



BSO Provincial Pulse

At the Heart of System Transformation

Behavioural Supports Ontario (BSO) Provincial Newsletter

Issue 10 - March 2018



Welcome

Welcome to our spring issue of the BSO Provincial Pulse. As the fluctuations in temperature occur during the tree's dormant season, a true sign of spring occurs when the sap starts flowing from the maples. What better way to say farewell to a long, cold winter than by celebrating the forest's awakening with nature's sweet offering of maple syrup (see taffy recipe below). We hope the changing of the seasons brings forth renewal with the planting of innovative ideas and the blossoming of ongoing projects.

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BSO's Boiling SO easy...

Homemade Maple Taffy Pops

Fill a large container/baking sheet with clean compacted snow or shaved/crushed ice. Leave it outside or freeze while you boil the syrup in the saucepan.

In a saucepan over medium-high heat, cook 2 cups of maple syrup until it reaches 114.5°C (238°F). If you don't have a candy thermometer, you can check the consistency of the taffy by letting a drop of hot syrup fall into a bowl of cold water. It can take about ten minutes. When the taffy is ready, it will form a soft ball.



When the syrup reaches the specified temperature, remove the saucepan from the heat. The taffy will stop bubbling and reduce in volume.

Transfer the syrup into a Pyrex measuring cup for pouring or with a metal spoon, pour the boiling syrup over the snow or shaved/crushed ice in a line. Wait 30 seconds. Roll your maple syrup taffy around a popsicle stick. Enjoy!

<http://www.cbc.ca/stevenandchris/articles/print/martin-picards-maple-syrup-taffy>

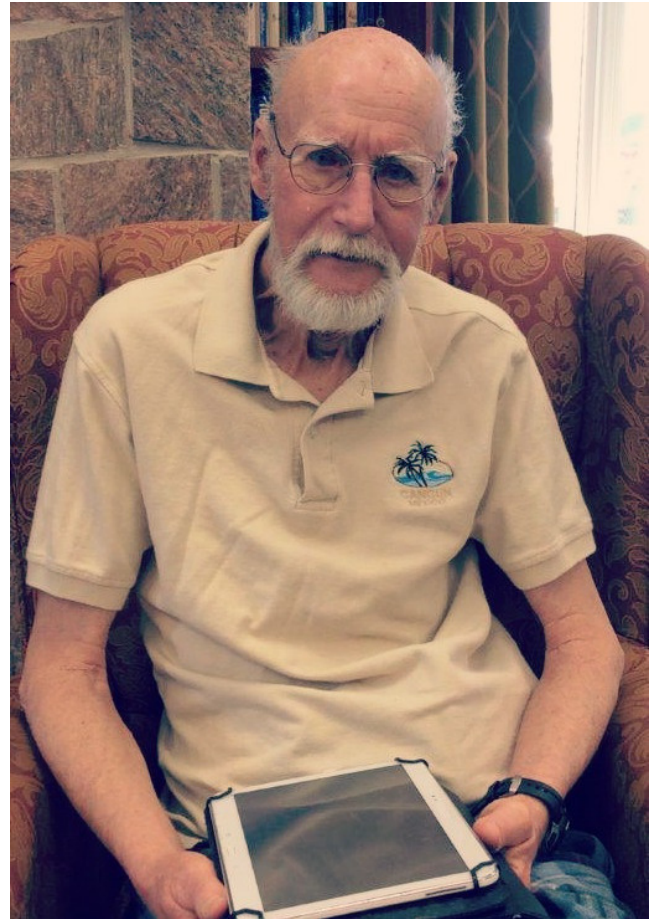
<http://www.canadianliving.com/food/baking-and-desserts/article/how-to-make-maple-syrup-taffy-pops>

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Letters of Lived Experience

Ron Drouillard of Windsor, Ontario is a person who is doing his best to live well with dementia. Ron, a retired paramedic, husband, father of three and grandfather of six, moved to The Village of St. Clair in May 2017. “I have Parkinson’s and it became too much for my wife to handle. It’s not like being at home, but I find it is OK. The people here treat me really well, like family,” says Ron.

Ron has made it his goal to ensure he spends his time in ways that are productive and meaningful. He is an active member on the Village Advisory Team, the Residents Council and works two days a week at the Village’s General store. He also speaks to students and newly-hired team members during orientation about his lived experience in the village, his career as a paramedic and the consequences of post-traumatic stress disorder.



