



# BSO Foundations: Program Impact & Future Directions

Developed by: Behavioural Supports Ontario Provincial Coordinating Office  
**October 2025**



Behavioural Supports Ontario  
Soutien en cas des troubles du comportement en Ontario

# BSO Foundations - 2025 Evaluation at a Glance

Launched in 2022, **BSO Foundations** is a provincial education program designed to strengthen Behavioural Supports Ontario (BSO) and Behavioural Support Units team members by building leadership capacity, deepening role understanding, enhancing knowledge of responsive behaviours, and supporting the application of BSO tools and frameworks. Delivered through a train-the-trainer model, more than 50 facilitators across Ontario have enabled widespread adoption of the program.

## Data Analyzed

- Participant feedback surveys completed January 2023 - March 2025 for BSO Foundations Edition 2.
- 1,347 surveys: 556 pre-program, 624 immediate post-program, and 167 three month post-program.

## Key Findings



**Increased Confidence:** Both post-program groups had significantly better confidence than the pre-program group in their knowledge and skillset related to:

- The BSO population
- Their role in comprehensive behavioural assessment and care planning to prevent and reduce responsive behaviours
- Clinical tools and resources integral to their BSO roles
- Collaboration and communication
- Other BSO responsibilities (e.g., fostering effective teamwork, supporting transitions in care, and supporting change management and quality improvement)



**Sustained Impact:** Data suggests that such changes in knowledge and confidence may be retained months after the end of the course.



**High Satisfaction:** Participants expressed strong satisfaction with program content, delivery, and facilitators.



**Areas for Enhancement:** Feedback indicated a preference for streamlined delivery, more case examples, additional clinical content, and fewer group activities.

BSO Foundations is meeting its goals!

## Next Steps

- Continue delivering BSO Foundations with the focus on new BSO team members, as program participation among existing members is largely complete.
- Maintain the curriculum review cycle of 4–6 years, with the next update planned for 2028.
- Encourage facilitators to leverage program flexibility (e.g., in-person sessions, combining half days to full day sessions).
- Refine evaluation tools to strengthen future assessments.

Overall, BSO Foundations is a well-received and effective provincial education program that builds capacity across BSO teams, supports high-quality care, and equips new staff for success in their roles.



Behavioural Supports Ontario  
Soutien en cas de troubles du comportement en Ontario



# Background

## Purpose

Behavioural Supports Ontario (BSO) Foundations is a knowledge to practice program that builds the leadership skills of BSO and Behavioural Support Unit team members.

## Goals of BSO Foundations

1. 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);
2. To enhance knowledge of responsive behaviours/personal expressions; and
3. To support the application of BSO tools and frameworks found in the BSO Provincial Toolkit.

## Leadership & Provincial Spread

BSO Foundations was developed through a partnership between the BSO Provincial Coordinating Office and the Regional Geriatric Program (RGP) of Toronto. The curriculum was based on the Behaviour Support Resource Team Lead Training, a training program developed by the RGP of Toronto's Psychogeriatric Resource Consultation Program, specifically designed for BSO teams working in long-term care. The curriculum was adapted and enhanced to align with the BSO Provincial Toolkit and to be inclusive of BSO team members in all sectors. A train-the-trainer model was adopted to enable provincial spread of the BSO Foundations educational program. The RGP of Toronto leads the train-the-trainer program, with 58 BSO-aligned educators across Ontario trained as BSO Foundations facilitators from March 2022 to March 2025.

## Program Design

BSO Foundations is taught at the subregional level by BSO Foundations facilitators. The program is delivered over five half days either virtually or in person, with flexibility to combine half days into full day offerings at the discretion of the course facilitators.

## Curriculum Edition History

Edition 1 was launched in April 2022, and feedback gathered from BSO Foundations participants and facilitators led to updates to the curriculum. These updates came into effect within Edition 2 which was launched in October 2022.



## Goal of Report

This report summarizes the results of the BSO Foundations participant survey, assessing the impact of the BSO Foundations education program on participants. Specifically, the report focuses on perceived changes in knowledge and skills related to BSO roles, along with confidence using BSO tools and resources, and the extent to which learnings are being applied to practice. In addition to capturing these outcomes, the report informs future directions for the BSO Foundations program by identifying strengths, gaps, and opportunities for ongoing development and enhancement.

## Evaluation

### Participant Data

BSO Foundations participant registration is conducted at the subregion level. Participant completion data was collected provincially starting in the 2023/24 fiscal year. A total of 1,296 participants successfully completed BSO Foundations from April 2023 to March 2025.

