use and other neurological conditions alongside their family care partners and health care providers. Undoubtedly, this group of individuals was among those most significantly impacted by the pandemic, but

also by the strategies put into place to protect them such as: the use of masks, other personal protective equipment (PPE) and isolation measures. Often, these necessary infection control measures resulted in the presentation of new and/or more severe responsive behaviours/ personal expressions and an associated influx of referrals to BSO teams for support. This influx, coupled with the increasing demands for teams to also support a variety of urgent transitions out of acute care and across care settings, propelled BSO teams to further amplify their ingenuity in the provision of behavioural supports.

BSO teams have demonstrated remarkable resilience this fiscal year as they showcased their ability to collaborate with individuals, family care partners and team members, while identifying and implementing creative approaches within complex environments. Following the trial of new strategies, BSO teams shared their successes, resources and promising practices with others by establishing virtual connections through local and provincial networks. Provincially, a variety of resources were created and shared in collaboration with a number of partnering organizations, including various guides, tip sheets and the 'My Transitional Care Plan during the COVID-19 Pandemic' tool.

Outside of the context of the COVID-19 pandemic, other BSO provincial initiatives continued to reach new milestones, such as the Person-Centred Language initiative with the launch of a bilingual eCourse and Word Swap campaign, the development and release of a French version of the BSO-DOS©, and the Behavioural Support in Acute Care Collaborative's release of the 'Behavioural Supports in Acute Care: Current Practices and Opportunities for Growth' Survey Report. New and exciting initiatives were also launched, including the creation of the 'BSO Indigenous Land Acknowledgement Guiding Framework' and the development of 'BSO Foundations', alongside many others which we invite you to explore in this year's BSO annual report.



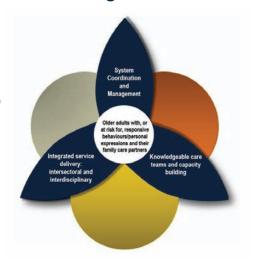
(from left to right) Natasha Fortin (Project Assistant); Tina Kalviainen (Strategic Communications Specialist); Katelynn Aelick (Project Coordinator); Monica Bretzlaff (Manager); Debbie Hewitt Colborne (Project Advisor) — August 2021

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BSO Provincial Framework, Structure & Acknowledgements

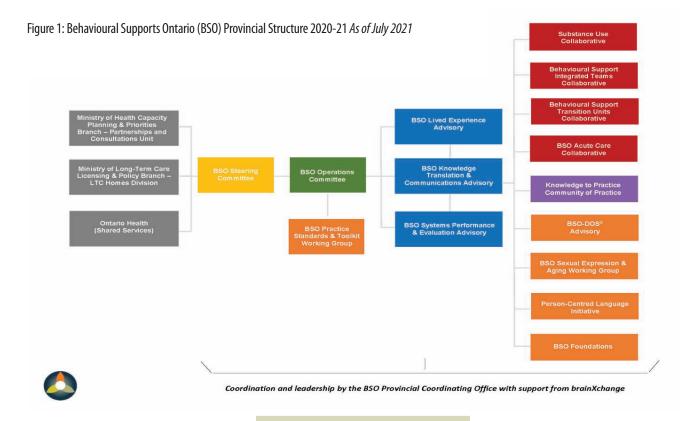
Behavioural Supports Ontario (BSO) provides behavioural health care services for older adults in Ontario with, or at risk of, responsive behaviours/personal expressions associated with dementia, complex mental health, substance use and/or other neurological conditions. BSO also provides support to family care partners and healthcare providers.

BSO was implemented in 2012 to leverage existing resources and enhance coordination across the continuum of care. BSO teams are available to people living in long-term care (LTC), the community (including private dwellings, assisted living, retirement homes, etc.,) and some of Ontario's hospitals. Although BSO models (i.e., team structures) look different across Ontario, all BSO teams are united under common mandate, principles, framework of care, and standards of practice.



The BSO Provincial Structure for 2020-21 is depicted below; containing all of the various reporting requirements, Committees, Advisories, Collaboratives/Communities of Practice and Working Groups.

The BSO PCO acknowledges the guidance and leadership of the key partners who lead the various components of the BSO Provincial Structure. The BSO PCO also expresses sincere gratitude to the BSO Ontario Health Leads and BSO Clinical/Strategy Leads who lead the BSO initiative in each of their respective regions, thus contributing immensely to this annual report. We also wish to acknowledge the support of our host organization, the North Bay Regional Health Centre and our other partner organizations across Ontario.



LEADERSHIP OF THE BSO PROVINCIAL STRUCTURE

BSO PROVINCIAL STEERING COMMITTEE



Nancy Cooper
Director of Quality & Performance,
Ontario Long-Term Care Association;
Chair, BSO Provincial Steering Committee

CO-CHAIRS, BSO PROVINCIAL OPERATIONS COMMITTEE



Monica Bretzlaff Manager, BSO PCO, North East BSO & Seniors Mental Health Regional Consultation Service North Bay Regional Health Centre





CO-CHAIRS, BSO LIVED EXPERIENCE ADVISORY



Mary Beth Wighton
BSO Lived Experience Facilitator



Dawn Baxter
BSO Lived Experience Facilitator

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CO-CHAIRS, BSO KNOWLEDGE TRANSLATION & COMMUNICATIONS ADVISORY



Patricia Boucher (former) Executive Director, Advanced Gerontological Education (term ending September 2020)



Audrey Devitt
Waterloo-Wellington BSO Lead,
St. Joseph's Health Centre
Guelph
(term commencing October 2020)

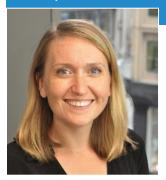


Rosemarie Mangiardi
Quality Improvement and
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Facilitator, Frail Seniors Strategy,
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Marilyn White-Campbell Geriatric Addiction Specialist BSO, Behaviour Support for Seniors Program, Baycrest

CHAIR, BSO SYSTEMS PERFORMANCE & EVALUATION ADVISORY



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Manager, Quality Improvement – Integrated Care
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Audrey Devitt Waterloo Wellington Behavioural Supports System Lead, St. Joseph's Health Centre Guelph



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Waterloo Wellington Geriatric Systems Coordinator
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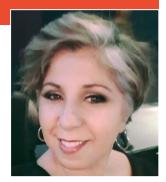
Marilyn White-Campbell
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CO-CHAIRS, BEHAVIOURAL SUPPORT INTEGRATED TEAMS (BSIT) COLLABORATIVE



Teresa Judd Director, Behavioural Supports System, Home and Community Care Support Services, Central West

Jacquie Seguin Erie St. Clair Behavioural Supports Ontario Regional Coordinator, Alzheimer Society of Chatham-Kent



CO-CHAIRS, BEHAVIOURAL SUPPORT TRANSITION UNITS (BSTU) COLLABORATIVE



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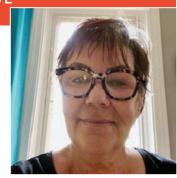


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CO-LEADS, BSO KNOWLEDGE TO PRACTICE COMMUNITY OF PRACTICE (COP)



Kim Simpson Psychogeriatric Resource Consultant, North Simcoe Muskoka Specialized Geriatric Services Program





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Psychogeriatric Resource Consultant, Psychogeriatric Resource Consultation Program of Toronto University Health Network - Toronto Rehab



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Dr. Shilpi Majumder
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(term commencing January 2021)

CO-LEADS, BSO INDIGENOUS LAND ACKNOWLEDGEMENT GUIDING FRAMEWORK



Katelynn Aelick Project Coordinator, Behavioural Supports Ontario Provincial Coordinating Office, North Bay Regional Health Centre



Emily Piraino
Psychogeriatric Resource Consultant,
Algoma BSO Lead,
North Bay Regional Health Centre

brainXchange

The BSO PCO wishes to acknowledge one of its key partners – brainXchange, who continue to be key collaborators and facilitators of the various BSO provincial projects focused on innovation.



Kathy Hickman Knowledge Broker and Knowledge Mobilization Lead



Jillian McConnell
Knowledge Broker and
Knowledge Mobilization Lead



Karen Parrage
Resources and Web Support
Specialist



Dr. Dallas Seitz brainXchange Co-Lead, MD PhD FRCPC Associate Professor, Department of Psychiatry, Cumming School of Medicine, University of Calgary



Projects and Initiatives: Impact

BSO Activity Tracking: 2020-21 Quantitative Data Overview

BSO Activity Tracking captures the behavioural support services provided by BSO team members across the province. Each quarter, data is submitted to the BSO Provincial Coordinating Office (PCO) where it is reviewed, collated and submitted to the Ministries of Health & Long-Term Care. Due to the exceptional circumstances of the COVID-19 pandemic, data from several LTC Homes as well as some community and acute care organizations was not able to be collected and submitted. In result, it is anticipated that the volume of behavioural support provided this fiscal year is significantly underreported - with exception from the Behavioural Support Transition Units. As such, **the summary below should be interpreted with caution.**

Individuals Referred to BSO

From the limited data submitted, a total of 40,048 referrals were captured from across all sectors. Among these referrals, 55.4% (n=22,178) were submitted from LTC, 29.6% (n=11,873) came from the community (i.e., private dwellings, retirement homes, etc.), and 15% (n=5,997) came from acute care.

The provision of support from BSO teams across sectors includes the following activities:

- Assessment and documentation of an individual's responsive behaviours/personal expressions;
- Development or modification of a tailored behavioural care plan aimed at reducing the incidence and severity of responsive behaviours/personal expressions based on identified contributing factors and successful approaches to care;
- Implementation of the new behavioural care plan in collaboration with family care partners and key clinical partners;
- Ongoing monitoring and evaluation of the behavioural care plan with necessary modifications being made based on the person's response to BSO team-implemented interventions;
- Provision of coaching and training to other staff in order to maintain the new plan; and
- Implementation of strategies to ensure adherence to the new plan.

Supporting Family Care Partners

In addition to providing direct support to individuals presenting with, or at risk for, responsive behaviours/ personal expressions, BSO teams provide support to family care partners across sectors. From the limited data submitted, BSO teams supported an average of 14,715 family care partners each quarter. The majority of family care partners being supported by BSO have a family member/loved one in LTC (53.1%; n=7,816 average/quarter), 38.7% (n=5,689 average/quarter) had a family member/loved one in the community, and 8.2% (n=1,210 average/quarter) had a family member/loved one in acute care.

This provision of support can include a number of activities such as:

- Education about the BSO initiative's models and information about the roles of team members;
- Delivering information about responsive behaviours/personal expressions, dementia, complex mental health, substance use and/or other neurological conditions;

- Coaching on approaches, strategies and techniques for preventing or responding to responsive behaviours/personal expressions;
- Validating and offering support related to the stress and strain that may be experienced, and providing information about other available supports, services and resources.

