




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

Knowledgeable Care Teams & Capacity Building: BSO's Path Forward within the Pandemic Context



September 2020

BSO Provincial Coordinating Office

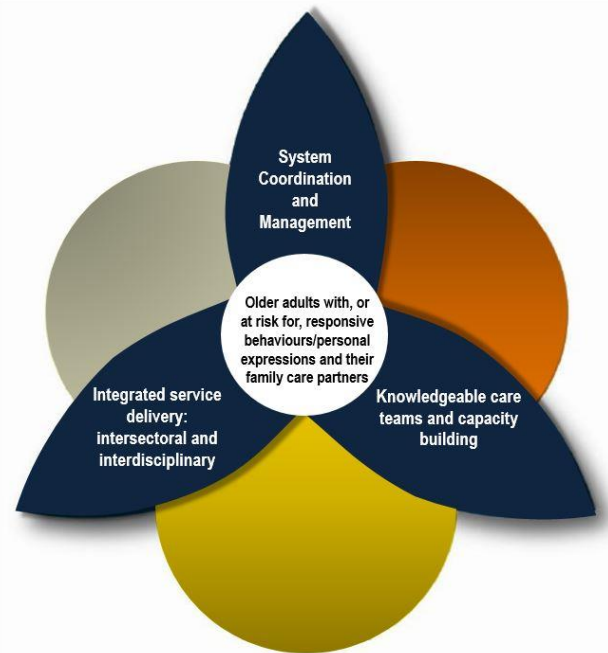
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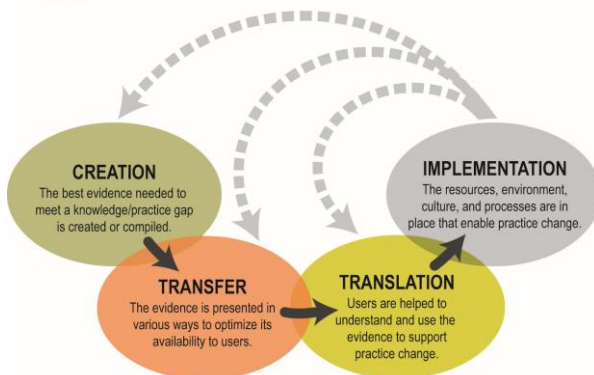


Background

Knowledgeable Care Teams and Capacity Building is one of the foundational pillars of Behavioural Supports Ontario (BSO). As such, BSO is committed to the growth of care teams through the transfer of new knowledge and the implementation of best and emerging practices. In order to support this complex work, embrace common language and promote sustainable change, in 2018 BSO adopted the Knowledge to Practice Process Framework (Ryan, D. et al., 2013). The framework (see below) illustrates the multifaceted and cyclical approach that is needed in supporting individuals and teams in putting knowledge into practice.



Knowledge to Practice Process Framework



(adapted courtesy of Dr. Ryan et al., 2013)

Our BSO Knowledge to Practice Community of Practice (CoP) brings together professionals who have a shared passion for capacity building and enhancing the knowledge of healthcare teams. Built upon a strong foundation of the Knowledge to Practice Process Framework, the CoP membership created [Knowledge to Practice Resources](#) including the [Knowledge to Practice Planning Worksheet](#) to assist in the complex task of planning and supporting capacity building. In addition, the Behavioural Education and Training Supports Inventory ([BETSI](#)) is a valuable tool used to assist with education planning and implementation.

In March of 2020, our communities were dramatically impacted by COVID-19. How we interact and communicate shifted, with new precautions and restrictions in place. New practices and approaches were required. This meant our BSO leaders and team members (including Psychogeriatric Resource Consultants) have needed to adjust in identifying and supporting knowledge to practice work.

A working group was struck in June 2020 from the BSO Knowledge to Practice CoP and the BSO Operations Committee (see membership on page 3) in order to build a path forward regarding how BSO will continue to strengthen its pillar of *Knowledgeable Care Teams and Capacity Building* within the context of the pandemic. The following guidelines have been developed to aid BSO leaders and teams in considerations and opportunities within three distinct Pandemic Capacity Building Stages. Teams may find themselves in different stages at various times in the months ahead. The document is intentionally divided into three, with the expectation that each stage can be consulted and utilized independently for appropriate suggestions of knowledge to practice activities within these following three stages:

- [Pandemic Capacity Building Stage #1: Restricted/Limited In-person](#) Page 5
- [Pandemic Capacity Building Stage #2: Cautious Opening of In-person](#) Page 10
- [Pandemic Capacity Building Stage #3: Expanded In-person Opportunities](#) Page 17

The guidelines take into consideration the various components of the Knowledge to Practice Process Framework (Ryan, D. et al., 2013) and points to ongoing considerations of the current situation of clinical teams and learners. These are uncertain times and BSO recognizes that the pandemic can cause significant stress and strain, and all plans for learning and capacity building should take into account the unique environment and individual realities experienced by clinical teams and learners.