### Program Evaluation Methodology

Participants were asked to complete three separate surveys: one prior to taking BSO Foundations, one immediately after completion of the program and another survey three months post completion. Surveys ranged from 29-37 questions depending on the survey being completed (see table below). The purpose of the surveys was to gain feedback from participants to measure the impact of the BSO Foundations training program and to inform quality improvements to the program. All surveys were anonymous and conducted online using SurveyMonkey. Results were only accessed by the BSO Provincial Coordinating Office and shared with the Regional Geriatric Program of Southwestern Ontario for analysis purposes.



| Survey Type            | Common Survey Elements                                                                                                                                                       | Unique Survey Elements                                                                                                                                                                                                                                                                                                          | Estimated Time to Complete |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| Pre-program            | <ul style="list-style-type: none"> <li>Participant demographics (e.g., region, sector, scope of practice).</li> </ul>                                                        | <ul style="list-style-type: none"> <li>An open ended question asking what knowledge and/or skills the participant wants to learn in BSO Foundations.</li> </ul>                                                                                                                                                                 | 4 minutes                  |
| Immediate post-program | <ul style="list-style-type: none"> <li>Ratings of confidence in knowledge and skillset in relation to key topics and tools used in caring for the BSO population.</li> </ul> | <ul style="list-style-type: none"> <li>Rating of the BSO Foundation program (e.g., content, delivery).</li> <li>An open ended question about suggestions to improve the program.</li> <li>An open ended question regarding planned application of learning.</li> <li>An open ended question for additional comments.</li> </ul> | 5 minutes                  |
| 3-month post-program   | <ul style="list-style-type: none"> <li>Ratings of confidence in relation to BSO role.</li> </ul>                                                                             | <ul style="list-style-type: none"> <li>An open ended question regarding application of learning.</li> <li>An open ended question for additional comments.</li> </ul>                                                                                                                                                            | 4 minutes                  |

Survey links were provided to participants via their facilitators. The pre-program survey link was sent via email upon registration to the program along with details about the course. The immediate post-program survey link was provided on the final day of the program, and participants could only access their certificate of participation once the survey was completed. The 3-month post-program survey link was emailed to participants by their facilitators with a request to complete within two weeks of receiving the email.

### Data Analysis Methodology

Data analysis included surveys completed from January 2023 to March 2025 for BSO Foundations Edition 2. Means and standard deviations or counts and frequencies were used to summarize participants' characteristics. A 7-point Likert scale was used for responses on the original survey, which were converted to numerical values for the purposes of our data analysis. Accordingly, low scores represent decreased confidence while high scores represent increased confidence. Due to



survey configurations used, it was not possible to track a specific individual's answers across the three different surveys. As a result, and for our data analysis, each survey was treated as a separate group (pre-program, immediate post-program, 3-month post-program).

Chi-square tests of independence were used to determine if differences in participants' characteristics were observed between groups (i.e. did each survey's participants have a similar demographic breakdown). For items related to confidence in participants' knowledge and skillset on certain topics, tools, and on their role, a series of separate one-way analyses of variances (ANOVAs) were used. If a statistically significant difference was observed, Tukey post hoc analyses were performed for adjustments for multiple comparisons. To better understand the magnitude of difference between groups, pairwise Cohen's d calculations were performed. For interpretation, the following thresholds were used: trivial (<0.20), small (0.20-0.49), moderate (0.50-0.79), and large (>0.80) (Cohen J, 1988). All statistical analyses were conducted using SPSS version 30.0 (IBM Inc., Chicago, IL, USA) and a 0.05 experiment-wise alpha. An inductive thematic analysis approach (Braun & Clarke, 2006) was used to analyze open-ended questions for each separate survey using NVivo 14. Anonymized quotes reflective of the themes observed were extracted for the current report.

## Results of BSO Foundations Feedback Surveys

A total of 1,347 surveys were completed: 556 pre-program, 624 immediate post-program, and 167 three month post-program. More responses were observed in the pre-program and the immediate post program groups as these surveys were embedded into the registration process for the course or were directly linked to receiving a certificate of completion, respectively. Barriers encountered include a reliance on facilitators to send the survey out, and the fact that some participants may no longer be in the same role three months after the program.