Ron also enjoys supporting and mentoring new residents as part of one of the Village’s signature programs that focuses on memory and reminiscence, a program called Java Mentorship. “That’s the only way to stay young,” says Ron, “to stay busy.” As part of the Village Advisory Team, Ron was part of the “pat-on-the-back award” initiative. “Every month you pick someone (a resident, staff or volunteer) who does an especially good job, going above and beyond and doing more than is expected of them,” he explains. The recipient receives one \$25.00 prepaid MasterCard and one “aspirations t-shirt” that reflects the aspiration they are being recognized for that month. He also helped plan a Culture Change Campout, the Village Olympics and sits on the Research and Innovation Committee. The “Aspiration Statements” are a guide for all Schlegel Villages to keep on the path of “Changing the Culture of Aging”. As an organization, they are moving away from an institutional model of care to a social model of care with the goal of being a place where our residents come to continue living with meaning and purpose.

From the 8 aspiration statements the Villages have to choose from, each Village chooses which aspirations they would like to focus on each year as part of their operational plan. Ron is part of the Village Advisory team that drives these initiatives at the village level to keep everyone on the culture change path. The Village of St. Clair is focused on: “Offer Flexible Living”, “Creating Opportunities for Shared and Meaningful Activities”, “Connecting Research and Innovation to Village Life” and “Promoting Resident Empowerment”.

Letters of Lived Experience



A lover of photography, “I used to do photography and even held a show here and sold some of my scenic photography,” says Ron who is also writing a book based on his experiences as a paramedic.

Ron was a first responder to what is considered to be one of the worst crashes in Canadian history; a multiple vehicle collision that resulted in dense fog just east of Windsor on September 3, 1999. Ron says, “I am in the process of writing a book about the accident on the 401 on Labour Day weekend in 1999. People were just driving and hit a heavy fog. Eighty-seven cars were involved, eight people were killed and forty-five injured.” Ron shared his experiences at one press station to paramedic students, stressing the importance of self-care and the effects of one’s mental health on their families and colleagues.

Finally, Ron recently had an opportunity to share his lived experience to promote the use of person-centred language for people living with dementia as a part of the Person-Centred Language: Dementia Focus Expert Panel. In November he participated in a meeting organized by The BSO Provincial Coordinating Office in partnership with the Alzheimer Society of Ontario and Schlegel-UW Research Institute for Aging focused on this topic. **“It is important to change the language we use because it changes the way we think...looking at the person and not the disease”** he says.

Candace Manwaring, Neighbourhood Coordinator says **“Ron has opened my eyes to a lot of new possibilities with people living with dementia. His ability to be so technically savvy takes me by surprise. I think it is great that Ron still wants to and is quite capable of learning new things. We can forget that people living with dementia have the ability to learn new things. He helps us push the boundaries.”**

MENTAL HEALTH FIRST AID SENIORS

Supporting the mental health of Canada's aging population.

For the last couple of years, the BSO Provincial Coordinating Office has selected primary themes for staff capacity building, in consultation with various partners and stakeholders. This year, the focus is on Mental Health First Aid for Seniors. In collaboration with the Mental Health Commission of Canada, BSO will be hosting Mental Health First Aid Seniors sessions in the following cities: Kingston, North Bay, Renfrew, Sudbury, Sault Ste. Marie, Cornwall, Timmins, Ottawa, etc.

Mental Health First Aid Seniors trains participants to effectively respond to an emerging mental health problem or crisis, until the situation is resolved or appropriate treatment is found.



A recent study of residential facilities revealed **31%** of residents showed signs of depression.

10 seniors (60+) die by suicide every week in Canada.

Adults 65 years and over with mental health problems and illnesses can account for as many as one-quarter of emergency department visits.

TOPICS COVERED

- Seniors
- Mental Health First Aid
- Substance-related disorders
- Mood-related disorders
- Anxiety and trauma-related disorders
- Dementia
- Delirium
- Psychosis

CRISIS FIRST AID INTERVENTIONS FOR

- Substance overdose
- Suicidal behaviour
- Panic attack
- Acute stress reaction
- Psychotic episode
- Delirium

The course content and resource materials are based on best available evidence and practice guidelines and were developed in consultation with Canadian experts in the field of geriatric psychiatry. The curriculum was developed for the Mental Health Commission of Canada at Trillium Health Partners, a healthcare organizations which priorities seniors' health and wellness.