Facilitating Transitions Across Sectors

Leading successful and sustainable transitions for individuals who require a physical move in location remains a priority for BSO teams as moving individuals to a new environment can result in the presentation or exacerbation of responsive behaviours/personal expressions. While transitions were limited in 2020-2021 due to the COVID-19 pandemic, BSO teams, in collaboration with many other teams who support individuals across sectors continued to support a wide variety of transitions. Among the total number of transitions captured and submitted, four types are tracked quantitatively (see below), totalling 7,102 supported transitions.

- 1. From acute care into LTC (n=2,535)
- 2. From acute care to the community (n=1,771)
- 3. From community into LTC (n=2,073)
- 4. From all sectors into tertiary care (n=723)

BSO teams facilitate transitions in many ways, including:

- Sharing existing relevant plans, assessments, personhood information and other documentation to the receiving team;
- Supporting persons and families to prepare for the move through building relationships (e.g. rapport and trust) and the sharing of relevant information and resources;
- Organizing and leading behavioural care conferences to develop and implement a robust transitional care plan;
- Supporting the person and family on the day of the move; and
- Coaching/modeling/training the receiving team regarding strategies to best support the person.

Knowledgeable Care Teams & Capacity Building

BSO's third pillar is focused on fostering knowledgeable care teams and capacity building. In order to monitor this, teams across the province collect data related to education and training. This data largely captures the work of Psychogeriatric Resource Consultants and other BSO Team Members that play a role in clinical and behavioural education in order to build capacity amongst teams supporting persons and families falling under the BSO target population across sectors. The provision of education and training was significantly impacted during the COVID-19 pandemic, with the need to shift to online learning, educators being re-assigned in some regions, and many education sessions being cancelled due to staffing concerns. Despite these challenges, a total of 6,122 education/training sessions were captured, with a total of 51,883 participants.

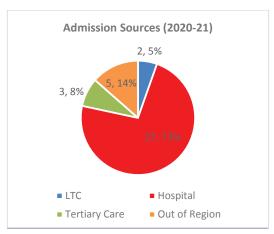
BSO-Funded Behavioural Support Transition Units (BSTUs)

The BSO PCO collects data from the five BSO-funded Behavioural Support Transition Units (BSTUs), also called Behavioural Support Units (BSUs), Specialized Behavioural Support Units (SBSUs) and Transitional Behavioural Support Units (TBSUs). The five BSTUs included in the following dataset are those that are either fully or partially

funded using BSO resources: (1) Baycrest's Apotex Centre Transitional Behavioural Support Units (Toronto Central),

(2) Cummer Lodge's Behavioural Support Unit (Central), (3) Perley and Rideau Veterans' Health Centre Specialized Behavioural Support Unit (Champlain), (4) Finlandia Villlage's Enhanced Care Seniors' Support Program (North East), and (5) Hogarth Riverview Manor's Regional Behavioural Health Unit (North West).

During the 2020-2021 fiscal year, these five BSTUs received a total of 152 new referrals. Over the course of the year, a total of 37 individuals moved into the BSTUs while 45 moved out. The following charts depict the admission sources (i.e., where residents moved from) and discharge destinations (i.e., where residents moved to) for the BSTUs during 2020-2021.



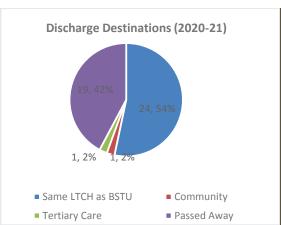


Figure 2: Admission Sources and Discharge Destinations - BSO-supported BSTUs (2020-2021)

As shown in the charts above, the majority of individuals moving into the BSTUs came from hospital (73%; n=27) and the most common destination upon moving out of the BSTUs was to the same LTC Home that houses the BSTU (54%; n=24). The average length of stay among those who moved out of the BSTU during the 2020-2021 fiscal year was 469 days.

Qualitative Stories

In 2020-2021, the BSO PCO continued the collection of BSO qualitative stories, receiving a total of 89 stories. Among the 89 stories, 43% were from LTC (n=38),

31% featured stories that spanned multiple sectors (n=28), 16% were from the community (n=14), 9% were from acute care (n=8), and 1% were from BSTUs (n=1).

The 50 most common words from the 2020-2021 qualitative stories are illustrated in the word cloud.



Figure 3: Fifty most common words used in BSO Qualitative Stories (2020-2021)

BSO Evaluation Project Updates

BSO Qualitative Evaluation

In order to highlight the role of BSO, leading up to and during the COVID-19 pandemic, the BSO Provincial Coordinating Office engaged Drs. Frances Morton-Chang and A. Paul Williams to conduct an updated qualitative evaluation of BSO's impact using multiple evidence sources. The full report, to be released in fall 2021, will draw upon three complementary resources to inform a set of recommendations for BSO moving forward through the remainder of the COVID-19 pandemic and beyond.

- ✓ 269 qualitative stories written by BSO teams across Ontario between the first quarter of 2018, where the first qualitative evaluation left off, and the second quarter of 2020 when the pandemic was well underway.
- ✓ 20 key informant interviews conducted in late 2020 and early 2021 with BSO team members and collaborators from all regions of the province across different care settings and diverse professional/occupational groups
- 13 consultations conducted in the spring of 2021 with people with lived experience via a focus group and individual interviews.

Projects and Initiatives: Innovation

Ontario Best Practice Exchange: Substance Use Collaborative

Purpose: To bring together health care professionals, leaders and individuals with lived experience in order to promote person & family-centred best practices related to substance use.

Co-Chairs: Marilyn White-Campbell (Geriatric Addiction Specialist, Baycrest), Audrey Devitt (Waterloo Wellington BSO System Lead) & Jane McKinnon Wilson (Geriatric Systems Coordinator, CMHA Waterloo Wellington)

Lead Collaborators: Jillian McConnell (brainXchange) & Debbie Hewitt Colborne (BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

- Ongoing support in promoting monthly <u>Geriatric Addictions Rounds</u>. These efforts have resulted in significant growth in participation both live and through archived events (see table).
- ✓ Creation and promotion of a new resource <u>Supporting Safer Smoking Practices & Smoking Cessation</u> during <u>COVID-19</u>.
- Supported the development and dissemination of <u>Cannabis and Older Adults: Know the Facts!</u>, a fact sheet regarding cannabis use in older adults for the general public.

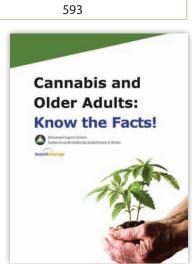
Season	# of Registered OTN Sites	# of Webcast Participants * In addition to OTN sites	# of Times Archived Rounds Accessed	
2016/17	86	n/a	n/a	
2017/18	125	127	56	
2018/19	144	291	214	
2019/20*	82	340	431	
2020/21*	N/A	713	593	

^{*} Change to Zoom in March 2020

Looking Ahead:

A Sneak Peek into 2021-22

✓ A Twitter campaign was launched in April & May of 2021 to promote the resource Cannabis and Older Adults: Know the Facts!





Ontario Best Practice Exchange: Behavioural Support Integrated Teams (BSIT) Collaborative

Purpose: To bring together health care professionals, leaders and individuals with lived experience to identify the critical elements for supporting successful transitions using the

combined team approach across sectors and across providers.

Co-Chairs: Teresa Judd (Director, Behaviour Support System, Central West Home and Community Care Support Services) & Jacquie Seguin (Erie St. Clair BSO Regional Coordinator, Alzheimer Society of Chatham-Kent)

Lead Collaborators: Jillian McConnell (brainXchange) & Katelynn Aelick (BSO PCO)

Project Assistant: Stephanie Moncion (BSO PCO)

Key Accomplishments:

- ✓ Following a growth in referrals to support transitions across sectors during the COVID-19 pandemic, a decision was made to create a tool that could assist in the planning and facilitation of various types of moves for the BSO population.
- Rather than starting from scratch, Collaborative members decided to adapt 'My Transitional Care Plan', a tool created by the BSO/ Seniors' Mental Health Regional Consultation Service at the North Bay Regional Health Centre, into a version that would contain elements specific to the COVID-19 pandemic. During monthly Collaborative meetings, each section of the original tool was reviewed and adapted to the COVID-19 context.
- Developed and released version 1.0 of 'My Transitional Care Plan during the COVID-19 Pandemic' (MTCP-C19) in October 2020 to trial its use and collect feedback. Alongside the tool, the Collaborative released guidelines to support its implementation and use, and a completed example.

Looking Ahead: A Sneak Peek into 2021-22

- ✓ Using feedback collected during the trial period, version 2.0 of MTCP-C19 was released in April 2021 in English and in French. Additional amendments were made in May 2021 to reflect updated provincial directives concerning COVID-19 isolation requirements which resulted in the release of version 2.1.
- ✓ Supported the dissemination of MTCP-C19 through presentations at various meetings, webinars, and conferences and fostered its implementation at provincial, regional, and local levels.

Even though completing a tool like this can take extra time, the change it can make in ensuring a more positive experience for [...] all involved in care is beyond worth the initial time to complete it. It's essential that ALL partners play a role in creating, contributing to and reading, understanding and disseminating this information in order to it to be effective. We all have a part to play in proactively utilizing the tools available, and to connect and regroup when things don't go as planned".

Jenn Tremblay, ESC BSO CLCC (RN)

'My Transitional Care Plan during the COVID-19 Pandemic' and its supporting resources are available for download here.



Ontario Best Practice Exchange: Behavioural Support Transition Units (BSTU) Collaborative

Purpose: To bring together health care professionals, leaders and individuals with lived experience in order to promote person & family-centred best practices related to BSTUs.

Co-Chairs: Mary-Ellen Parker (Chief Executive Officer, Alzheimer Society of Chatham-Kent) (term ending April 2021), Krista Schneider (BSO System Navigator – Windsor Essex, Alzheimer Society of Chatham-Kent), Allison Corby (Social Worker – Fairview Lodge, Regional Municipality of Durham) and Sarah Clark (Nurse Manager, BSU – McGarrell Place).

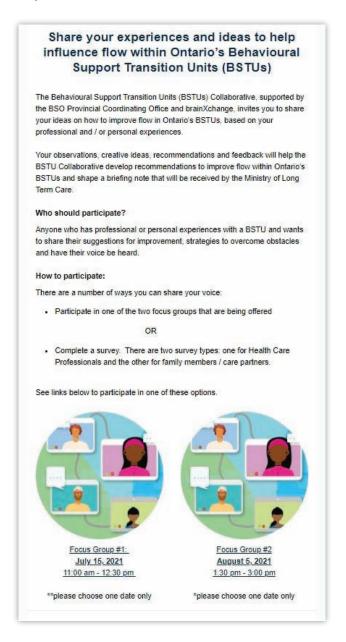
Lead Collaborators: Jillian McConnell (brainXchange) and Katelynn Aelick (BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

- Collaborative meetings allowed members to share best practices and creative strategies to care for current BSTU residents in the COVID-19 environment and support resident flow in and out of the BSTUs.
- Hosted a presentation from the Ministry of Long-Term Care (MLTC) on the LTC Placement Process and the impact of placement ranking on movement in and out of Ontario's BSTUs. Following this presentation, the Collaborative agreed to embark on the creation of a set of recommendations to improve flow in and out of Ontario's BSTUs in the context of COVID-19 and beyond.