### Respondent Demographics

All surveys requested demographic information, including the respondent's Ontario Health (OH) Region, work setting, and scope of practice. Respondents from all OH Regions were represented: East (34%), Central, (25%), North East & North West (17%), West (15%), and Toronto (9%). These differences likely reflect the varying stages of BSO Foundations implementation. Some regions were early adopters and had already made significant efforts to deliver the education program in 2022; therefore, during the timeframe of this data collection, those regions were in a 'maintenance' phase with less need for program offerings.

The majority of respondents reported working in long-term care (76%), followed by community care (13%), acute care (6%), or cross-sector (5%). Most (79%) also indicated that assessment and care planning were part of their scope of practice. These are expected characteristics given that the



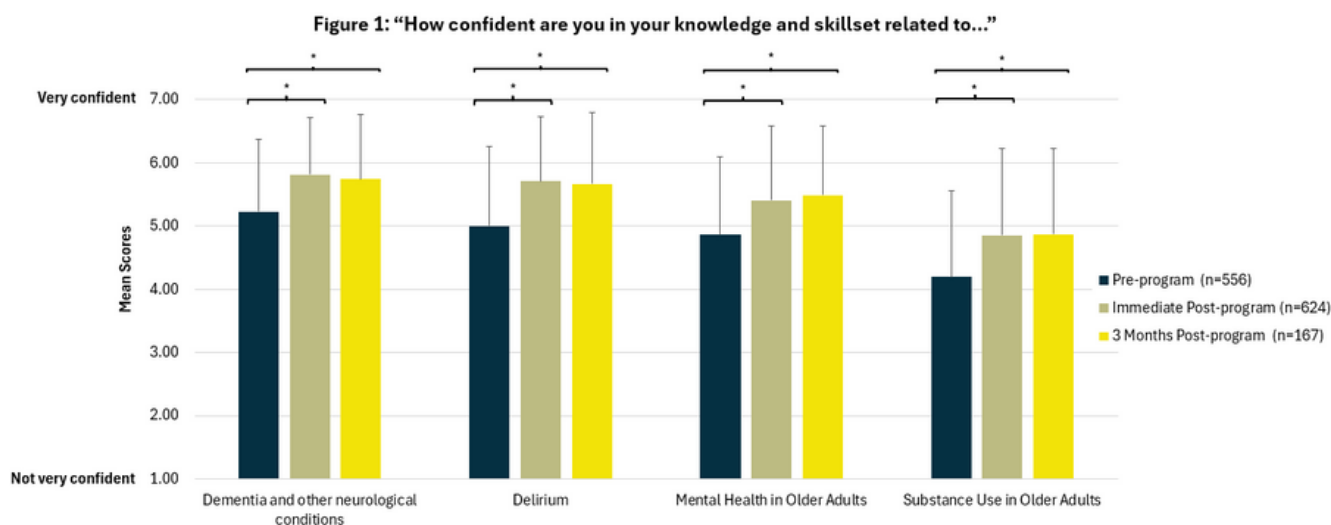
majority of BSO funding is directed toward supporting residents in long-term care settings, and BSO leadership has traditionally opted to direct a portion of funds towards registered care providers.

### BSO Foundations Impact: BSO Knowledge & Skills

Participants were asked questions about **confidence in their knowledge and skillset related to the BSO population**. As noted in Figure 1, there was a small to moderate (Cohen's d range: 0.45-0.62) and statistically significant difference between groups in their confidence in knowledge regarding dementia, delirium, mental health and substance use, whereby the groups that had taken the BSO Foundations program self-reported higher levels of confidence than the pre-program group ( $p < 0.001$ ). Scores were not different between immediate and 3-month post-program respondents ( $p > 0.05$ ), suggesting retention in confidence.

I learned effective strategies for managing responsive behaviours in residents with dementia, including the importance of building trust and utilizing non-verbal communication. I will apply these techniques to enhance the quality of care in my practice.

- BSO Foundations participant



Similarly, participants were asked questions about **confidence in their knowledge and skillset related to their role in comprehensive behavioural assessment and care planning** to prevent and reduce responsive behaviours/personal expressions (see Figure 2). There was a moderate (Cohen's d range: 0.51-0.67) and statistically significant difference ( $p < 0.001$ ) in confidence between the pre-program group and both post-program groups in all skills described (i.e., gathering information,



identifying contributing factors, identifying approaches and strategies, and recommending these approaches). Scores were not different between immediate and 3-month post-program respondents ( $p>0.05$ ), suggesting retention in confidence.

[I have gained] enhanced knowledge and applications of tips and guide of approaches and strategies to prevent or reduce responsive behaviours or personal expressions and by incorporating it into practice as we navigate our role as BSO lead in LTCH.