For more information, please visit the following website:

<http://www.mentalhealthfirstaid.ca/en/course-info/courses/seniors>



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada

Mental Health
First Aid Canada



New Tool to Assess Geriatric Addictions / Substance Use

The Substance Use/Geriatric Addictions Collaborative with Behavioural Supports Ontario (BSO) and brainXchange are working together to promote access to and the use of the Canadian developed Senior Alcohol Misuse Indicator (SAMI).

Dr. Bonnie Purcell, Registered Psychologist with the London-Middlesex BSO Mobile Team and the Geriatric Mental Health Program with London Health Science Centre, developed the tool while completing her Master's at the University of Toronto with the Centre for Addiction and Mental Health.

Alcohol-related problems are often an unrecognized challenge in working with older adults. Older adults can experience increased effects of alcohol due to age-related physiological changes and alcohol-drug interactions, and/or increased reliance on alcohol as a coping strategy with significant life changes. The goal of the SAMI as a brief senior specific screening tool is to provide a gentle, non-confrontational approach to elicit information to determine if there are concerns related to alcohol use/misuse. The SAMI has a sensitivity of 78-84%, with a specificity of 55%, and outperformed other tools such as the SMAST-G and the CAGE in identifying older adults who are currently experiencing problem drinking or who are at-risk for developing drinking problems.

In order to increase the accessibility of the SAMI tool, the Collaborative is reaching out to leaders supporting older adults and requesting their consideration to add a link to the SAMI on their organization's website. Both the SAMI tool and a recently archived webinar (<https://vimeo.com/244895381>) can be found on the Portico of the Centre for Addiction and Mental Health: <https://www.porticonetwork.ca/tools/clinical-tools/sami-screening-tool>.

If you are willing to have the link added to your website, we kindly ask that you confirm this with the Collaborative. As appropriate, we also encourage you to pass along the request onto others that may consider posting on their respective websites. Should you have any questions or require additional support, please contact Jillian McConnell, a Knowledge Broker with brainXchange at jillian@brainXchange.ca.

Senior Alcohol Misuse Indicator (SAMI) Tool

1a. Have you recently (in the last few months) experienced problems with any of the following (if yes, please check box):

<input type="checkbox"/> Changes in sleep?	<input type="checkbox"/> Changes in appetite or weight?	<input type="checkbox"/> Dizziness?
<input type="checkbox"/> Drowsiness?	<input type="checkbox"/> Difficulty remembering things?	<input type="checkbox"/> Poor balance?
		<input type="checkbox"/> Falls?

1b. Have you recently (in the last few months) experienced problems with any of the following (if yes, please check box):

<input type="checkbox"/> Feelings of sadness?	<input type="checkbox"/> Lack of interest in daily activities?	<input type="checkbox"/> Feelings of worthlessness?
<input type="checkbox"/> Loneliness?	<input type="checkbox"/> Feelings of anxiety?	

2. Do you enjoy wine/beer/spirits? Which do you prefer?

3. As your life has changed, how has your use of [selected] wine/beer/spirits changed?

4. Do you find you enjoy [selected] wine/beer/spirits as much as you used to? Yes No
(For clinical use. Not included in scoring.)

5. You mentioned that you have difficulties with _____ (from answers to questions 1a and b). I am wondering if you think that [selected] wine/beer/spirits might be connected? Yes No

SCORING KEY

Single responses (a score of 1 for each response):	Multiple responses (a score of 1 for each combination of responses):
Question 2 I enjoy all three of wine/beer/spirits OR I enjoy a combination of any two from wine/beer/spirits <input type="checkbox"/>	Question 2 & 3: Yes , I do enjoy alcohol There has been no change in alcohol consumption => If both responses provided, check box => <input type="checkbox"/>
Question 3 I have increased alcohol consumption from when I was younger <input type="checkbox"/>	Question 1, 2 & 3: Yes , I have experienced 5 or more symptoms Yes , I do enjoy alcohol
Question 5: Yes, there may be a connection between my alcohol use and health <input type="checkbox"/>	Indicates any current alcohol consumption (regardless of any change in pattern) => If all three responses provided, check box => <input type="checkbox"/>
SUBTOTAL 1 = _____/3	SUBTOTAL 2 = _____/2

TOTAL SCORE = SUBTOTAL 1 + SUBTOTAL 2 = _____

Developed by B. Purcell, © Centre for Addiction and Mental Health, 2003

Highlights Across the Continuum

Making Connections: Recommendations to Enhance the Use of Personhood Tools to Improve Person-Centered Care Delivery across Sectors

“We cannot adequately meet the needs of the people and families we serve, without asking them first what it is they need.” Dr. Ken LeClair

Since January 2016, the Behavioural Supports Ontario (BSO) Provincial Lived Experience Advisory has been part of the BSO provincial structure working alongside the BSO Provincial Coordinating Office. The advisory is led by Sharon Osvald, BSO Lived Experience Facilitator, BSO/brainXchange and Dr. Rhonda Feldman, Cyril & Dorothy, Joel & Jill Reitman Centre for Alzheimer’s Support and Training.