- Developed and released a survey for health care providers and people with lived experience in Ontario's BSTUs to collect successful strategies and innovative ideas to improve flow in Ontario's BSTUs. Two focus groups were held with healthcare providers working in or in collaboration with Ontario's BSTUs.
- ✓ Using the results from the surveys and focus groups, a series of recommendations to improve flow in Ontario's BSTUs will be created.



Ontario Best Practice Exchange: Behavioural Supports in Acute Care Collaborative

Purpose: To bring together health care professionals, leaders and individuals with lived experience in order to promote and spread best/emerging practices in providing person and family-centred behavioural supports within acute care hospitals.

Co-Leads: Terri Glover (BSO Strategic Lead, Hamilton Niagara Haldimand Brant, Hamilton Health Sciences) & Nancy Lesiuk (Regional Lead Behavioural Supports Ontario, Champlain, Manager Geriatric Outreach, Royal Ottawa Mental Health Centre)

Lead Collaborators: Jillian McConnell (brainXchange) & Debbie Hewitt Colborne (BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

Release of the <u>'Behavioural Supports in Acute Care:</u>
Current Practices and Opportunities for Growth' Survey Report
& Key Recommendations'.

With over 250 respondents from across Ontario, the survey provided a snapshot of current practices, gaps and opportunities for growth within acute care hospitals in supporting older adults living with, or at risk of, responsive behaviours/personal expressions. The survey was successful in gathering viewpoints from acute care clinicians, BSO clinicians, acute care and BSO leaders as well as persons with lived experience.

The report features 11 recommendations highlighting seven key themes:

- Capacity Building
- Adequate Resources
- Specialized Team Members/Services
- System Level Lens Interagency/Interdisciplinary Collaboration
- Meaningful Engagement
- Purpose Built Environment
- Person and Family Partnered Care

Results shared in the report will help to inform leaders and team members in future planning regarding how best to support older adults living with, or at risk of, responsive behaviours/personal expressions within the acute care setting.

Creation of additional knowledge translation resources to support the dissemination of the report, including a briefing note, the 'Behavioural Supports in Acute Care: Collective Voices Leading to Key Recommendations' infographic and a slide deck.





Knowledge to Practice Community of Practice (K2P CoP)

Purpose: To bring together professionals across Ontario who have a shared passion for capacity building and fostering knowledgeable healthcare teams. The CoP promotes the utilization of the <u>Knowledge to Practice</u> <u>Process Framework</u> to guide knowledge to practice work.

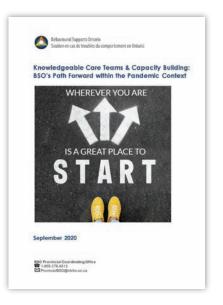
Co-Leads: Dawn Robinson (Psychogeriatric Resource Consultant, Alzheimer Society Peel) & Kim Simpson (Psychogeriatric Resource Consultant, North Simcoe Muskoka Specialized Geriatric Services Program)

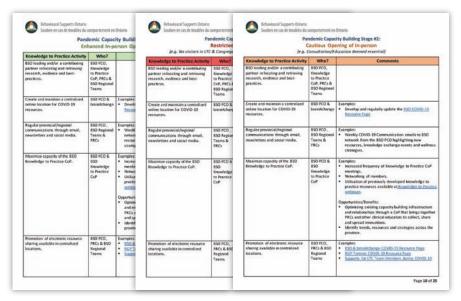
Lead Collaborators: Karen Parrage (brainXchange) & Debbie Hewitt Colborne (BSO PCO)

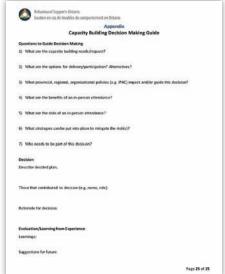
Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

- ✓ The group shifted focus to the sharing of resources, strategies and knowledge to practice efforts during the pandemic.
- Facilitated opportunities for BSO's Core Curriculum Partners to provide updates and dialogue with Knowledge to Practice CoP members regarding virtual curriculum delivery in response to the pandemic.
- BSO leaders, BSO clinical educators (e.g. Psychogeriatric Resource Consultants) and Core Curriculum Partners, developed and released Knowledgeable Care Teams & Capacity Building: BSO's Path Forward within the Pandemic Context; a practical resource to guide BSO teams and partners in planning capacity building activities during various stages for the pandemic. The resource also includes a Capacity Building Decision Making Guide to assist in deciding if events should be delivered virtually or in-person.







Dementia Observation System (DOS) Working Group

DOS Working Group Purpose: To standardize and optimize the Dementia Observation System (DOS) as a common tool for the collection of objective, accurate data to be used to identify patterns, trends and contributing factors of responsive behaviours/personal expressions.

Lead Collaborators: Dr. Lori Schindel Martin (Professor, Ryerson University) & Debbie Hewitt Colborne (Project Advisor, BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

Since its release in May of 2019, the BSO-DOS© has been downloaded a total of >2700 times (as of March 2021). While most downloads have been concentrated in Ontario, the map illustrates its national and international reach.



- ✓ Ongoing support in the dissemination and implementation of the BSO-DOS© through:
 - Presentations (see page 43).
 - Integration of the BSO-DOS© into updated curriculum by education partners (i.e. 3rd edition of Gentle Persuasive Approaches and 7th edition of PIECES™).
 - Posting the BSO-DOS© on partner organization webpages (e.g. Canadian Foundation for Healthcare Improvement and the Registered Nurses' Association of Ontario's Long-Term Care Best Practices Toolkit) to promote the use of the tool through trusted sources.
 - Alignment of the language of the BSO-DOS© within Think Research's new Responsive Behaviour Clinical Support Tool (released in August 2020).
 - Collaboration with various vendors and clinical informatics teams to support the development of the BSO-DOS© electronically.
- Collaborated with francophone clinicians to create and release a French version of the BSO-DOS© (Le Soutien en cas de troubles du comportement en Ontario Système d'observation de la démence), along with the BSO-DOS© User Guide and Start-Up Checklist in French. All publically available here.

- ✓ Development and release of the French Resource Manual to support francophone users of the BSO-DOS©.
- ✓ Transforming the Dementia Observation System (DOS) Working Group into the BSO-DOS© Advisory in order to ensure the integrity and sustainability of the clinical tool.





BSO Sexual Expression & Aging (SEA) Initiative

Purpose: To bring leaders and experts in the field of responsive behaviours/personal expressions together to plan and oversee the development, implementation and evaluation of standardized, open-access, e-learning modules specific to the sexual expression and intimacy of the BSO population.

Project and Working Group Co-Leads: Dr. Birgit Pianosi (Adjunct Professor, Laurentian University), Dr. Lori Schindel Martin (Professor, Daphne Cockwell School of Nursing, Ryerson University), Dr. Rosemarie Mangiardi (Quality Improvement and Knowledge Translation Facilitator, Frail Seniors Strategy, South West Behavioural Supports Ontario), and Kristy McKibbon (Coordinator, Behavioural Supports Ontario Hamilton Niagara Haldimand Brant, Hamilton Health Sciences). Subgroup Co-Leads: Grey Literature Subgroup: Sylvia Davidson (Manager, Occupational Therapy, Physiotherapy and Therapeutic Recreation, Baycrest Health Sciences) and Hazel Sebastian, (Psychogeriatric Resource Consultant, St. Michael's Hospital). Academic Literature Subgroup: Carey Bruyere (Chatham-Kent BSO Lead Team Director Mennonite Home, Leamington) and Kim Simpson (Psychogeriatric Resource Consultant, North Simcoe Muskoka Specialized Geriatric Services).

Lead Collaborator: Katelynn Aelick (BSO PCO)

Project Assistant: Stephanie Moncion (BSO PCO)

Key Accomplishments:

As recipients of the Regional Geriatric Program Central's Specialized Geriatric Services Quality Improvement Grant (2019), the group created an introductory e-learning module on sexuality and intimacy for people living with dementia. To do so, the working group:



- Secured a vendor (Dialectic Solutions, Guelph, ON) and website host (Frailty E-Learning); and
- Relied on the two summaries, finalized in the previous fiscal year by the BSO SEA Academic and Grey Literature Subgroups, to create four case studies, each with interactive exercises and custom graphic art.
- ✓ Presented at the Canadian Academy of Geriatric Psychiatry (CAGP)-Canadian Coalition of Seniors Mental Health (CCSMH) Conference (see page 43)
- ✓ Submitted two grant applications to the Alzheimer Society Research Program and the Centre and Aging and Brain Health Innovation to secure further funds in order to design and develop additional emodules.

- ✓ Translated the e-learning module 'Dementia and Sexuality: An Introduction' into French;
- ✓ Completed an audio narration of the module in both English and French;
- ✓ Developed pre and post surveys to evaluate the introductory e-learning module in both English and French; and
- ✓ Received confirmation of funds for e-modules 2, 3 and 4 from the Alzheimer Society Research Program totalling \$100,000.

BSO Practice Standards & Toolkit Working Group

Purpose: To bring BSO provincial leaders and clinicians together to plan and oversee the development and implementation of BSO provincial practice standards and common toolkit. The toolkit will be a resource for all BSO team members filled with with practical tools that will assist in standardizing and streamlining BSO care across the province.

Co-Leads: Adele Loncar (Program Evaluation Coordinator, Geriatric Psychiatry & Behavioural Support Outreach, Champlain, Royal Ottawa Mental Health Centre), Christine Pellegrino ([former] Regional Coordinator BSO, Mississauga Halton LHIN), Suzanne Saulnier (Director of Behaviour Support Services, LOFT Community Services), and Kim Schryburt-Brown (Clinical Project Resource Consultant, Providence Care)

Lead Collaborator: Debbie Hewitt Colborne (BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

- Engaged in extensive consultation, planning and development of various tools and resources to be included in a BSO Provincial Toolkit based on the BSO Provincial Practice Standards (released March 2020), including:
 - Provincial clinical standardized documentation templates to guide a BSO assessment and a BSO tip sheet to support knowledge translation of key personalized approaches and strategies in the context of the individual's personhood and strengths.



- A resource highlighting the various tools that support comprehensive behavioural assessment and evaluation.
- A resource that provides possible contributing factors and strategies to consider for specific responsive behaviours /personal expressions (aligned with the BSO-DOS©).
- ✓ Collaborated with brainXchange to create an online space to host the electronic Toolkit.

- Release of Assessment Tools: Supporting Comprehensive Behavioural Assessment & Evaluation.
- ✓ Planning and launch of the BSO Provincial Toolkit for early adopting regions.