- BSO Foundations participant



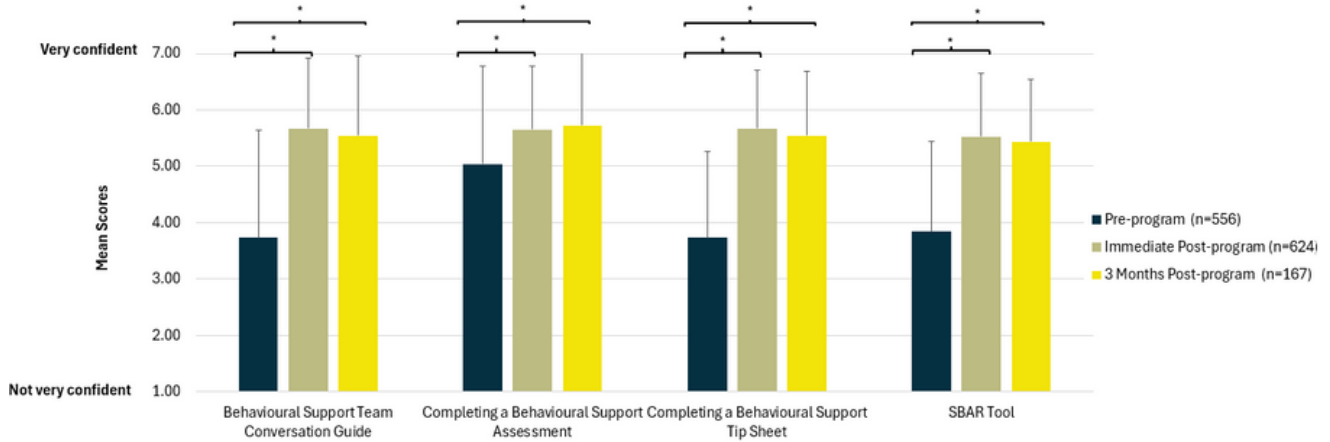
A similar pattern emerged when participants were asked questions about **confidence in their knowledge and skillset related to clinical tools and resources integral to their BSO roles** (see Figure 3). In relation to the Behavioural Support Team Conversation Guide, Behavioural Support Assessment, Behavioural Support Tip Sheet, and SBAR, a moderate to large (Cohen's  $d$  range: 0.73-1.35) and statistically significant differences were observed between groups, whereby the immediate and 3-month post-program respondents had higher levels of confidence in these tools compared to the pre-program group ( $p<0.001$ ). Scores were not different between immediate and 3-month post-program respondents ( $p>0.05$ ), suggesting retention in confidence (see graph below).

The BSO Conversation Guide is a great tool. I will be able to apply into practice on a daily basis.

- BSO Foundations participant



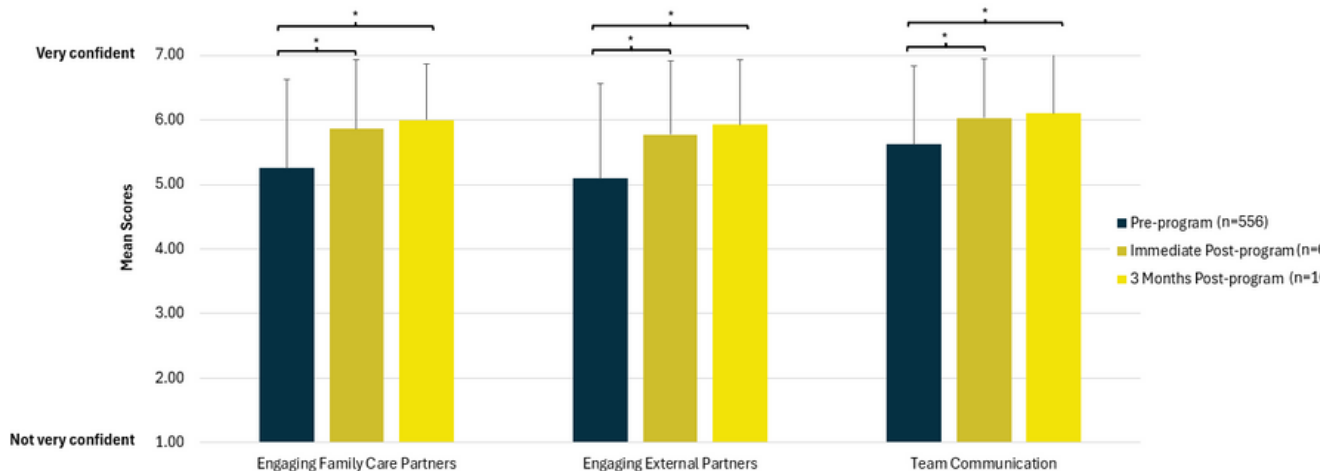
Figure 3: "How confident are you in your knowledge and skillset related to..."