The BSO Lived Experience Advisory consists of older adults from across the province who are living with dementia, complex mental health, substance use and other neurological conditions along with their family care partners who all share a common vision to improve the overall health care experience.

As a result, upon the Advisory’s inception, a priority goal was raised by the Lived Experience Advisors to develop recommendations to enhance the use of personhood tools in different clinical care sectors to support individuals and their family care partners at different stages along their journeys.

The Advisory recognized that in order provide quality, personalized health care to a person living with the conditions listed above, it is essential that information about the individual’s history, preferences and interests be documented in a manner that care providers could use to inform care planning and delivery. The Advisory believes that further implementation of these tools in practice will not only help to foster respect and dignity in care, but that these tools are also effective in identifying some of the root causes behind responsive behaviours and how to potentially address unmet needs.

The **full document**, which lists recommendations for using personhood tools in the community, at adult day programs, at the hospital and in long-term care is now available at the following link : <http://brainxchange.ca/Public/Files/Personhood-Tools/Recommendations-to-Enhance-the-Use-of-Personhood-T.aspx>. This webpage also includes additional links to all of the recommended Personhood Tools mentioned in the document as well as other related resources, including a recording of a recent **webinar** (https://ake.adobeconnect.com/_a1122165311/pmttpgnb8o4p/?launcher=false&fcsContent=true&pbMode=normal) which explores the recommendations further in depth! We encourage you to use and share these recommendations with those who support older adults across Ontario. In addition, if you have implemented one of these tools or another personhood tool in your organization, we would love to hear from you! For more information about this initiative or to share how you have implemented a personhood tool in your organization, please contact Sharon Osvald, BSO Lived Experience Facilitator at sosvald@alzking.com



To Seek, Explore and Relax

In January 2018, a multi-sensory environment by the name of MICs'* Snoezelen Room officially opened its door at Lady Minto Hospital in Cochrane.

The unique room, located on the hospital's acute care unit, is an innovative response to a genuine need for providing individuals with a purposeful and stimulating environment as they await their transition into long term care.

The therapy was invented in the late 1970s by two Dutch therapists and the name is a contraction of two Dutch words, "snuffelen" – to seek and explore – and "doezelen" – to relax.



The Snoezelen (pronounced SNOOZE-a-len) Room holds equipment that is part of a treatment regimen used to stimulate the individual's senses (sight, sound, smell, taste, touch) with the inclusion of movement (e.g., rocking chairs, stretching and reaching) to evoke a calming and therapeutic effect.

The Snoezelen should be considered as a 'toolbox' with different types of sensory equipment to meet the different sensory needs of the person using it.

Above is a photo of Mr. Girard enjoying a session in the multi-sensory room. He says **"it's a real treat"** to spend hours just relaxing, listening to music, watching the lights and fish rise and fall in the bubble lamp.

The project was led by North East Behavioural Supports Ontario (NE BSO) in collaboration with members of the community, Alzheimer Society Timmins-Porcupine District, local Cochrane Committee for Alzheimer's group, and MICs Group of Health Services.

For further information regarding this initiative, please connect with Stephanie Bolduc, NE BSO Psychogeriatric Resource Consultant and project lead, at stephanie.bolduc@nbrhc.on.ca.

References/Resources

<https://www.snoezelen.info/snoezelen-research/>

https://www.snoezelen.info/media/free-resources/Dementia_and_Snoezelen.pdf

* The MICs Group of Health Services consists of three hospitals and their associated long-term care facilities located in the Northern Ontario communities of Matheson, Iroquois Falls and Cochrane.

Crunching the Numbers: Q3 Quantitative Metrics

BSO's Long-Term Care (LTC) Teams supported **9,930** family members this quarter (+**1,212** since last quarter)

A total of **28,978** individuals received education and training through a BSO alignment this quarter (+**4,660** since last quarter)


17 individuals were discharged from Behavioural Support Units, transitioning most often to another specialized unit or to long-term care

Occupancy rates in the Behavioural Support Units remains high at **99.88%**



BSO's Provincial Qualitative Stories

The following quotations were retrieved from some of the qualitative stories received in Q3 from various BSO teams across the province.