Acknowledgments

Behavioural Supports Ontario would like to thank the working group that includes representation from the BSO Operations Committee and the BSO Knowledge to Practice CoP. Your expertise, creativity and commitment to supporting and strengthening teams within the pandemic was instrumental in the creation of this guideline.

We would also like to express a sincere thanks to BSO'S core competency curriculum partners who came together to mutually plan, share and provide guidance. The strength of this collaborative spirit is evident!

Working Group Leadership:

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Gail Elliot, Founder and CEO, DementiAbility Enterprises Inc.

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Kathy Hickman, Director Education Design and Training, Alzheimer Society of Ontario

Beth Nolan, Director of Research and Policy, Positive Approach to Care



References

Ryan, D. et al., (2013). Geriatrics, Inter-professional Practice, and Inter-organizational Collaboration: A Knowledge-to-Practice Intervention for Primary Care Teams. *Journal of Continuing Education in the Health Professions*, 33: 180–1.

Acronyms Used Within Document:

BSO PCO - Behavioural Supports Ontario Provincial Coordinating Office
PRC - Psychogeriatric Resource Consultant

Hearing From You:

We look forward to hearing your thoughts and feedback. We welcome suggestions, added recommendations and innovations. We thank all that are striving to strengthen and support care teams and build capacity within the pandemic.

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Pandemic Capacity Building Stage #1:

Restricted/Limited In-person

(e.g. No visitors in LTC & Congregate Living, limited in-person external supports)

Knowledge to Practice Activity	Who?	Comments
BSO leading and/or a contributing partner in locating and retrieving research, evidence and best-practices.	BSO PCO, Knowledge to Practice CoP, PRCs & BSO Regional Teams	
Create and maintain a centralized online location for COVID-19 resources.	BSO PCO & brainXchange	<p>Examples:</p> <ul style="list-style-type: none"> Develop and regularly update the BSO COVID-19 Resource Page.
Regular provincial/regional communications through email, newsletters and social media.	BSO PCO , BSO Regional Teams & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> Weekly COVID-19 Communication emails to BSO network from the BSO PCO highlighting new resources, knowledge exchange events and wellness strategies.
Maximize capacity of the BSO Knowledge to Practice CoP.	BSO PCO & BSO Knowledge to Practice CoP	<p>Examples:</p> <ul style="list-style-type: none"> Increased frequency of Knowledge to Practice CoP meetings. Networking of members. Utilization of previously developed knowledge to practice resources available at Knowledge to Practice webpage. <p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> Optimizing existing capacity building infrastructure and relationships through a CoP that brings together PRCs and other clinical educators to collect, share and spread innovations. Identify trends, resources and strategies across the province.
Promotion of electronic resource sharing available in centralized locations.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> BSO & brainXchange COVID-19 Resource Page RGP Toronto COVID-19 Resource Page Supports for LTC Team Members during COVID-19



Knowledge to Practice Activity	Who?	Comments
Creation (leading or as a partner) and distribution of regional/provincial/national resources.	BSO PCO , BSO Regional Teams & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Non-Pharmacological Approaches to Support Individuals Living with Dementia Maintain Isolation Precautions ▪ Supporting Safer Smoking Practices & Smoking Cessation during COVID-19 ▪ The Person Behind the Mask: Communicating with Clients Living with Dementia While Protecting Ourselves (also available in French) ▪ Strategies for Swabbing Individuals with Dementia ▪ Communication Tip Sheet for Redeployed Staff Working in Long-Term Care with Residents with Cognitive Impairment ▪ Housekeeping Tip Sheet: Caring for Residents with Cognitive Impairment in Long-term Care ▪ Engaging Activity Ideas for Dementia During COVID-19 ▪ Ethical guidance for people who work in long-term care: What is the right thing to do in a pandemic?
Hosting provincial/regional webinars.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Hosting the Dementia Isolation Toolkit: Ethical Guidance Tool webinar. ▪ Baycrest Behavioural Supports Rounds
Promotion of available online educational opportunities.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Person-Centred Language E-learn ▪ brainXchange webinars ▪ ECHO Care of the Elderly for LTC: COVID ▪ CLRI LTC Orientation for Incoming Staff ▪ GPA eLearning ▪ U-First! Online course <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Time for team members to complete E-learns <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Promote dedicated time for education completion.
Develop new E-learn opportunities	BSO PCO & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Sexual Expression & Aging E-learn (<i>in progress</i>)