Engagement and communication are critical components of BSO work. When asked about their perceived **confidence in their knowledge and skillset related to collaboration and communication**, a small to moderate (Cohen's d range: 0.38-0.68) and significantly higher level of confidence ( $p < 0.001$ ) was observed in the immediate and 3-month post-program groups relative to the pre-program group. Scores were not different between immediate and 3-month post-program respondents ( $p > 0.05$ ), suggesting retention in confidence (see Figure 4).

I have learned better ways to communicate and support my team.  
- BSO Foundations participant

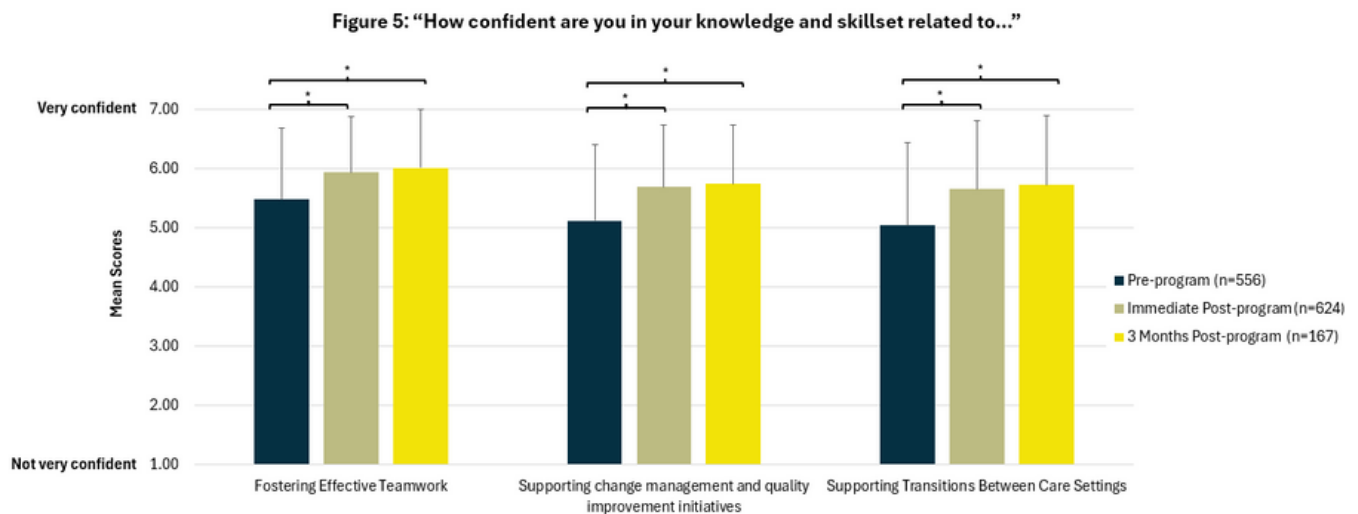
Figure 4: "How confident are you in your knowledge and skillset related to..."



BSO roles are broad, with other important responsibilities including fostering effective teamwork, supporting change management and quality improvement initiatives, and supporting transitions between care settings. When asked about **confidence in their knowledge and skillset related to other BSO responsibilities**, a small to moderate (Cohen's d range: 0.42-0.55) difference is observed between each of the post-program education respondents (immediate and 3-month) and the pre-program group ( $p < 0.001$ ). Scores were not different between immediate and 3-month post-program respondents ( $p > 0.05$ ), suggesting retention in confidence (see Figure 5).

I learned a lot about my own leadership style and others personality traits. By understanding this, I am far more confident in leading team discussions and guiding the conversations. I also learned how to ask good questions that lead to good outcomes!