BSO Foundations

Purpose: To adapt and provincially spread the Behaviour Support Resource Team Lead Training (BSRT), a training program developed by the Psychogeriatric Resource Consultation Program of Toronto at the Regional Geriatric Program of Toronto. The new BSO Foundations curriculum will align with the BSO Provincial Toolkit and be made available to BSO team members across the province, in all sectors.

Co-Leads: Heli Juola (Program Lead & Psychogeriatric Resource Consultant, Psychogeriatric Resource Consultation Program of Toronto, Sunnybrook Health Sciences Centre) and Mario Tsokas (Psychogeriatric Resource Consultant, Psychogeriatric Resource Consultation Program of Toronto, University Health Network - Toronto Rehab)

Lead Collaborator: Debbie Hewitt Colborne (BSO PCO)

Project Assistant: Natasha Fortin (BSO PCO)

Key Accomplishments:

- ✓ Established the following goals for the training program:
 - To increase understanding of the BSO role; and to foster confidence in the ability to fulfill and thrive in the role (through team building, communication and change management skills)
 - To enhance knowledge of responsive behaviours/personal expressions
 - To support the application of BSO tools and frameworks found in the BSO Provincial Toolkit
- ✓ Engaged stakeholders (e.g. BSO Leaders, Psychogeriatric Resource Consultants, BSO Clinicians and core curriculum partners) in the creation of the BSO Foundations curriculum.
- ✓ Transformed the Behaviour Support Resource Team Lead Training into the new BSO Foundations curriculum based on stakeholder feedback and alignment with the developing BSO Provincial Toolkit.
- Creation of a train-the-trainer model to equip Psychogeriatric Resource Consultants to deliver the BSO Foundations curriculum to BSO team members within their local regions.

Looking Ahead: A Sneak Peek into 2021-22

✓ Launch of BSO Foundation for early adopting regions, beginning with train-the-trainer sessions.



BSO Regional Highlights:

ERIE ST. CLAIR (ESC)

- After successfully piloting the My Transitional Care Plan during the COVID-19 Pandemic tool (developed by the Behavioural Supports Integrated Teams Collaborative) in Windsor Essex, numerous teams across the ESC region are now utilizing the tool to support transitions across sectors.
- Specialized Social Therapists supported meaningful activities for persons living in retirement homes, and enhanced capacity building and culture change for staff by modeling interventions to support residents in isolation.
 Retirement Homes in the ESC region are now supported as part of the expanded BSO services in the community.
- BSO and the Alzheimer's Society Chatham Kent were the first to pilot the Gentle Persuasive Approaches (GPA) program online. The ESC team supported content creation and various logistical needs.



- Creation of an instructional video on how to perform a COVID-19 test on a LTC resident living with dementia. This was shared with the community paramedic program and Home and Community Care Support Services (HCCSS).
- ✓ Continued to provide LTC homes with isolation support with onsite BSO staff.
- ✓ Collaborated with local paramedic programs to support staff testing in LTC.



SOUTH WEST (SW)

While some work was temporarily paused during the COVID-19 pandemic, there has been consistent movement forward toward the priorities of the South West Frail Senior Strategy, which encompasses South West Behavioural Supports Ontario.

- Four sub-regional geriatric hubs were developed, inclusive of behavioural support services and coordinated intake pilots were undertaken within two of these hubs.
 - o 200 older adults received locally coordinated access to behavioural supports, geriatric medicine and geriatric mental health services.
 - Average time from referral to disposition was reduced from
 7 days to 1 day during these two pilots.
- An online resource to mobilize key information to older adults and caregivers throughout the COVID-19 pandemic was developed in collaboration with partners from the Alzheimer Society, long-term care homes and Community Support Services.
- A <u>Regional Virtual Care Guidance Document</u> was developed through collaboration with Specialized Geriatric Services, Behavioural Supports Services and Community Support Services.



- This regional work provided the evidence base for development of a <u>Provincial Decision-Making Tool</u> to support virtual delivery of the Comprehensive Geriatric Assessment.
- With support from the South West Frail Senior Strategy, 23,000 Elder Abuse Resources were created and disseminated to 450+ primary care, law and financial planning offices.

- ✓ 8000+ referrals were accepted by Behavioural Support Services across the region.
- ✓ 3500+ older adults accessed specialized geriatric care, including behavioural support services, through coordinated intake.
- An additional 380 older adults with the Frail Senior Strategy were supported in the 2nd half of 2020/21 through additional health human resource investments in two sub-regions of the South West.
- ✓ 600+ BSO training/education sessions were offered with 3000+ attendees.
- \checkmark 600+ BSO training registrations were secured for 2021/22.
- ✓ 30+ Community Paramedics trained in Senior Friendly Care.
- ✓ 100+ BSO indicator definitions were refreshed in collaboration with BSO stakeholders across the region.

WATERLOO WELLINGTON (WW)

System Coordination and Management - Process Improvement & Partnership

Waterloo Wellington BSO funded team members are relentless change agents who helped to identify and respond to the barriers of the pandemic. Guided by the values of their organization, team members launched numerous initiatives to address new pressures with an eye to meeting the quadruple aim of the Ontario Health Teams. Throughout the 2020-2021 year, BSO staff pivoted to respond quickly, flexibly and creatively to a neverending stream of challenges. Here are just a few of their many successes:

- BSO funded team members collaborated with partners across the Specialized Geriatric Services (SGS) system to develop and implement innovative practices/partnerships, which enabled ongoing access to essential services (Geriatric medicine & Geriatric psychiatry) during the first two-waves of the pandemic
- SGS Clinical Intake identified and responded to fluctuations in SGS service capacity by implementing pandemic triage and referral flow management procedures. This ensured that clients were linked with the most appropriate (available) services while also providing suggestions for alternate supports for client's whose access to service were delayed due to the pandemic's impact on partner programs.
- BSO PRC Program ALC Strategy Transition Support Tables across the region were facilitated by the PRC's to ensure successful patient transitions between Acute Care, LTC Homes and Community Supports.

Regional Achievements & Celebrations

Integrated Service Delivery – Intersectoral and Interdisciplinary Community Teams

Throughout the pandemic, BSO funded teams deepened pre-existing intersectoral partnerships by exploring new opportunities to work creatively with system partners to promote access to care for vulnerable older adults. Key examples are:

- BSO team members supported the integration of several geriatric specialists within a common Electronic Health Record enabling new opportunities for collaboration and joint care planning.
- BSO & BSO funded IGSW programs rapidly developed hybrid models of client care to ensure that there were no service interruptions for the client's served by these programs at any point during the pandemic. Unique outreach strategies were implemented to increase access to specialists for vulnerable older adults (i.e., IGSW/BSO team member completing a home visit while helping to facilitative a virtual visit with a specialist).
- ✓ BSO teams created the BSO & NLOT Virtual Care Toolkit, completed various evaluations and took part in conference presentations.

HAMILTON NIAGARA HALDIMAND BRANT (HNHB)

- During the pandemic, the BSO LTC team was successful in securing one-time funding for therapeutic supplies for each of the LTC facilities in HNHB region. Each individual package included iPads, iPods, mechanical cats, Montessori type activities, potted plants, and wall murals. The supplies contributed to patient and family engagement, socialization, and were well received by the LTC Homes.
- The two BSO Community Teams were successfully realigned in October 2020 to function as one integrated, cohesive community team to better meet the needs of the population they serve, with flexibility



Photo displaying some of the therapeutic supplies provided to the 86 LTC Homes in HNHB

- to provide short term, long term and/or transitional supports.
- The BSO Community Team referral process was adapted to utilize the BSO SGS Central Clinical Intake program in October 2020. This helped to streamline initial assessments, reduce referral duplication and assist with timely response to referrals.

Regional Achievements & Celebrations

- The HNHB BSO Strategic Team, supported by the BSO Community Team Lead presented on Management of Responsive Behaviours at the 10th Annual Geriatric Training Program held by the Regional Geriatric Program central in Oct 2020. A wide range of healthcare professionals, including nursing, physicians, and other allied health professionals attended this conference. The attendees felt that the information presented was relevant to their practice and reinforces the need for education on the management of responsive behaviours.
- One of the BSO Clinical Leads within the hospital successfully supported the transition of a client who was in hospital for approximately 4 years, and was a challenging case for the hospital staff involved in his care. Support included providing education to the front line staff around development of a behavioural care plan and management of responsive behaviours. Several community partners within the HNHB region, along with Baycrest and The Virtual Behavioural Medicine program collaborated to successfully transition the client to LTC. The resident is now thriving in his new LTC Home.

"Overall, our feedback from families with everything that was provided to us from BSO has been nothing but positive. We were able to provide individuals with items that have brought upon so much joy and stimulation for their individual needs and interests. We can't thank BSO enough for everything they have done for our residents and the positive changes that they made happen."

- LTC Home in HNHB regarding the response to the one-time therapeutic supplies

CENTRAL WEST

- Dufferin Behaviour Support Worker offered weekly virtual Montessori based activities every Wednesday afternoons for small groups.
- BSO Community Resource Nurses adapted the referral process to support increased transitional support from hospital for behavioural complex patients bound for community or LTC increasing linkages and expediting admissions under MLTC directive #3.
- High Intensity Supports at Home Program (HISH) launched in Q4 of this year. The program was supported by the Neurobehavioural Nurse Practitioner and BSO Community Resource Nurses and focused on hospital diversion and BSO patient safety in the community.



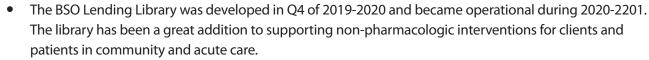
Regional Achievements & Celebrations

✓ Redesign of Therapeutic Recreation program and relaunch in spring of 2021.



MISSISSAUGA HALTON (MH)

- The BSO Community Outreach Nurse position was developed at the end of 2019-2020 with additional funding, in partnership with Canadian Mental Health Association Peel Dufferin. This position became operational in 2020-2021, aligned with existing crisis supports in the community. This role provides intensive short-term support to the BSO population and their families in the community.
- The community BSO team spearheaded the implementation of dementia friendly name badges for all BSO team members. The badges feature a large picture of the team member along with their name so that residents/client/patients could still "see" the person behind all the PPE.
- Since in person education and conferences were put on hold due to the pandemic, the Mississauga Halton Regional BSO Team did not let that stop their capacity building efforts, instead, a virtual BSO series was developed. In 2020-2021, the team, in collaboration with system partners, was able to virtually offer the following sessions:
 - o Compassion Fatigue
 - o Managing Conflict & Creative Problem Solving
 - Internal & External Trials of Living & Working
 COVID-19
 - o Re-building, Re-focusing, & Reinforcing our Team
 - o Are you Really Connecting when You're Connecting
 - o Supporting Older Adults Living with Mental Illness



Regional Achievements & Celebrations

- ✓ Virtual Education Series offering 7 different topics attended by over 400 attendees.
- ✓ In addition to the virtual education series, over 800 other training/educations sessions provided by BSO team members across all sectors, with over 11,000 participants.*
- Over 900 transitions supported by BSO teams in Mississauga Halton across sectors.
- ✓ Between 1300 1500 residents supported every month by BSO teams in LTC.
- ✓ Between 1200 1400 individuals supported every month by BSO teams in Community/Acute Care

^{*} Not unique individuals, same participants may have attended multiple sessions.