Knowledge to Practice Activity	Who?	Comments
<p>Connect with regional BSO team members and partners utilizing virtual platforms for regular meetings/events (e.g. weekly, biweekly, monthly) for:</p> <ul style="list-style-type: none"> ▪ Sharing of resources ▪ Topic specific education ▪ Responsive behaviour rounds ▪ Case based consults ▪ Guest speakers ▪ Sharing ideas/strategies ▪ Open forum/dialogue 	<p>PRCs</p>	<p>Examples of Virtual Platforms:</p> <ul style="list-style-type: none"> ▪ Telephone, Zoom, OTN, Blackboard Collaborate, GoToMeeting, Microsoft Teams, Google Meets, Adobe Connect and BlueJeans. <p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ PRC role with established relationships. ▪ Opportunity for multiple organizations can participate together. ▪ Inclusive of large geographical regions. ▪ Topic specific that is relevant to needs/situations. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Team members may be experiencing stress, strain and/or compassion fatigue that impacts readiness. ▪ Some organizations do not permit some virtual platforms due to privacy concerns. ▪ Some participants are only able to call in therefore no access to chat pod, poll questions and slides. ▪ Difficulty with bandwidth, particularly in rural communities. ▪ Limited access to computers/electronic devices with camera and microphones. ▪ Limited computer knowledge. ▪ Recording limitations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Consider gathering topic ideas (e.g. survey). ▪ Ensure topic/dialogue is relevant to situation that clinical teams are experiencing. ▪ Consider teaching/dialogue on the topic of compassion fatigue and/or moral distress. ▪ Ensure regular contact/meetings with partners. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Determine technology availability/needs. Advocacy may be needed to ensure access. ▪ Advocate for funding opportunities for organizations/teams to access technology to facilitate virtual consultations and education.



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none"> ▪ Create ‘how to’ resources (e.g. webinars/tip sheets) for use of virtual platforms including etiquette, utilization of platform and practice considerations (e.g. protecting personal health information). ▪ Use of breakout rooms within platforms and polling software (e.g. Mentimeter or Poll Everywhere) to foster interaction and self-reflection. ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.
Virtual 1:1 Connection with embedded BSO team members.	Mobile BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintaining routine, momentum and support of embedded team members. ▪ Building upon established rapport. ▪ Accommodating for time and space limitations.
Case based consultation/education utilizing virtual platforms, as required.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Ensure platform meets security requirements for personal health information.
Topic specific education sessions utilizing virtual platforms, as needed.	PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate and collaborate simultaneously. ▪ Ability to provide education to meet the needs for unique case/organization specific situations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Ensure topic/dialogue is relevant to situation that clinical team are experiencing. ▪ Create topic specific tip sheets ▪ Ensure regular contact/meetings with partners. ▪ Determine technology availability/needs. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.



Knowledge to Practice Activity	Who?	Comments
Support/coach embedded BSO Champion(s) in supporting translation and implementation strategies.	PRCs & other BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Building on existing relationships within the organization. ▪ Strengthen relationships between PRCs and embedded/mobile teams. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Not all homes have embedded BSO (mobile team members redeployed to LTC homes, but not all homes received a BSO team member). ▪ Varying relationships between embedded BSO champions and clinical team.
Coaching and mentoring by embedded BSO Champions.	Embedded BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Established relationships with point-of-care team members. ▪ Entire Knowledge to Practice Process supported.
Participate in Behavioural Supports Rounds virtually.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintain attendance and team problem-solving during rounds. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Rounds not scheduled/cancelled. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Advocate for the importance of maintaining monthly rounds.
Orientation of new staff virtually.	BSO Champion & PRCs	<p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Create an individualized education plan. ▪ Utilize a BSO Orientation Checklist. ▪ Access available resources to support orientation in absence of core curriculum in-person education. ▪ Consider offering content in multiple shorter sessions to address current priorities.
Liaison with BSO core Curriculum partners to plan formal education during pandemic.	BSO PCO & BSO Knowledge to Practice CoP Leadership	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Meeting with CoP leadership and curriculum partners to discuss next steps and collaborative opportunities.