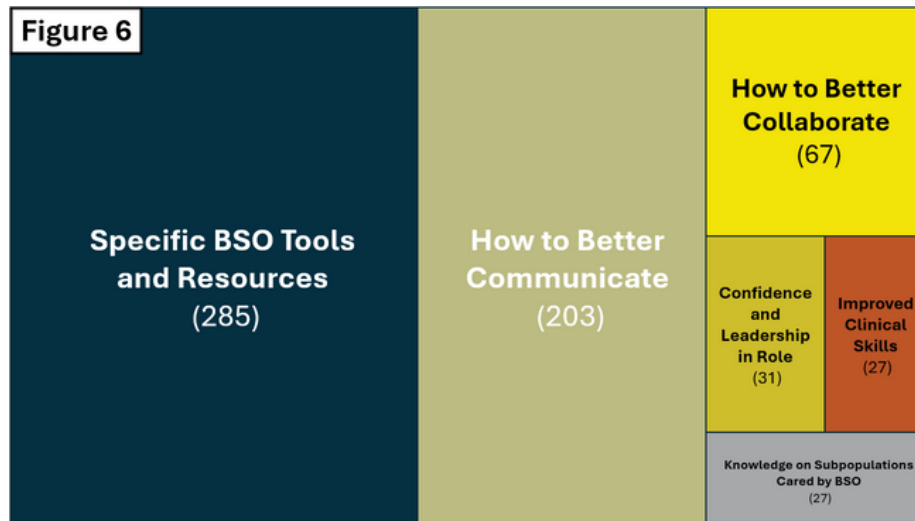
- BSO Foundations participant



### BSO Foundations Impact: Application of Learnings

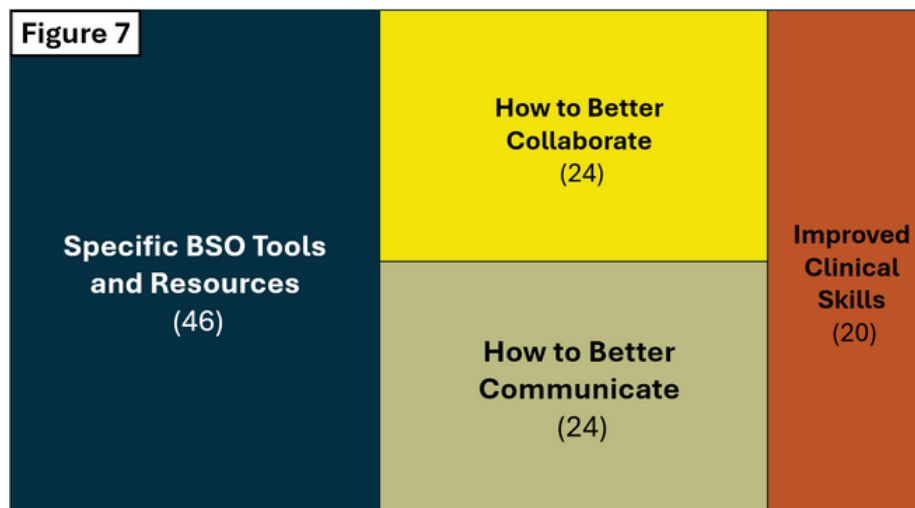
A series of open-ended questions were used to ask respondents about their desired outcomes for the program, the application of program learnings, and to seek feedback for program improvements. When asked about **what program-related learnings they planned to apply to their practice**, the immediate post survey group disclosed several themes (see Figure 6).





A similar pattern emerged when 3-month post survey respondents were asked **‘What did you learn in BSO Foundations that have applied to your practice’**, whereby the most common learnings included several themes (see Figure 7).