Gesselle

Rocquel

Wei

TORONTO CENTRAL (TC)

- Partnership with the new Virtual Behavioural Medicine Program allowed specialized consultation, assessment and treatment for residents with responsive behaviours/personal expressions that were not adequately supported by existing resources. This innovative program is a collaboration between Behaviour Support for Seniors Program Coordinating Office in the Toronto Central Region and the Sam and Ida Ross Memory Clinic at Baycrest. The program serves clients across all three sectors: community, acute care and LTC. Referrals are triaged and centralized through the BSO Coordinating Office and the program is fully integrated into the region's behavioural pathway. Since its inception the program has seen over 150 clients and has reduced the need for tertiary care by 78%.
- The BSO Clinical Navigator developed two new navigation tools: 'Out of Region BSO Services Guide' and 'Community Psychogeriatric Outreach Teams Directory' to increase access to services.
- Addictions Specialist co-authored the Canadian Guidelines for Substance Use in Older Adults and 'Be Wise' booklet for cannabis use and older adults.
- A new <u>Virtual Creative Engagement Guide</u> was developed by Simonne Cumberbatch OT. Reg'. (Ont'),
 BSO Community Clinician Lead, in collaboration with the Ontario Centre for Learning, Research and
 Innovation in LTC (CLRI) at Baycrest, to support virtual engagement by clinicians and caregivers within
 LTC and community setting through social isolation.
- The region organized a COVID-19 & Responsive Behaviours: Lessons Learned virtual series to build capacity in supporting clients with responsive (see more in this link).
- The TC Local Health Integration Network (LHIN) Home and Community Care, in collaboration with Woodgreen Services Seniors Help Line and Crisis Outreach Senior Services, initiated a pilot with Toronto Western Emergency Department, to provide rapid access to Community Behaviour Supports for patients presenting with responsive behaviours/personal expressions at the Toronto Western Emergency Department.

- ✓ In 2020-2021, the TC teams served over 9,000 clients and trained 5,000* staff.
- ✓ Extended the BSO Hotline hours of operation to 7-days per week.
- ✓ Building on BSO provincial work, the TC teams and local partners co-developed a regional pathway to support transitions across the continuum of care (see this link).
- Participation in 'SPIDER', a City of Toronto collaboration table that brings together health care, City of Toronto and other community partners to collaborate in high risk cases.
- ✓ Incorporated BSS-UHN and LOFT BSTR teams as part of the BSO office centralized intake process.
- ✓ Implemented common sector-specific referral forms to improve ease of access to BSO services.
- ✓ Our stories: Story 1: <u>BSO in LTC</u>; Story 2: <u>Smoke Cessation</u>; Story 3: <u>BSO & virtual care</u>.

^{*}Some overlap in numbers may apply in open educational events.

CENTRAL (CEN)

- In response to the COVID-19 pandemic, the Mackenzie Health LTC Home Mobile Team responded swiftly to the changing needs of LTC homes and their residents. A Telehealth Service model was developed and implemented to help provide ongoing, uninterrupted virtual BSO services to residents and LTC staff.
- LOFT Community Services launched the Behaviour Support Education Facilitator position in April 2020 to
 provide capacity building and knowledge exchange support to both ministry and non-ministry funded
 community-based services and acute care partners. This team was able to provide 118 virtual training
 sessions with a total of 1253 participants.
- LOFT's Community BSO Mobile Support Team partnered with three innovative models of care
 (Southlake@Home Plus, North York Cares, and Markham Stouffville High Intensity@Home programs) to
 provide high intensity supports to individuals experiencing responsive behaviours/personal expressions,
 in order to be discharged from hospital back to their community home, thus delaying the need for long
 term care placement.
- The Psychogeriatric Resource Consultant (PRC) program, which supports staff in long-term care homes and Ministry funded community support organizations, continued to provide training and education using a virtual service model. Enhanced partnerships were developed with the Toronto PRC program to service LTC homes by offering a series of virtual BSO Lead education sessions and as well as support the overall wellbeing of BSO staff in the region. Training topics included Diversity, Self-Care and Wellness, Sexual Expression and Dementia, Change Management and Grief, to name a few.
- The BSRT Leads curriculum, developed by the PRC Program of Toronto and aimed at supporting BSO Leads with the clinical component of their role, was adapted to virtual delivery. The virtual program takes place over 3+2 half days and supports Leads with their knowledge of responsive behaviours, points to BSO tools and frameworks, and develops a better understanding of the BSO role. The Central team is pleased to announce that the PRC Program of Toronto is collaborating with the BSO Provincial Coordinating Office, as well as other stakeholders throughout the province, to adapt the curriculum for province-wide delivery with the new name "BSO Foundations".

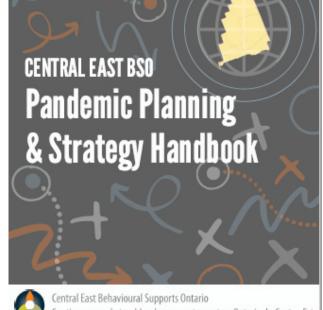
- In October of 2020, The Mackenzie Health BSO LTC Home Mobile Team was the recipient of the Service Excellence Award, an honor granted to individuals and/or teams that show exceptional service by meeting and surpassing expectations of others.
- ✓ Jane Daschevi, Behaviour Support Resource Nurse, was recognized with an Award of Excellence by Commissioner Katherine Chislett. In addition, Jane received a Commend from Premier Doug Ford on May 17, 2021.



Jonathan Moore, Social Worker and Jane Daschevi, Behaviour Support Resource Nurse, October 2020, Recognizing the front-line heroes of Paramedic and Seniors Services.

CENTRAL EAST (CE)

- The Central East BSO team developed a monthly communique that is sent to over 600+ partners; sharing resources, educational opportunities, upcoming initiatives and allows for LTC home partners to provide appropriate updates to contacts when required. Through this platform, the BSO Program Office is pleased to be bringing more attention and awareness to BSO, while also building and strengthening partnerships.
- The Central East BSO team also developed the Pandemic Planning & Strategy Handbook that consolidates lessons learned by front-line workers throughout the first wave of the COVID-19 pandemic, in the hopes that the handbook would help assist in the guidance and preparation for possible future pandemics.



- Purchased iPads for 53 LTC home partners to support residents being able to communicate more frequently and effectively with family care partners that were unable to visit throughout the COVID-19 pandemic restrictions.
- Hosted a five half-day virtual 'Fall Community of Practice', highlighting self-care opportunities, educational opportunities and various discussion platforms.
- Expanded educational opportunities to include geriatric mental health training (Silver Meridian) to Community BSO clinicians and palliative care education (Learning Essential Approaches to Palliative Care [LEAP]) to Psychogeriatric Resource Consultants to increase foundational knowledge to support the provision of a more fulsome approach to supportive care.

SOUTH EAST (SE)

- The BSO Mobile Response Teams participated in a quality improvement project after many staff identified touch screen devices as a valuable non-pharmacological strategy for people with responsive behaviours/ personal expressions living in LTC.
 - o They had found success in using their iPhones to engage residents in music or videos; however, the screens are small. Following a QI process, a literature review was completed and found broad support for using touchscreen technology with people living with cognitive impairment.
 - o Four PSWs embarked on a 'Plan-Do-Study-Act' (PDSA) evaluation, where they used the iPads with 10 unique residents. They found great success in engaging residents in person-centred activity, reducing responsive behaviours and improving resident. Resident mood was found to significantly improve after iPad use (p=0.00006403), and the residents used the iPads considerably longer than research suggested (30-90 minutes per session compared to 20 minutes in the research).
- Kelly Davies RN PRC in Lanark Leeds Grenville continues to lead a working group addressing the gap
 in resources available to LTC Homes, which help them meet residents' need for love and belonging
 while keeping them safe from abuse. This work will be presented as a 1-hour workshop at the Canadian
 Academy of Geriatric Psychiatry's Annual Scientific Meeting on October 30, 2021.
- The BSO Mobile Response Team and Providence Manor a LTCH in Kingston partnered with the SE LHIN/ Ontario Health East to develop an Isolation/Transition unit. The purpose was to provide a seamless transition from acute care or community to LTCH for people who are living with a progressive dementia and have or at risk of wandering behaviours. The unit was developed to allow for a 14-day quarantine period for a cohort of 5 people.

- SE BSO continues to partner with brainXchange to host the <u>South East Knowledge Exchange Network (SE KEN)</u>. The network facilitates access to a broad range of resources developed in the SE region for the SE region.
- BSO leaders from the Ontario Health East region including Central East, South East, & Champlain have begun a monthly partnership connection. The goal is to begin exploring partnership opportunities to foster alignment of services across Ontario Health East while at the same time recognizing and honouring the unique nuances of the respective regions.
- Moira Place in Tweed, ON is entering their 2nd year of obtaining BPSO certification through the RNAO, focusing on 3 key areas: Delirium, Dementia and Depression, Falls, and Abuse and Neglect.
- Newly hired Maple View staff were able to take advantage of virtual GPA training. It is at this time especially, that GPA skills are an asset for staff working in LTC in order to best support the residents. New staff were thrilled to be able to participate in such valuable education and training.



CHAMPLAIN (CH)

- The Geriatric Psychiatry department at The Royal and Champlain BSO developed and implemented 'Telepractice' – virtual clinics to support residents living in LTC during the pandemic. BSO PSW Champions were vital in supporting this process.
- Virtual GPA and PIECESTM sessions delivered by PRC's and Geriatric Outreach/BSO staff between January and April 2021 are outlined below:

	Ottawa	Pembroke	GPCSO	Hawkesbury	Cornwall	Total
Total # of PRC PIECES & GPA Training SESSIONS in the quarter	22	46	4	0	3	75
Total # of PRC PIECES & GPA Training HOURS in the quarter	127.5	349	32	0	23	532
Total # of ATTENDEES at PRC PIECES & GPA Sessions in the quarter	260	432	33	0	20	745

- A collaborative effort comprising of Behavioural Therapists, the interim Program Evaluation Coordinator, and BSO Outreach Nurses have developed a Community of Practice for BSO Champions. This virtual group meets monthly and has had outstanding attendance since it's inception in March 2021. The group offers informal education on topics brought forward by group participants and opportunity for peer-topeer learning through open-forum discussions.
- The PSW Preceptor Education Video was developed to help PSWs who will be supporting the onbnew PSWs working in LTC homes.

Regional Achievements & Celebrations

✓ Lana MacDonald, BSO Outreach Nurse, received the Dr. Marie-France Rivard Award – Geriatric Psychiatry through Leadership Award.