Pandemic Capacity Building Stage #2:

Cautious Opening of In-person

(e.g. Consultation/Education deemed essential)

Knowledge to Practice Activity	Who?	Comments
BSO leading and/or a contributing partner in locating and retrieving research, evidence and best-practices.	BSO PCO, Knowledge to Practice CoP, PRCs & BSO Regional Teams	
Create and maintain a centralized online location for COVID-19 resources.	BSO PCO & brainXchange	Examples: <ul style="list-style-type: none"> ▪ Develop and regularly update the BSO COVID-19 Resource Page
Regular provincial/regional communications through email, newsletters and social media.	BSO PCO , BSO Regional Teams & PRCs	Examples: <ul style="list-style-type: none"> ▪ Weekly COVID-19 Communication emails to BSO network from the BSO PCO highlighting new resources, knowledge exchange events and wellness strategies.
Maximize capacity of the BSO Knowledge to Practice CoP.	BSO PCO & BSO Knowledge to Practice CoP	Examples: <ul style="list-style-type: none"> ▪ Increased frequency of Knowledge to Practice CoP meetings. ▪ Networking of members. ▪ Utilization of previously developed knowledge to practice resources available at Knowledge to Practice webpage. Opportunities/Benefits: <ul style="list-style-type: none"> ▪ Optimizing existing capacity building infrastructure and relationships through a CoP that brings together PRCs and other clinical educators to collect, share and spread innovations. ▪ Identify trends, resources and strategies across the province.
Promotion of electronic resource sharing available in centralized locations.	BSO PCO, PRCs & BSO Regional Teams	Examples: <ul style="list-style-type: none"> ▪ BSO & brainXchange COVID-19 Resource Page ▪ RGP Toronto COVID-19 Resource Page ▪ Supports for LTC Team Members during COVID-19



Knowledge to Practice Activity	Who?	Comments
Creation (leading or as a partner) and distribution of regional/provincial/national resources.	BSO PCO , BSO Regional Teams & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Non-Pharmacological Approaches to Support Individuals Living with Dementia Maintain Isolation Precautions ▪ Supporting Safer Smoking Practices & Smoking Cessation during COVID-19 ▪ The Person Behind the Mask: Communicating with Clients Living with Dementia While Protecting Ourselves (also available in French) ▪ Strategies for Swabbing Individuals with Dementia ▪ Communication Tip Sheet for Redeployed Staff Working in Long-Term Care with Residents with Cognitive Impairment ▪ Housekeeping Tip Sheet: Caring for Residents with Cognitive Impairment in Long-term Care ▪ Engaging Activity Ideas for Dementia During COVID-19 ▪ Ethical guidance for people who work in long-term care: What is the right thing to do in a pandemic?
Hosting provincial/regional webinars.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Hosting the Dementia Isolation Toolkit: Ethical Guidance Tool webinar ▪ Baycrest Behavioural Supports Rounds
Promotion of available online educational opportunities.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Person-Centred Language E-learn ▪ brainXchange webinars ▪ ECHO Care of the Elderly for LTC: COVID ▪ CLRI LTC Orientation for Incoming Staff ▪ GPA eLearning ▪ U-First! Online course <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Time for team members to complete E-learns <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Promote dedicated time for education completion.
Develop new E-learn opportunities	BSO PCO & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Sexual Expression & Aging E-learn (<i>in progress</i>)



Knowledge to Practice Activity	Who?	Comments
<p>Connect with regional BSO team members and partners utilizing virtual platforms for regular meetings/events (e.g. weekly, biweekly, monthly) for:</p> <ul style="list-style-type: none"> ▪ Sharing of resources ▪ Topic specific education ▪ Responsive behaviour rounds ▪ Case based consults ▪ Guest speakers ▪ Sharing ideas/strategies ▪ Open forum/dialogue 	<p>PRCs</p>	<p>Examples of Virtual Platforms:</p> <ul style="list-style-type: none"> ▪ Telephone, Zoom, OTN, Blackboard Collaborate, GoToMeeting, Microsoft Teams, Google Meets, Adobe Connect and BlueJeans. <p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ PRC role with established relationships. ▪ Opportunity for multiple organizations can participate together. ▪ Inclusive of large geographical regions. ▪ Topic specific that is relevant to needs/situations <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Team members may be experiencing stress, strain and/or compassion fatigue that impacts readiness. ▪ Some organizations do not permit some virtual platforms due to privacy concerns. ▪ Some participants are only able to call in therefore no access to chat pod, poll questions and slides. ▪ Difficulty with bandwidth, particularly in rural communities. ▪ Access to computers/electronic devices with camera and microphones. ▪ Limited computer knowledge. ▪ Recording limitations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Consider gathering topic ideas (e.g. survey). ▪ Ensure topic/dialogue is relevant to situation that clinical team are experiencing. ▪ Consider teaching/dialogue on the topic of compassion fatigue and/or moral distress. ▪ Ensure regular contact/meetings with partners. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Determine technology availability/needs. Advocacy may be needed to ensure access. ▪ Advocate for funding opportunities for organizations/teams to access technology to facilitate virtual consultations and education.