[I learned] how to ask the right questions.  
- BSO Foundations participant

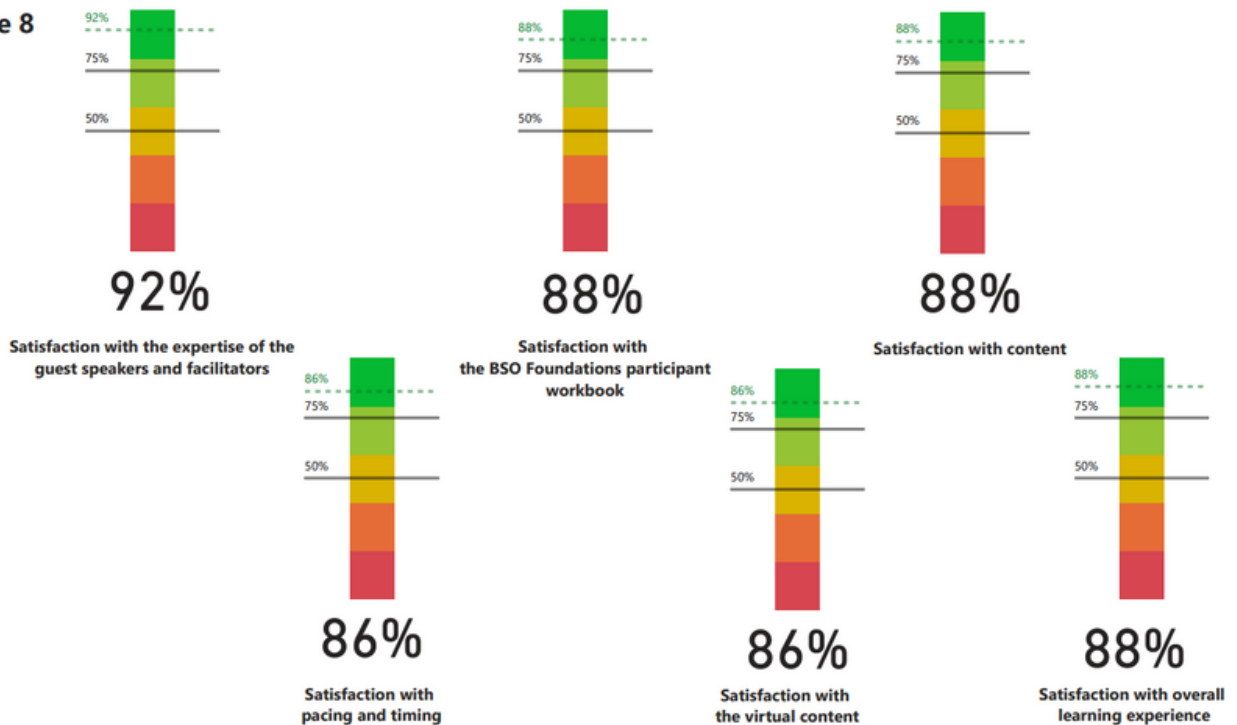


I learned new assessment that I have access to, how to lead and guide group discussions to help inform the plan of care for residents, and how to communicate my thoughts and interventions well with the care team.  
- BSO Foundations participant

## BSO Foundations Program Delivery

The immediate post survey provided an opportunity to gain valuable feedback from the participants about the program itself. Participants were asked to rate their satisfaction with various elements of the program with responses ranging not very satisfied to very satisfied on six elements. Satisfaction was high across all elements (see Figure 8, n=640).

**Figure 8**



I really enjoyed the collaborative discussions, amongst the teams, participants, and facilitators. Each panel discussion brought new ideas, resources, and information sharing.

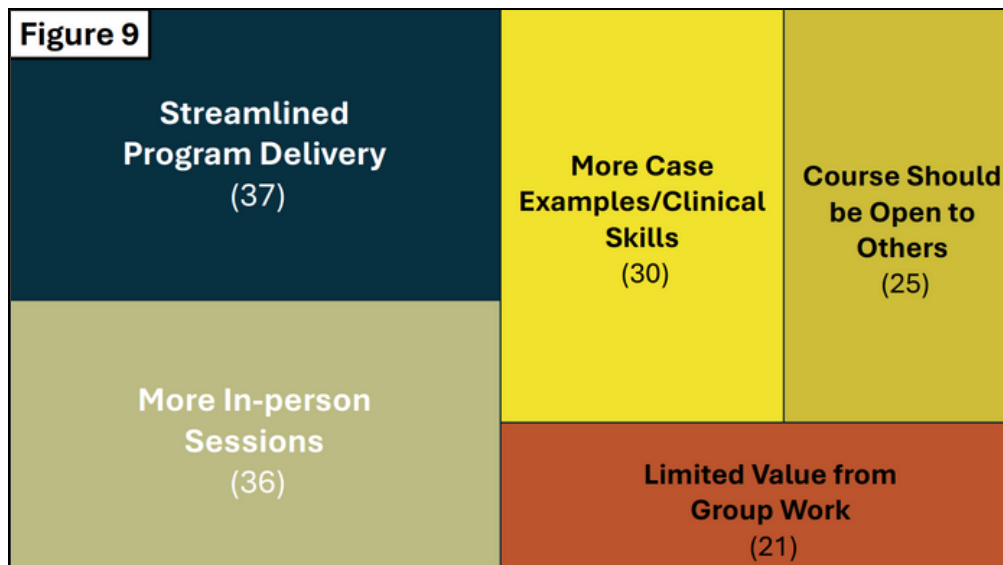
- BSO Foundations participant



This same group of respondents were also asked to provide feedback to help improve the BSO Foundations program. Their responses suggested several changes (see Figure 9).