Lana's focus has always been patient-centered and she builds relationships with administrators, managers and all staff in LTC homes in order to reach this goal. Lana's sense of humour and her ability to bring fun and joy to work is particularly appreciated during these difficult times."

NORTH SIMCOE MUSKOKA (NSM)

- In April 2020, the NSM team integrated the Behaviour Support System (BSS) and Community Consultation Services Geriatric Psychiatry (CCS-GP) to create a single integrated regional geriatric mental health service.
- A Recreation Therapist was secured to develop the NSM SGS "Activity Toolkit for Seniors: Staying Engaged, Staying Safe During COVID-19". This toolkit engages activation teams from NSM LTC homes and Retirement Homes in sharing of ideas around ways to keep residents engaged and stimulated (to help reduce behaviours).
- The NSM SGS program led provincial discussion around Confinement Syndrome. BSS members participated in NSM SGS awareness initiatives and education to help address Confinement Syndrome, discussing key issues like mood changes, functional decline, delirium, and nutrition/hydration.

- ✓ NSM SGS worked with Wella Canada to secure a donation of \$250,000 in hair products to promote self-care for 2,500 staff across NSM LTC homes.
- ✓ BSS members participated in the NSM SGS social media campaign #ShowTheLove to support residents, families and staff in NSM LTC homes and Retirement Homes.
- ✓ In place of an in-person annual BSS Leadership & Innovation in LTC event, the BSS team held 3 virtual webinars with a focus on "Responding to Anxious or Escalating Behaviour".
- ✓ A clinical placemat tool and educational video were developed by the SGS team to support health care providers.



NORTH EAST (NE)

- Following the declaration of the global pandemic, North East (NE) BSO rallied their teams in an effort to build a sense of unity and shared resiliency.
 Supported by the Psychogeriatric Resource
 Consultant (PRC) team, care partners met collaboratively to share current research and gather local emerging practices on COVID-19 strategies.
 Innovative, non-pharmacological strategies were developed, trialed and then shared with colleagues during these networking events.
- The Innovation Café Digital Library was developed as an anthology of non-pharmacological strategies crowd-sourced from BSO care partners to support older adults living with isolation/quarantine measures.
- North East BSO and the Alzheimer's Society with the leadership and support of the NE LHIN/OH had the wonderful opportunity to roll out a **High Intensity Needs Transitional Support Pilot** across the North East region to enhance supports for patients and



- care teams with a priority focus on acute to long-term care 14-day isolation periods. A key part of this transitional support was the coordination and translation of knowledge, but also engaging the patient in 1:1 meaningful activation during the isolation period.
- Upon completion of the pilot a quadruple aimed evaluation was completed targeting seven domains
 with engagement from patient/family care partners, BSO LTC embedded and BSO mobile team
 members. Over 50 complex transitions were supported across the region, mainly from acute to LTC
 in a very rapid timeframe with an average of 89% (agree/highly agree) Likert scale experience-based
 satisfaction rating and zero recidivism.

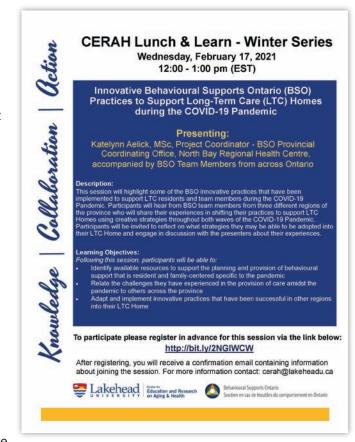
"We have not seen this level of successful patient flow from hospital, specifically with our patients deemed ALC and requiring complex supports, in quite some time or if ever and with no one returning back to hospital!"

Regional Achievements & Celebrations

North East (NE) BSO hosted an in-person event in the spring of 2019 which united BSO teams working across sectors. From this event, a new initiative was developed in collaboration with the NE BSO LTC Embedded teams: the North East BSO Cookbook. This book is filled with innovative and therapeutic recipes featuring emerging, promising and best practices. Material needed for each recipe was included with each submission along with key ingredients to enable success. The North East BSO Cookbook was released in July 2020.

NORTH WEST (NW)

- The NW BSO team collaborated to find new ways to share and support one another virtually. After hearing from other programs across Ontario, a Virtual Town Hall was hosted. Subsequently, the NW BSO team determined that a quarterly Collaborative would be a great opportunity for them to convene regularly to develop capacity, share resources, focus on best practice and further develop collegial relationships.
- The ongoing relationship with the Centre for Education and Research on Aging & Health (CERAH) supports BSO related education, training and capacity building across the Region. In 2020/2021 CERAH collaborated with the BSO Provincial Coordinating Office and BSO Lead organization St. Joseph's Care Group to present a one hour Zoom session entitled "Innovative BSO Practices to Support Long-Term Care Homes during the COVID-19 Pandemic." This informative and engaging session highlighted some of the BSO innovative



practices that have been implemented to support LTC residents and team members during the COVID-19 pandemic. Participants were delighted to learn from BSO team members from four different regions of the province.

• In January 2020, a new collaboration between a NW Psychogeriatric Resource Consultant team and the Behavioural Support Therapeutic Recreationist at John Owen Evans LTC Residence in Geraldton spearheaded a virtual behavioral huddle group. The ongoing huddle has proven to be beneficial to residents with behavioural expressions as the group identifies individuals with expressions, tries to identify causes/ contributions and how to manage those expressions. This process is now in further development to support other LTC residences in small communities.

Regional Achievements & Celebrations

In order to support ongoing education for the BSO Team, in August 2020, NW BSO Partners and CERAH, in collaboration with the Research Institute for Aging, Schlegel, UWaterloo and Conestoga coordinated 4- 4hr zoom sessions for 14 BSO Funded staff across Northwestern ON to recertify as Facilitators for LIVING the Dementia Journey. Staff from Geraldton, Fort Frances, Terrace Bay and Dryden joined their colleagues in Thunder Bay to take the training.

Projects and Initiatives: Integration

Person-Centred Language (PCL) Initiative

Purpose: To foster and promote the consistent use of person-centred language (PCL) that is appropriate, respectful, life-affirming and inclusive when referring to, providing care to and interacting with people living with dementia, complex mental health, substance use and other neurological conditions.

Leads: Tina Kalviainen (BSO PCO), Dr. Shilpi Majumder (CLRI/RIA), Katelynn Aelick and Audra Thompson-Haile (CLRI/RIA)

Project Assistant: Natasha Fortin (BSO PCO)

This work was completed in collaboration with the Ontario Centres for Learning, Research and Innovation in Long-Term Care at the Schlegel-UW Research Institute for Aging.





Key Accomplishments:

- ✓ Co-designed eCourses in collaboration with McMaster University's Division of eLearning Innovation, known as MacHealth. ECourses released in two streams, one for team members and a second for leaders and managers working in long-term care.
- ✓ Launched a bilingual month-long Word Swap Twitter campaign to promote the PCL pledge and e-courses. The campaign resulted in 23,472 Twitter impressions and drew over 1,000 viewers to the PCL website.
- ✓ PCL pledges soared with a new overall total of 4,035 individuals and/or organizations/groups committing to use person-centred language (as of March 2021).
- ✓ PCL posters were mailed to 120 team members that requested physical copies after completing the eCourse.
- ✓ Disseminated the PCL initiative and its products at various conferences and webinars (see page 47)
- Prepared a letter to The Canadian Press urging them to consider the addition of PCL to the Canadian Press Style Guide to ensure journalists and editors use fair and inclusive language when writing and communicating about LTC homes and residents.
- PCL principles and products integrated into: (1) Ontario CLRI LTC Orientation Page, and (2) Gentle Persuasive Approaches (4th ed.) manual.

Looking Ahead: A Sneak Peek into 2021-22

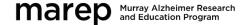
Recommendations proposed to Canadian Press regarding the use of PCL in their style guide were accepted and published online.

By Us For Us[©] Guide: Isolation and Enhancing Social Connections

Purpose: Support the creation of a 'By Us For Us' Guide focused on strategies to address social isolation and dementia amongst persons living with dementia and care partners. . Isolation and Enhancing Social Connections, is written by people living with dementia and care partners for people living with dementia and care partners and is the newest guide in the By Us For Us Series.

Co-Leads: This project was led by the By Us For Us Social Isolation and Dementia Development Team. The members of this group are: (alphabetical by first name) Anne Hopewell (Care Partner), Brenda Hounam (Founder of the By Us For Us Guides and Living with Dementia), Dave Van De Cappelle (Person Living with Dementia), Dawn Baxter (BSO Provincial Lived Experience Facilitator), Devora Greenspon (Board Director, Ontario Association of Residents' Councils and Care Partner), Hilary Dunn-Ridgeway (Director of Communications, Schlegel-UW Research Institute for Aging), John Hammel (Person Living with Dementia), Katelynn Aelick (Project Coordinator, BSO PCO), Lisa Poole (Care Partner, Dementia Advocacy Canada and Family Care Partner), Mary Beth Wighton (BSO Provincial Lived Experience Facilitator and Living with Dementia), Michelle Stillman (Senior Director of Operations, Schlegel-UW Research Institute for Aging), Natalie Phillips (Project Officer, Schlegel-UW Research Institute for Aging), Natalie Phillips (Project Officer, Schlegel-UW Research Institute for Aging), and Vicky Willis (Lived Experience Facilitator, Behavioural Support Services, Providence Care/ Alzheimer Societies of South Eastern Ontario and Care Partner).

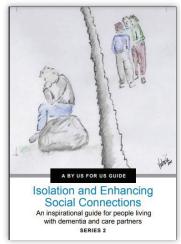
The By Us For Us Guides were first developed by Brenda Hounam in 2004, and the continued development of these resources is supported by the Murray Alzheimer Research and Education Program (MAREP) at the Schlegel-UW Research Institute for Aging (RIA). For more information please visit: https://the-ria.ca/bufu.





Key Accomplishments:

- ✓ Completed an environmental scan of products available internationally about dementia and social isolation for people with lived experience.
- ✓ Collected key themes and successful strategies from people with lived experience on how to avoid social isolation through an online survey, focus groups, and individual interviews (with ethics approval from the University of Waterloo).
- Reviewed the results from the online survey, focus groups, and individual interviews and categorized the information into key areas.
- ✓ Development Team (persons with lived experience) wrote, edited and finalized the content for the guide with support of the Development Team Support and collaborated with a graphic designer to add visual elements.



Looking Ahead: A Sneak Peek into 2021-22

- ✓ Promotion of the guide (ongoing), including email, newsletter and social media announcements.
- ✓ Guide release date July 2021, available online at: https://bit.ly/3mTdY91

BSO Indigenous Land Acknowledgement Guiding Framework

Purpose: To create a resource to support the incorporation of land acknowledgements into knowledge and capacity-building events and further BSO's broader work in the provision of culturally safe behavioural support services.