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none"> ▪ Create ‘how to’ resources (e.g. webinars/tip sheets) for use of virtual platforms including etiquette, utilization of platform and practice considerations (e.g. protecting personal health information). ▪ Use of breakout rooms within platforms and polling software (e.g. Mentimeter or Poll Everywhere) to foster interaction and self-reflection. ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.
Virtual 1:1 Connection with embedded BSO team members.	Mobile BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintaining routine, momentum and support of embedded team members. ▪ Building upon established rapport. ▪ Accommodating for time and space limitations.
Case based consultation/education utilizing virtual platforms, as required.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Ensure platform meets security requirements for personal health information.
Topic specific education sessions utilizing virtual platforms, as needed.	PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate and collaborate simultaneously. ▪ Ability to provide education to meet the needs for unique case/organization specific situations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Ensure topic/dialogue is relevant to situation that clinical team are experiencing. ▪ Create topic specific tip sheets ▪ Ensure regular contact/meetings with partners. ▪ Determine technology availability/needs. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.



Knowledge to Practice Activity	Who?	Comments
Support/coach embedded BSO Champion(s) in supporting translation and implementation strategies.	PRCs & other BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Building on existing relationships within the organization. ▪ Strengthen relationships between PRCs and embedded/mobile teams. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Not all homes have embedded BSO (mobile team members redeployed to LTC homes, but not all homes received a BSO team member). ▪ Varying relationships between embedded BSO champions and clinical team.
Coaching and mentoring by embedded BSO Champions.	Embedded BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Established relationships with point-of-care team members. ▪ Entire Knowledge to Practice Process supported
Participate in Behavioural Supports Rounds virtually or in-person.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintain attendance and team problem solving during rounds. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Rounds not scheduled/cancelled. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Advocate for the importance of maintaining monthly rounds ▪ Collaboration with leadership to triage need for in-person participation (see Appendix for Capacity Building Decision Making Guide).
Orientation of new staff virtually or in-person.	BSO Champion & PRCs	<p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Collaboration with leadership to triage need for in-person participation (see Appendix for Capacity Building Decision Making Guide). ▪ Create an individualized education plan. ▪ Consider offering content in multiple shorter sessions to address current priorities.
Liaison with BSO core curriculum partners to plan formal education during pandemic.	BSO PCO & BSO Knowledge to Practice CoP Leadership	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Meeting with CoP leadership and curriculum partners to discuss next steps and collaborative opportunities.



Knowledge to Practice Activity	Who?	Comments
<p>Short in-person consultation/ education with small groups to:</p> <ul style="list-style-type: none"> ▪ Gather the needs of staff. ▪ Teach, coach and mentor. ▪ Lead cased based discussions. ▪ Provide resident specific consults to care-plan for potential second wave (e.g. isolation protocols). ▪ Review/distribute Tip Sheets and other resources. 	<p>PRCs</p>	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ In-person coaching and mentoring. ▪ Emotional support and validation of team members’ lived experience (e.g. caregiver burden, media attention on LTC and loss of residents). ▪ Different perspectives learned from different staff/shifts. ▪ Able to see the environment and tailor education needs accordingly. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ PPE access (including who will provide and how to determine what PPE is required). <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Consider a survey to partners regarding learning needs and readiness. ▪ Ensure topics are relevant to learners and build upon each other over time. ▪ Collaboration with leadership to triage need for in-person attendance (see Appendix for Capacity Building Decision Making Guide). ▪ Review Ontario’s Infrastructure Health and Safety Association Guidance on in-person classroom training during COVID-19 resource. ▪ Inquire/confirm organization IPAC policy/ procedures (e.g. PPE, cleaning of supplies). ▪ Follow Provincial/Local Public Health/ Organizational recommendations (e.g. number allowed within in-person gatherings, PPE requirements, attending only one site per day). ▪ Plan for required PPE. ▪ Diligent self-monitoring of symptoms. ▪ Consider impact of PPE on communication. Consider need to speak louder, at a slower pace, being mindful of background noise and use of large picture name tags or transparent masks. ▪ Work with in-house resources for preplanning (e.g. space/room, staff available). ▪ Consider outdoor education settings. ▪ Plan for a controlled physical environment (e.g. allows for pre-screening, limited access and cleaning).