I very much enjoyed the course. I think the material could have been fit into less time.

- BSO Foundations participant



## Conclusion & Next Steps

### Conclusions

Launched in 2022, BSO Foundations is an education program designed to strengthen BSO teams by building leadership capacity, deepening role understanding, fostering confidence, enhancing knowledge of responsive behaviours, and supporting the use of provincial BSO tools and frameworks. The majority of BSO team members have had the opportunity to take the program, many of which provided feedback. A rapid quality improvement cycle in 2022 led to an update in the curriculum (i.e., Edition 2). Subsequent surveys have provided an opportunity to measure outcomes of the program, as well as inform future enhancements.

This 2025 evaluation demonstrated that participation in the BSO Foundation program was associated with a reported moderate increase in knowledge and confidence related to: the BSO population; clinical tools and resources integral to BSO roles; collaboration and communication; and other responsibilities of BSO team members (i.e., fostering teamwork, supporting change management and quality improvement initiatives, and supporting transitions in care). Moreover, data suggests that such changes in knowledge and confidence may be retained months after the end of the course. Satisfaction was also high, with many respondents expressing positive feelings towards the course and the facilitators. Although surveys were likely made up of the same pool of respondents, it is important to consider that participant data was not linked between these separate surveys and our findings will need to be confirmed through future evaluations.

This course should be a MUST for all BSO Leads & Network staff within the first month of hire. What a great tool and resource to set staff up for success. This course also makes you feel very supported in the network and that you belong to a community.  
- BSO Foundations participant

Overall, these findings suggest that BSO Foundations is meeting its goals:

1. 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).
2. To enhance knowledge of responsive behaviours/personal expressions.
3. To support the application of BSO tools and frameworks found in the BSO Provincial Toolkit.

Opportunities for improvements in BSO Foundations curriculum and program delivery were provided by respondents. Their suggestions focused on program structure and delivery (e.g. combining half days into full days, in person sessions rather than virtual, and overall reducing the number of hours/days of the program). They also recommended more case examples and opportunities to learn additional clinical skills while limiting group work.

## Next Steps

To celebrate the impact of BSO Foundations and the contributions of all involved, the 2025 evaluation results will be shared with BSO leaders, as well as BSO Foundations leadership and facilitators. The findings confirm that BSO Foundations is achieving its goals, and thus the program will continue to be offered to BSO teams across Ontario. Since the majority of existing BSO team members have already completed the training, the current focus will be on offering BSO Foundations to those joining BSO teams. These new team members will have the opportunity to benefit from the program, equipping them for success in their BSO roles.



As no significant concerns were identified in either the learning outcomes or program delivery, the BSO Provincial Coordinating Office and the Regional Geriatric Program of Toronto will maintain the current plan to review and update the curriculum on a 4–6 year cycle, with the next review completed by the end of 2028. When the curriculum is updated, current and future survey data will be valuable in informing updates. In the interim, BSO Foundations facilitators will be encouraged to utilize the flexibility that currently exists to shape program offerings (e.g. combining half days into full day sessions, in person offerings rather than virtual).

The BSO Foundations feedback surveys will be updated based on learnings from the evaluation process.

## Acknowledgments

A special thanks to the:

- Regional Geriatric Program of Toronto and the BSO Provincial Coordinating Office for your leadership with the BSO Foundations program;
- BSO Foundations facilitators for your enthusiastic and skillful delivery of the program;
- BSO Foundations participants for your commitment to learning, as well as providing valuable feedback;
- Regional Geriatric Program of Southwestern Ontario for your expertise in data analysis and interpretation, as well as for supporting report writing.

I want to thank the BSO Foundations for creating this learning opportunity. This course is very informative and educational. It definitely helped building my confidence in my role of BSO.

- BSO Foundations participant

## References

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.

Cohen, J. (1988). *Statistical Power Analysis for the Behavioral Sciences* (2nd ed.). Routledge.

Faul, F., Erdfelder, E., Lang, A. G., & Buchner, A. (2007). G\* Power 3: A flexible statistical power analysis program for the social, behavioral, and biomedical sciences. *Behavior research methods*, 39(2), 175-191.





Behavioural Supports Ontario  
Soutien en cas des troubles du comportement en Ontario

# Contact us



[brainxchange.ca/BSO](https://brainxchange.ca/BSO)

---



[provincialBSO@nbrhc.on.ca](mailto:provincialBSO@nbrhc.on.ca)

---



+1 (855) 276-6313

---



BSO Provincial Coordinating Office

---