Co-Leads: Katelynn Aelick (Project Coordinator, BSO PCO) and Emily Piraino (Psychogeriatric Resource Consultant, North East BSO)

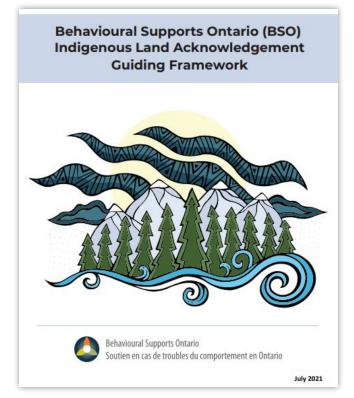
Project Assistant: Stephanie Moncion (BSO PCO)

Key Accomplishments:

- Created a working group consisting of BSO-aligned leaders and educators interested in the topic of land acknowledgements and the provision of culturally-safe behavioural support services.
- Conducted an environmental scan of available resources on the topic of land acknowledgements and about the prevalence and perceptions of dementia, mental health, substance use and neurological conditions amongst the indigenous population.
- ✓ Drafted content to incorporate into the framework and sought feedback from various partnering clinicians, including Indigenous healthcare providers and organizations.
- Collaborated with two Indigenous graphic artists, Patrick Hunter and Kiana Sheldon, to design the document and incorporate graphic art.

Looking Ahead: A Sneak Peek into 2021-22

✓ The 'BSO Indigenous Land Acknowledgment Guiding Framework' was released in July 2021, available for download at: https://brainxchange.ca/Public/Special-Pages/BSO/Clinical-Tools-and-Resources/Behavioural-Supports-Ontario-BSO-Indigenous-Land

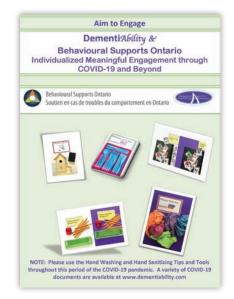


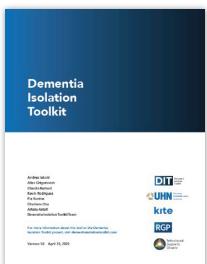
Supporting BSO Teams through the COVID-19 Pandemic

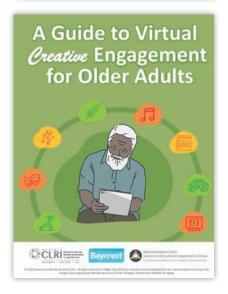
Ensuring BSO teams working across sectors had the tools and skillsets needed throughout the pandemic remained a key priority, especially given the increased vulnerability and susceptibility of the BSO population to contract COVID-19. Building upon the creation of a COVID-19 Resource Webpage on brainXchange in March 2020, the following lists the various resources developed to support those referred to BSO during the pandemic. This list is inclusive of resources developed by the BSO PCO, BSO Regional Teams, and those created in collaboration with partnering organizations. Opportunities whereby these resources were disseminated are listed on page 47.

Resources created in collaboration with key partners:

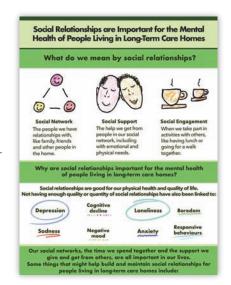
- Engaging activity ideas for people living with dementia during
 COVID-19 (developed by DementiAbility Enterprises and the BSO PCO)
- Non-Pharmacological approaches to support individuals living with dementia maintain isolation precautions (developed by the BSO PCO in collaboration with various BSO Clinicians and Educators across Ontario) [aussi disponible en français]
- Supporting safer smoking practices & smoking cessation during COVID-19 (Developed by Marilyn White-Campbell, BSO Geriatric Addictions Specialist, Baycrest and the BSO PCO)
- Strategies for Swabbing Individuals with Dementia (developed by Mississauga Halton BSO and the Alzheimer Society of Peel)
- ✓ <u>The Dementia Isolation Toolkit</u> (developed by the Dementia Isolation Toolkit Team)
- My Transitional Care Plan during the COVID-19 Pandemic (Tool, Guidelines for Use and Example) (see p.X) (developed by the Behavioural Supports Integrated Teams Collaborative) [aussi disponible en français]
- Physical Distancing in LTC Homes: Providing social engagement and inspiring hope (developed by Mississauga Halton BSO and the Alzheimer Society of Peel) [aussi disponible en français]
- ✓ The Person behind the mask: communicating with clients living with dementia while protecting ourselves (developed by Mississauga Halton BSO and the Alzheimer Society of Peel) [aussi disponible en français]
- A guide to virtual creative engagement for older adults (developed by the Ontario CLRI, Baycrest and Toronto Central BSO)







- ✓ Social connection in LTC Homes: A Scoping review of published research on the mental health impacts and potential strategies during COVID-19 (Bilingual Infographic, Bilingual Report, Article [English]) (ENCOAR team, in collaboration with the Ontario Association of Residents' Councils, Family Councils Ontario and the BSO PCO).
- ✓ Knowledgeable Care Teams & Capacity Building: BSO's Path Forward within the Pandemic Context (developed by the BSO Operations Committee and the BSO Knowledge to Practice Community of Practice).



BSO Lived Experience Advisory COVID-19 Recognition Program

In August 2020, the BSO Lived Experience Advisory launched a COVID-19 Recognition Program whereby individuals and organizations could be nominated to receive a certificate in the mail acknowledging their provision of tremendous support. Over the time period of August – October, a total of 14 certificates were sent to recipients and each of them were acknowledged and celebrated during BSO Lived Experience Advisory Meetings in September and November 2020.



COVID-19 Recognition Program certificate recipients, Keri Hill (Left) and Malton Village LTC Home Adult Day Program Team (Right)

Social connection in residents of

long-term care homes: mental health impacts and

strategies during COVID-19

Knowledge Exchange Events

The following list highlights numerous presentations facilitated by the BSO PCO and BSO Team Members at various knowledge and capacity-building events (e.g. webinars, conferences).

Aelick, K., Meyer, R., & Sokoloff L. (2020, June). *Tools You Need to Provide Care to Older Adults during COVID-19*, Presented at Baycrest Behavioural Support Rounds, Virtual.

Aelick, K., Meyer, R., & Sokoloff L. (2020, August). *Tools You Need to Provide Care to Older Adults during COVID-19*, Presented to CLRI Educators. Virtual.

Aelick, K., & Bethell, J. (2020, September). *Social connection in residents of long-term care homes: mental health impacts and strategies during COVID-19*, Webinar presented on brainxchange, Virtual.

Aelick, K., & Bethell, J. (2020, October). *A knowledge exchange project on social connection in long-term care*, Presented at OLTCA This is Long-Term Care Conference, Virtual.

Aelick, K., Pianosi, B., & Schindel Martin, L. (2020, October). *Developing* a prototype for an open-access e-module to enhance practice, specific to sexual and intimate expressions in people living with dementia, Presented at the CAGP-CCSMH Annual Scientific Meeting, Virtual.

Aelick, K., Levinson A.J., & Thompson-Haile, A. (2020, October). *Reducing stigma through person-centred language online learning*, Presented at the CAGP-CCSMH Annual Scientific Meeting, Virtual.

Aelick, K., Peever, K., Plastow, J., Glover, T., McKibbon, K., Hawrelluk, H., Hooper, N., Schryburt-Brown, K., & Baker, K. (2021, March). *Innovative Behavioural Supports Ontario (BSO) Practices to Support Long-Term Care (LTC) Homes during the COVID-19 Pandemic*, Webinar presented for North West BSO Education Series.



Apothecary-Reid, E., & McMaster, M. (2021, March). *Combating Social Isolation with Meaningful Activities*. Presented at ESC BSO Education Annual Conference: Guiding Dementia Care Through a Community of Practice. Virtual.

Braidek, C., Vavrova, T. (2020, October). *Champlain Specialized Behavioural Support Unit (SBSU) for dementia care: Review of Early Success*". Poster presented at Canadian Academy of Geriatrics, Virtual, Ottawa, ON.

Braidek, C. (2020, November). Pharmacologic and Non-Pharmacologic Treatments of Behavioural Disturbance in

Patients Suffering from Dementia. Seminar presented as part of the Palliative Care Academy's Dining to Learn: Dementia Series. Virtual, Ottawa, ON.

Cumberbatch, S. (2021, March). *Virtual Arts-Based Recreational Engagement to Combat Loneliness in Isolated Seniors*: Introducing the VCE Guide. ePoster presented at The 10th Annual E-Mental Health Conference: Virtual Care in Times of Crisis and Beyond hosted by the University of British Columbia, Vancouver, BC.



Cumberbatch, S. (2021, March). *Virtual Arts-Based Recreational Engagement for the Maintenance of Cognitive Function in Isolated Seniors*: Introducing the VCE Guide. 2021 Rotman Research Institute Virtual Conference; Aging and Brain Health, Optimizing Cognitive and Behavioural Function in Disorders of the Aging Brain hosted by Baycrest, Toronto, Ontario.

Drossel, C. (2021, March). *Building Caregiver Skills*. Presented at ESC BSO Education Annual Conference: Guiding Dementia Care Through a Community of Practice. Virtual.

Heer, C., & Devitt, A. (2021). *Virtual Care during COVID-19: Long-Term Care and Retirement Homes*. eHealth2021, Toronto, ON.

Heer, C., & Devitt, A. (2021). *Virtual Care during COVID-19: Long-Term Care and Retirement Homes*. Canadian Gerontological Nurses Association, Toronto, ON.

Hewitt Colborne, D., Gravel, H., St-Jules, J., Beaulieu, M., Schindel Martin, L., Fresco, F., Kilik, L., & Kalviainen, T. (2020, October). *The Behavioural Supports Ontario Dementia Observation System (BSO-DOS©): Un outil d'évaluation pour faire l'observation de comportement(s)*

associé(s) avec la démence, Presented at the CACG-CCSMH Annual Scientific Meeting, Virtual.

Hewitt Colborne, D., Barel, A., Fresco, F., & Grant, K. (2021, March). *The Behavioural Supports Ontario Dementia Observation System*, Presented to students at Sheridan College in the Social Service Worker program, Virtual.

laboni, A. (2020, April). *Dementia Isolation Toolkit – Ethical Guidance Tool*, Webinar hosted by the BSO Provincial Coordinating Office, Virtual.

Kalviainen, K., & Thompson-Haile, A. (2020, October). *Changing the Language; Shifting the Culture: Resources to support the Implementation of Person-Centred Language in your LTC Home*. Presented at OLTCA This is LTC Conference, Virtual.

Macanuel, C. (2020, August). *Sleep Disturbance in People with Dementia: What Works*? Presented at Baycrest Behavioural Rounds, Toronto, Ontario.

Petta L. (2020, November). *Caregiver Concerns During COVID-19*, Presented to Family Councils Ontario. Virtual.