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none">▪ Ensure adequate space pre-booked.▪ Clarify the expectations for the educator when they leave the site.▪ Maintain physical distancing protocol.▪ Stay at the site for the day allowing for multiple mini-sessions for team members as they are available.▪ Consider broadcasting session to team stations.▪ Consider recording the session for future review.▪ Consider offering content in smaller sessions to address current priorities.



Pandemic Capacity Building Stage #3: Enhanced In-person Opportunities

Knowledge to Practice Activity	Who?	Comments
BSO leading and/or a contributing partner in locating and retrieving research, evidence and best-practices.	BSO PCO, Knowledge to Practice CoP, PRCs & BSO Regional Teams	
Create and maintain a centralized online location for COVID-19 resources.	BSO PCO & brainXchange	Examples: <ul style="list-style-type: none"> Develop and regularly update the BSO COVID-19 Resource Page
Regular provincial/regional communications through email, newsletters and social media.	BSO PCO , BSO Regional Teams & PRCs	Examples: <ul style="list-style-type: none"> Weekly COVID-19 Communication emails to BSO network from the BSO PCO highlighting new resources, knowledge exchange events and wellness strategies.
Maximize capacity of the BSO Knowledge to Practice CoP.	BSO PCO & BSO Knowledge to Practice CoP	Examples: <ul style="list-style-type: none"> Increased frequency of Knowledge to Practice CoP meetings. Networking of members. Utilization of previously developed knowledge to practice resources available at Knowledge to Practice webpage. <p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> Optimizing existing capacity building infrastructure and relationships through a CoP that brings together PRCs and other clinical educators to collect, share and spread innovations. Identify trends, resources and strategies across the province.
Promotion of electronic resource sharing available in centralized locations.	BSO PCO, PRCs & BSO Regional Teams	Examples: <ul style="list-style-type: none"> BSO & brainXchange COVID-19 Resource Page RGP Toronto COVID-19 Resource Page Supports for LTC Team Members during COVID-19



Knowledge to Practice Activity	Who?	Comments
Creation (leading or as a partner) and distribution of regional/provincial/national resources.	BSO PCO , BSO Regional Teams & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Non-Pharmacological Approaches to Support Individuals Living with Dementia Maintain Isolation Precautions ▪ Supporting Safer Smoking Practices & Smoking Cessation during COVID-19 ▪ The Person Behind the Mask: Communicating with Clients Living with Dementia While Protecting Ourselves (also available in French) ▪ Strategies for Swabbing Individuals with Dementia ▪ Communication Tip Sheet for Redeployed Staff Working in Long-Term Care with Residents with Cognitive Impairment ▪ Housekeeping Tip Sheet: Caring for Residents with Cognitive Impairment in Long-term Care ▪ Engaging Activity Ideas for Dementia During COVID-19 ▪ Ethical guidance for people who work in long-term care: What is the right thing to do in a pandemic?
Hosting provincial/regional webinars.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Hosting the Dementia Isolation Toolkit: Ethical Guidance Tool webinar ▪ Baycrest Behavioural Supports Rounds
Promotion of available online educational opportunities.	BSO PCO, PRCs & BSO Regional Teams	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Person-Centred Language E-learn ▪ brainXchange webinars ▪ ECHO Care of the Elderly for LTC: COVID ▪ CLRI LTC Orientation for Incoming Staff ▪ GPA eLearning ▪ U-First! Online course <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Time for team members to complete E-learns <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Promote dedicated time for education completion.
Develop new E-learn opportunities	BSO PCO & PRCs	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Sexual Expression & Aging E-learn (<i>in progress</i>)