Check out the 50 most commonly used words in BSO's Q3 Qualitative Stories!



assessment
behaviours
transition
client
residents
homes
family
support
team
caregiver
information
expressed
community
responsiveness
husband
increased
education
knowledge
assist
plan
help
term
activities
caregiver
interventions
involvement
importance
approach
provided
move
lead
well
needs
feeling
admission
medications
continuity
working
staff
time
spouse
year
change
living
dementia
developed
daughter
admission
feeling
admission
medications
continuity
working
staff
time
spouse
year
change
living
dementia

It is important to try several different behavioural interventions as every person is unique in their response. To effectively analyze behaviour one must collect objective and reliable data at baseline (before implementing the behaviour support plan) and after the intervention to determine the success or lack of change in the behaviour. Until the data was shared with front-line staff they remained skeptical of the positive outcome for Ms. S.
~ Central LHIN

Being aware of the individual's past traumatic experience was essential to understanding the contributing factors prompting the responsive behaviours.
It is also important to ensure that we are respecting the resident's privacy and dignity as this has a positive impact in reducing responsive behaviours during care.
~ North Simcoe Muskoka LHIN

It was discovered that in order for the PSWs in our long-term care homes to put knowledge into practice, we first need to recognize the importance of self-care due to their demanding roles, consider their compassion fatigue and provide resources for them to use in order to manage it.
~ Erie St. Clair LHIN

BSO's Provincial Qualitative Stories - Continued

The following quotations were retrieved from some of the qualitative stories received in Q3 from various BSO teams across the province.

Ms. J's transition emphasized the importance of preparing clients, families and formal care providers for transitions to LTC, and remaining involved throughout the transition process.

The BSO Transitional Leader worked alongside the family for several hours to discuss the transition process and remained with both the resident and her family for most of the day to assist the transition, demonstrating the flexibility, patience and skill required to assist a potentially challenging transition.

Ms. J's family expressed their gratitude for having the same individual who provided support in the community do so in LTC, reducing the need for them to repeat their story and share vital information.
~ Hamilton Niagara Haldimand Brant LHIN

Taking a team approach as well as communication and planning ahead helped the move be successful. Most importantly the PSW exemplified the role by knowing the person with dementia, providing professional individualized care which enabled a non intrusive, smooth transition to the LTC home.

~ Waterloo Wellington LHIN

Life stories are important when looking for the best approach to care because they bring to light essential elements to the behaviour at hand.

~ Central West LHIN

Professional Development & Upcoming Events

April 16 -18, 2018, Toronto, ON

Advancing Senior Care 2018 Annual General Meeting and Convention

<http://advancingseniorcare.ca/>

April 19, 2018 2:00 PM to 3:00 PM (EST)

Telehealth (Event # 73622088) & Webcast (<http://webcast.otn.ca/>) Live Public Events

Baycrest Behavioural Support Rounds

Topic: Opiate Use Disorders and Transitions to Long-Term Care

April 24, 2018 from 12:00 PM to 1:00 PM (EDT)

Cultural Safety: Ethical and Equitable Health Care for Indigenous Patients, Families, and Communities

<http://brainxchange.ca/Public/Events/Upcoming-Events/Cultural-Safety-Ethical-and-Equitable-Health-Care.aspx>

April 24, 2018 1:00 PM to 2:00 PM (EST) Webinar - Save the Date

Connecting With Ontario Seniors: Moving from Social Isolation to Social Inclusion, Age-Friendly Communities

<https://sagelink.ca/shkn-events>

May 25, 2018, Kingston, ON

Empowering Older Adults: Opportunities & Possibilities

<https://www.eventbrite.ca/e/empowering-older-adults-opportunities-possibilities-tickets-4212511635>

May 31, 2018 1:00 PM to 2:00 PM (EST) Webinar - Save the Date

Building a Stronger and More Inclusive Ontario Part 2: Understanding the link between Age Friendly and Compassionate Care, Age-Friendly Communities

<https://agefriendlyontario.ca/events>

Our lines of communication are **always** open for feedback.
Contact Information: BSO Provincial Coordinating Office



Call us at **1-855-276-6313**



Email at provincialBSO@nbrhc.on.ca

Or visit us at <http://www.behaviouralsupportsontario.ca>

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