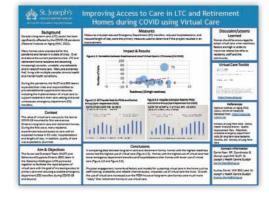
Petta L., Atkins. B., & Gardner. N. (2021, January). *Working as a Team with External Care Partners,* Alzheimer Society Toronto, Virtual Self-Care Series for Clinicians, Toronto, ON.

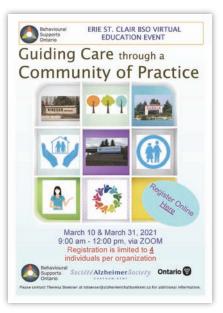
Petta, L. (2021, February) *Pt. 2 Adjusting to Long-Term Care* Webinar, Alzheimer Society of Toronto. Virtual.

Petta L. (2021, February). *Working with Anxious Caregivers*, Webinar presented to Halton/Peel BSO. Virtual.

Petta L. (2021, February). Working with Anxious Caregivers for Staff, Self-Care Series for Clinicians, Behaviour Support for Seniors Program Toronto Central Region and Alzheimer Society Toronto, Toronto, ON.

Schneider, K. (2021, March). BSO System Navigation: Optimizing Connections. Presented at ESC BSO Education Annual Conference: Guiding Dementia Care Through a Community of Practice. Virtual.





St-Jules., J. (2021, April). BSO-DOS©: Outillez vos équipes francophones avec le Système d'observation de la démence (version française). Presentation, presented at the Canadian Gerontology Nurse Association. Virtual.

Thomas, G. (2020, November). *Is It More Than Just a Seniors Moment? Types and Prevalence of Dementia*. Seminar presented as part of the Palliative Care Academy's Dining to Learn: Dementia Series. Virtual, Ottawa, ON.

Weins, A. (2020, November). *Prevention of Dementia: 12 Factors*. Seminar presented as part of the Palliative Care Academy's Dining to Learn: Dementia Series. Virtual, Ottawa, ON.

Welsh, M. (2021, March). *Happily Ever Older: Revolutionary Approaches to Long-Term Care*. Presented at ESC BSO Education Annual Conference: Guiding Dementia Care Through a Community of Practice. Virtual.

White-Campbell, M. (2020, April). *Alcohol Consumption in Older Adults*, Collaboration with Alzheimer Society Toronto. Virtual.

White-Campbell, M. (2020, April). *Alcohol Consumption in Older Adults in LTCHs during COVID-19*, Presented at Geriatric Addiction Rounds, Virtual.

White-Campbell, M. (2020, April). *Cannabis Use in Older Adults*, Collaboration with Alzheimer Society Toronto. Virtual.

White-Campbell, M. (2020, April). *Supporting Older Adults with Substance Use and Dementia during COVID-19 Outbreak*, Collaboration with Alzheimer Society Toronto. Virtual.

White-Campbell. M. (2020, May). *Cannabis Use during COVID-19*, Presented at Geriatric Addictions Rounds, Virtual.

White-Campbell. M. (2020, May). Supporting Nicotine Dependence during COVID-19: Mental Health, Legal and Ethical Considerations, Presented at Geriatric Addictions Rounds, Virtual.

White-Campbell. M., & Bertram. J. (2020, October). *Addiction Medicine in Long-Term-Care*, Presented at Ontario Long Term Care Clinician's Conference. Virtual.

White-Campbell. M. (2020, October). *Smoking Cessation in LTC during COVID-19*, CAGP-CCSMH Canadian Academy of Geriatric Psychiatry Conference. Virtual.

White-Campbell. M. (2020, October). *Managing Nicotine Dependence in Long-Term Care during COVID-19*, Presented at Ontario Long-Term Care Clinicians' Conference. Virtual.

White-Campbell. M. (2020, December). *Smoking Cessation in LTC during COVID-19*, National Huddle for LTCH, Canadian Foundation Health Information LTCH. Virtual.

White-Campbell. M., & Butt. P. (2020, December). *The Canadian Guidelines for Alcohol Use Disorders in Older Adults: Case-Based Applications*, Geriatric Addictions Rounds, Virtual.

White-Campbell. M. (2021, January). *State of the Art Clinical Approaches to Smoking Cessation*, Presented at the Ottawa Smoking Cessation Conference. Virtual.

White-Campbell. M. (2021, February). Support for treatment of Nicotine Dependence for Older adults with Dementia living in community during the COVID-19 crisis, Geriatric Addictions Rounds, Virtual.

White-Campbell. M., Fahim. M., & Hansen. H. (2021, March). *Implementing Smoke Free Environments: Lessons for Long-Term Care*, Geriatric Addictions Rounds, Virtual.

BSO PCO Partner Feedback Survey

For the sixth consecutive year, the BSO PCO released a 'BSO Partner Feedback Survey' to the BSO Ontario Health Leads, BSO Clinical/Strategy Leads and Advisory/Committee/Collaborative/Working Group Leads and Co-Chairs. The purpose of the survey is to identify quality improvement opportunities and assist in priority setting for the BSO PCO team. In answering the survey, respondents were asked to reflect and evaluate their experience with both interacting and collaborating with the BSO PCO and brainXchange. This year's survey received a total of 14 responses.

Among the BSO PCO's strengths, respondents noted the team's availability, timeliness and ability to bring people, ideas and resources together to ensure a coordinated approach for behavioural support services across Ontario. Respondents also appreciated the role that the BSO PCO continues to play during the pandemic, keeping everyone connected, developing resources and sending regular communications. Working more closely with each health region to understand local intricacies and nuances was noted as a primary area for improvement for the BSO PCO moving into 2021-22.

In the survey, respondents also noted the continued value of the BSO PCO, emphasizing the need for the BSO PCO to be sustainable beyond March 2022:

"If we truly want sustainable, specialized, and equitable supports for all our health care sectors, BSO will absolutely require this level of leadership. We are just becoming a fulsome program with community, acute care, LTC, and retirement settings. Dementia care is robust and collaborative and depends on its partnerships. The PCO ensures we are cohesive, present, relevant, future-minded, and ever-evolving. Without the PCO, BSO would become stagnant and collaboratives would lose their cohesiveness."

- BSO Clinical/Strategic Lead

"There is need for a BSO PCO especially as local BSO resources continue to expand. BSO PCO has demonstrated effective streamlining of service delivery and resources across the province to ensure best practices are promoted and spread. They have been a valuable resource in ensuring that important resources and projects from one area of the province can be leveraged in other areas too. I think it is important to continue this funding because they develop a lot of key resources that we can use in each of our areas. There is importance in the professionalism that goes with having these more "polished" resources that have a lot of time and effort behind them and this helps create culture change and promote better care."

- BSO Working Group Lead

A Letter of Reflections from Dr. Ken LeClair

"Learning to count past the number one in healthcare: Seven lessons from the COVID-19 Experience"

When I was asked to do a piece at the end of the annual report that highlights the wonderful activities and accomplishments of the BSO Network, I was told I would have the last word. I seized this opportunity as in my relationships, this is by far not the norm, and nor should it be.

I therefore reflected on COVID-19 over the past 18 months from a couple of perspectives:

- How has our BSO framework, its principles and pillars, faired within the context of our response to the population that we serve that considerably affected by the COVID-19 experience?
- What are the realities, opportunities, and directions raised by COVID-19 to guide our way forward?



Dr. Ken LeClairBSO Geriatric Psychiatry Advisor

This led me to seven lessons that can point us to thinking beyond the number one in our response. In doing so, I identify what may be a way forward to surface our collective wisdom and foster important knowledge exchange to improve our provision of healthcare going forward.

COVID-19 has been a wakeup call to many in the healthcare system and in our communities, agencies and organizations. It has afforded us all an opportunity to think differently, to do things differently and to reconsider how we may want to move forward building upon our successes, while also shifting to understand the vehicles for change and improvement. In reflecting on these shifts, within the context of the BSO Framework, it seemed to me that we have not been counting past the number one in healthcare to the extent we should.

We have known for some time that historically, our healthcare system is designed with a focus on acute illness. Today's reality challenges this way of thinking due to the growth in the number of people living with, or at risk of, complex health challenges often with multiple lifelong health issues that are ever changing and interacting with each other. In thinking about how we could move forward, I would suggest that there are possibly seven lessons that push us to count past the number one. I offer these as suggestions of how we may think going forward every time we are involved in caring for individuals in our day-to-day practices and as we build capacity with others to do the same.

- 1. **Complexity:** We need to change our approach, moving from healthcare being solely focused on body parts and diseases, to thinking about the person as a whole. Each individual must be seen as having complex healthcare challenges along with unique and important characteristics in physical, intellectual, emotional, capabilities, environment and social dimensions. More than ever, we need to think PIECES!
- 2. **Dyad of Care:** We now understand how important it is to move away from looking at only the practitioner as the person who drives, and is solely responsible for, health and healthcare. It is now accepted that it is the dyad of care, the person and their practitioner, that need to work together to ensure that the knowledge and uniqueness of the individual is considered and complemented by the partnership with the practitioner with their knowledge and skills.

- **3. Prevention:** Up to this point in time, we have asked for care to be delivered using a four-pronged eco-bio-psychosocial approach. I would suggest COVID-19 has reinforced the need to add a fifth dimension as a key element to our approach prevention. Prevention in the context of learning how to identify and treat health challenges early as well as decreasing the burden of illness to improve the quality of life of vulnerable individuals.
- 4. Integrated Care: In our experiences supporting people with complex health conditions, prior and during the COVID-19 pandemic, we have faced barriers in the provision of continuity of care to those moving from one place to another. Transitions, whether they be transitions in health, and/or residence, highlight an important opportunity to better the provision of integrated care.
- **5. Interdisciplinary Care:** Relying on the perspective of one healthcare provider or discipline has been shown to be not as effective as galvanizing and surfacing the knowledge, skills, observations and perspectives of many individuals from various disciplines. Finding ways to optimize the provision of interdisciplinary care is imperative.
- **6. Care Partners:** Our provision of care can only be successful if we consider the importance of supporting both the person and their care partner(s) as each having their own healthcare needs.
- **7. BSO Framework and Pillars:** Although designed as three separate pillars with distinct focus areas, it is important that we unite our approach and combine the provision of services, capacity building, and service coordination into a coordinated system approach.

These seven lessons may indeed act as a checklist to help all of us remember to count past one in our daily delivery of healthcare services. I also would suggest that it may be useful to consider these seven lessons in order to surface the experiences and opportunities to improve our collective impact.

A Message of Thanks From the BSO PCO

The BSO Provincial Coordinating Office wishes to acknowledge all BSO teams and partners for their dedication and impactful contributions to the BSO population during the COVID-19 pandemic and beyond. As always, we remain firmly grounded by those at the heart of our care and are eternally grateful for their collective guidance.



CONTACT THE BSO PROVINCIAL COORDINATING OFFICE



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