Knowledge to Practice Activity	Who?	Comments
<p>Connect with regional BSO team members and partners utilizing virtual platforms for regular meetings/events (e.g. weekly, biweekly, monthly) for:</p> <ul style="list-style-type: none"> ▪ Sharing of resources ▪ Topic specific education ▪ Responsive behaviour rounds ▪ Case based consults ▪ Guest speakers ▪ Sharing ideas/strategies ▪ Open forum/dialogue 	<p>PRCs</p>	<p>Examples of Virtual Platforms:</p> <ul style="list-style-type: none"> ▪ Telephone, Zoom, OTN, Blackboard Collaborate, GoToMeeting, Microsoft Teams, Google Meets, Adobe Connect and BlueJeans. <p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ PRC role with established relationships. ▪ Opportunity for multiple organizations can participate together. ▪ Inclusive of large geographical regions. ▪ Topic specific that is relevant to needs/situations <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Team members may be experiencing stress, strain and/or compassion fatigue that impacts readiness. ▪ Some organizations do not permit some virtual platforms due to privacy concerns. ▪ Some participants are only able to call in therefore no access to chat pod, poll questions and slides. ▪ Difficulty with bandwidth, particularly in rural communities. ▪ Access to computers/electronic devices with camera and microphones. ▪ Limited computer knowledge. ▪ Recording limitations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Consider gathering topic ideas (e.g. survey). ▪ Ensure topic/dialogue is relevant to situation that clinical team are experiencing. ▪ Consider teaching/dialogue on the topic of compassion fatigue and/or moral distress. ▪ Ensure regular contact/meetings with partners. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Determine technology availability/needs. Advocacy may be needed to ensure access. ▪ Advocate for funding opportunities for organizations/teams to access technology to facilitate virtual consultations and education.



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none"> ▪ Create ‘how to’ resources (e.g. webinars/tip sheets) for use of virtual platforms including etiquette, utilization of platform and practice considerations (e.g. protecting personal health information). ▪ Use of breakout rooms within platforms and polling software (e.g. Mentimeter or Poll Everywhere) to foster interaction and self-reflection. ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.
Virtual 1:1 Connection with embedded BSO team members.	Mobile BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintaining routine, momentum and support of embedded team members. ▪ Building upon established rapport. ▪ Accommodating for time and space limitations.
Case based consultation/education utilizing virtual platforms, as required.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Ensure platform meets security requirements for personal health information.
Topic specific education sessions utilizing virtual platforms, as needed.	PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Opportunity for multiple providers from different sites to participate and collaborate simultaneously. ▪ Ability to provide education to meet the needs for unique case/organization specific situations. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Recognize and consider the stress, strain and/or compassion fatigue team members may be experiencing. ▪ Ensure topic/dialogue is relevant to situation that clinical team are experiencing. ▪ Create topic specific tip sheets ▪ Ensure regular contact/meetings with partners. ▪ Determine technology availability/needs. ▪ Keep meetings short in nature (e.g. 30 minutes). ▪ Consider recording the event and/or sending electronic resources (e.g. PDF versions) for review.



Knowledge to Practice Activity	Who?	Comments
Support/coach embedded BSO Champion(s) in supporting translation and implementation strategies.	PRCs & other BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Building on existing relationships within the organization. ▪ Strengthen relationships between PRCs and embedded/mobile teams. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Not all homes have embedded BSO (mobile team members redeployed to LTC homes, but not all homes received a BSO team member). ▪ Varying relationships between embedded BSO champions and clinical team.
Coaching and mentoring by embedded BSO Champions.	Embedded BSO team members	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Established relationships with point-of-care team members. ▪ Entire Knowledge to Practice Process supported.
Participate in Behavioural Supports Rounds virtually or in-person.	BSO team members & PRCs	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ Maintain attendance and team problem solving during rounds. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Rounds not scheduled/cancelled <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Advocate for the importance of maintaining monthly rounds ▪ Collaboration with leadership to triage need for in-person participation (see Appendix for Capacity Building Decision Making Guide).
Orientation of new staff virtually or in-person.	BSO Champion & PRCs	<p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Collaboration with leadership to triage need for in-person participation (see Appendix for Capacity Building Decision Making Guide). ▪ Create an individualized education plan. ▪ Consider offering content in multiple shorter sessions to address current priorities.
Liaison with BSO core curriculum partners to plan formal education during pandemic.	BSO PCO & BSO Knowledge to Practice CoP Leadership	<p>Examples:</p> <ul style="list-style-type: none"> ▪ Meeting with CoP leadership and curriculum partners to discuss next steps and collaborative opportunities.



Knowledge to Practice Activity	Who?	Comments
<p>Short in-person consultation/ education with small groups to:</p> <ul style="list-style-type: none"> ▪ Gather the needs of staff. ▪ Teach, coach and mentor. ▪ Lead case based discussions. ▪ Provide resident specific consults to care-plan for potential second wave (e.g. isolation protocols). ▪ Review/distribute Tip Sheets and other resources. 	<p>PRCs</p>	<p>Opportunities/Benefits:</p> <ul style="list-style-type: none"> ▪ In-person coaching and mentoring ▪ Emotional support and validation of team members’ lived experience (e.g. caregiver burden, media attention on LTC and loss of residents). ▪ Different perspectives learned from different staff/shifts. ▪ Able to see the environment and tailor education needs accordingly. <p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ PPE access (including who will provide and how to determine what PPE is required). <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet for planning with leadership and staff. ▪ Consider a survey to partners regarding learning needs and readiness. ▪ Ensure topics are relevant to learners and build upon each other over time. ▪ Collaboration with leadership to triage need for in-person attendance (see Appendix for Capacity Building Decision Making Guide). ▪ Review Ontario’s Infrastructure Health and Safety Association Guidance on in-person classroom training during COVID-19 resource. ▪ Inquire/confirm organization IPAC policy/ procedures (e.g. PPE, cleaning of supplies). ▪ Follow Provincial/Local Public Health/ Organizational recommendations (e.g. number allowed within in-person gatherings, PPE requirements, attending only one site per day). ▪ Plan for required PPE. ▪ Diligent self-monitoring of symptoms. ▪ Consider impact of PPE on communication. Consider need to speak louder, at a slower pace, being mindful of background noise and use of large picture name tags or transparent masks. ▪ Work with in-house resources for preplanning (e.g. space/room, staff available). ▪ Consider outdoor education settings. ▪ Plan for a controlled physical environment (e.g. allows for pre-screening, limited access and cleaning).



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none"> ▪ Ensure adequate space pre-booked. ▪ Clarify the expectations for the educator when they leave the site. ▪ Maintain physical distancing protocol. ▪ Stay at the site for the day allowing for multiple mini-sessions for team members as they are available. ▪ Consider broadcasting session to team stations. ▪ Consider recording the session for future review. ▪ Consider offering content in smaller sessions to address current priorities.
<p>Offer BSO Core Curriculum (e.g. GPA, PIECES, U-First, DementiAbility, and Positive Approaches to Care).</p>	<p>PRCs</p>	<p>Challenges/Barriers:</p> <ul style="list-style-type: none"> ▪ Ability to bring together staff from various organizations. ▪ Readiness (e.g. staffing, sense of reservation) to bring together staff from various organizations or to allow staff to attend. ▪ Limited ability to participate in the hands-on components ▪ Education with PPE – impact on communication ▪ Maintaining/obtaining Trainer/Coach certification. <p>Recommendations & Tips:</p> <ul style="list-style-type: none"> ▪ Utilize the Knowledge to Practice Planning Worksheet and the BETSI for planning with leadership and staff. ▪ Collaboration with leadership to triage need for in-person education (see Appendix for Capacity Building Decision Making Guide). Consider a blended model (e.g. both online and in-class components) if offered by curriculum partners. Online components may be synchronous or asynchronous. ▪ Collaborate/consult with curriculum partners related recommendations for trainers/coaches/facilitators. ▪ Review Ontario’s Infrastructure Health and Safety Association Guidance on in-person classroom training during COVID-19 resource. ▪ Inquire/confirm organization IPAC policy/procedures (e.g. PPE, cleaning of supplies). ▪ Follow Provincial/Local Public Health/Organizational recommendations related to group gatherings (e.g. number allowed in in-person gatherings, PPE requirements). ▪ Plan for required PPE for trainer/coach and participants.



Knowledge to Practice Activity	Who?	Comments
		<ul style="list-style-type: none">▪ Diligent self-monitoring of symptoms.▪ Consider impact of PPE on communication. Consider need to speak louder, at a slower pace, being mindful of background noise and use of large picture name tags or transparent masks.▪ Working with in-house resources for preplanning (e.g. room, staff available).▪ Consider outdoor education settings.▪ Plan for a controlled physical environment (e.g. allows for pre-screening, limited access and cleaning).▪ Ensure adequate space pre-booked.▪ Clarify the expectations for the educator when they leave the site.▪ Endeavour to have fewer participants in larger spaces to promote physical distancing.▪ Consider catering bagged lunches with disposable cutlery.▪ Maintain physical distancing protocol as able.



Appendix

Capacity Building Decision Making Guide

Questions to Guide Decision Making

- 1) What are the capacity building needs/request?
- 2) What are the options for delivery/participation? Alternatives?
- 3) What provincial, regional, organizational policies (e.g. IPAC) impact and/or guide this decision?
- 4) What are the benefits of an in-person attendance?
- 5) What are the risks of an in-person attendance?
- 6) What strategies can be put into place to mitigate the risk(s)?
- 7) Who needs to be part of this decision?

Decision

Describe decided plan.

Those that contributed to decision (e.g. name, role):

Rationale for decision:

Evaluation/Learning from Experience

Learnings:

Suggestions for future: