Behavioural Supports Ontario-Dementia Observation System[©]

BSO-DOS[©]

Skillfully and Confidently Use the BSO-DOS[©] to Inform Behavioural Assessment and **Individualized Care Planning**



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







- A reliable direct observation tool that provides objective data about a person's behaviour every thirty minutes for 24-hours over five consecutive days
- An essential clinical tool in behavioural assessment and individualized care planning for persons living with dementia

BSO-DOS [®] WORKSHE										T FOR CI								
Step 1 Background (Co	mplete p	nior to Data	Collection	Sheet)														
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The BSO-DOS[©] is Used to:

- Identify behavioural patterns, trends and contributing factors associated with responsive behaviours
- Develop tailored non-pharmacological approaches to address unmet needs
- Evaluate the outcomes of non-pharmacological approaches
- Measure the impact of medications

Your Experience in Using the BSO-DOS[©]

- How familiar are you with the BSO-DOS[©]?
- ☐ This is your first time hearing about it You have heard of it, but have never used it ☐ You use it occassionally ☐ You use it often
- For those that have used the BSO-DOS^{\circ}, what parts of the tool have you completed?
 - □ The Background Section
 - ☐ The Data Collection Table
 - □ The Analysis and Planning Section







Your Experience in Using the BSO-DOS[©]

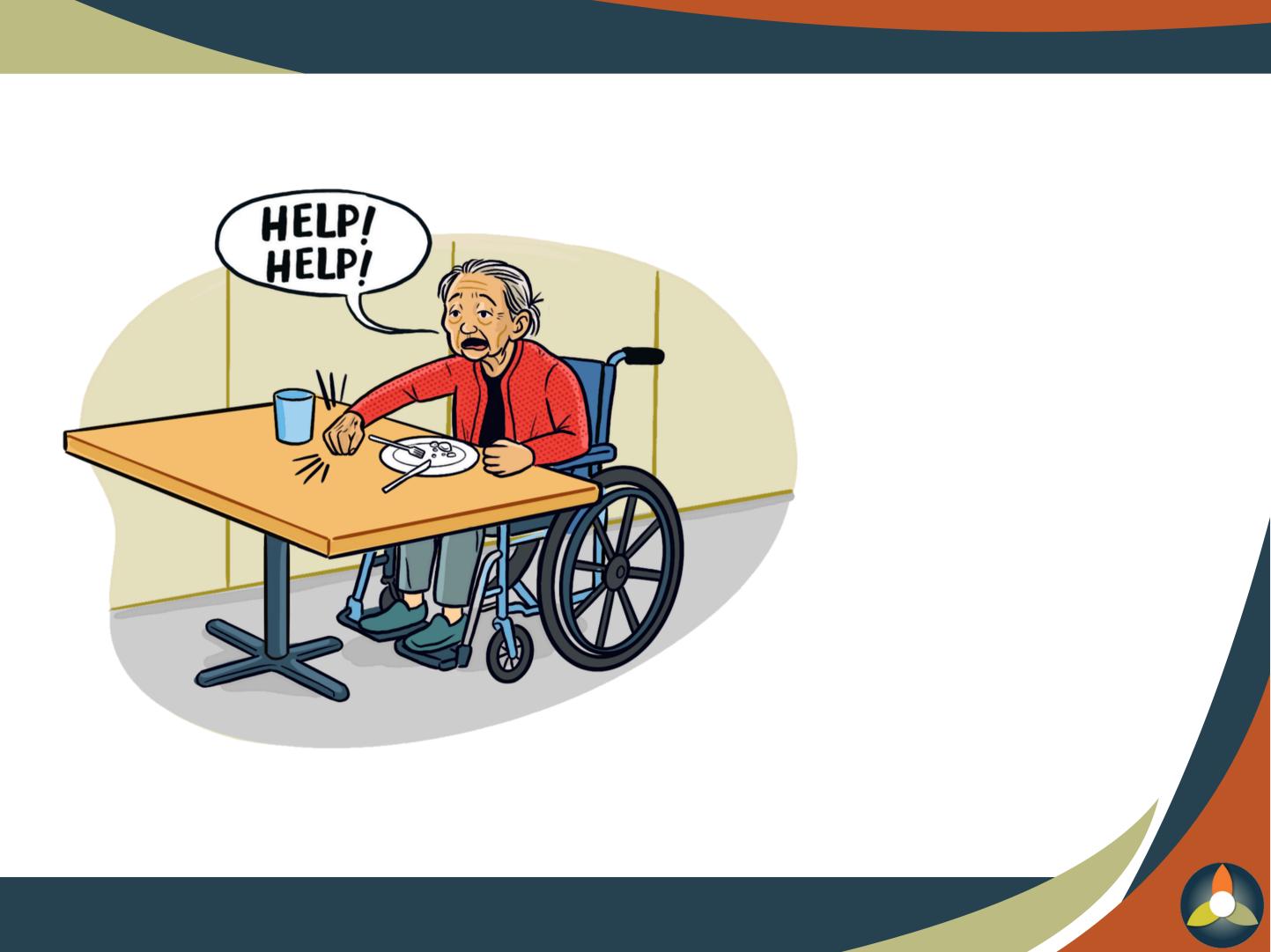
Thank-you for the role that you have played in completing the tool!

What benefits have you seen in using the BSO-DOS[©]?





Mrs. Cheng



Mrs. Cheng

Step 1 Background (Complete prior to Data Collection Sheet)

1. a) Check the reason(s) for completing BSO-DOS[©]:

Baseline/Admission	Evaluation of a new strategy/approach	X
Transition/Move	Adjustment of medications	
Change in behaviour	Support for a referral/transfer	
b) BSO-DOS® start date: 10/06/2025	BSO-DOS® stop date: 14 /06/2025	
Section 1 completed by (print name):	Nellie Wilkins	

New behaviour: Calling out Other:

Signature: Nellie Wilkins



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*Mandatory column

	Observed Behaviour*	Context	Observed Behaviour*	Context	
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Name:	Yun Cheng	
DOB (de	d/mm/yyyy) :	14/09/1939
HCN:	1111-111-11	1-MB
Other I	D:	
served Beh	aviours	

(For #3-8, check specifi	ic behaviours	as you ob	serve)	
1 (Blue) Sleeping				
2 (Green) Awake/ca	Im			
3 (Green) Positively	engaged			
 Conversing Engaging in activity Hand holding 	Huggin Kissing		Singing Smiling	9
4 (Yellow) Vocal exp	pressions (re	epetitive)	
 Asking questions Crying Grunting 	☐ Hummi ☐ Moanin ☑ Repeati	g	Reques Sighing Other:	
 S (Yellow) Motor ex ✓ Banging/rattling Collecting Disrobing Entering others' spaces 	Fidgetin	g g teeth	e) Rumm Trying Other:	
6 (Pink) Sexual exp Sexual comments/ Requesting sexual Sexual threats Sexual gestures Exposing genitals	questions [al favours [Self-pl presen	ted touchir others into	
7 (Purple) Verbal e	s 🗆 Swea	ring	□ Other:	
8 (Orange) Physical Biting Choking others Grabbing Hair pulling Hitting/slapping	l expressior Grief Kickin Pinchin Punch Pushir Scratcl	g ng ing ng	Self-inj	g
9 Other:				
10 Other:				
Context				
A: Alone C: Personal Care (e.g incontinent care, t F: Family/visitors pro L: Loud/busy enviro Q: Quiet environme Data Collection Table	. bathing, toileting) S esent) nment) nt	Resider	sions direct nt/patient/v sions directo Pain m ed :cat	visitor(s) ed at S taff
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Kah:l Farrøj	XF		Manning	OK
Sophie Koyanagi	st		5	
Tin Thomason	JT			

Page 2 of 2

Step 3 Analysis and Planning (Use the completed Data Collection Sheet)

- 3. a) Highlight the numbers on the Data Collection Sheet according to the colour-coded legend in order to identify patterns.
- b) Use the table below to calculate how often per day the behaviour(s) of interest occurred (not every row needs to be calculated).

	(Add u	he blocl o the nur ry per do	nber of l	ch day blocks fo	r each		Total the ½ hour blocks (Add up the number of blocks for each category over 5 days)
	Day 1	Day 2	Day 3	Day 4	Day 5		
1 Sleeping	20	15	22	24	20	=	101
2 Awake/Calm	22	22	13	14	20	=	91
3 Positively Engaged	3	3	I	З	3	=	13
4 Vocal Expressions	3	8	9	6	ч	=	30
5 Motor Expressions	1	2	5	١	I	=	7
6 Sexual Expression of Risk						=	
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Table completed by (print name):	Nellic	W:1K:ns					Sig

	Calculate the average	Co	oncer	ns
	number of 1-hour blocks per day (Divide the total blocks by 10. Hint: move the decimal one space left.)	Frequency	Duration	Risk
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Signature: Nelle Wilkins

							CTION	л			PRE-RELEASE VERSION #2 NOT FOR CLINICAL USE
	Observed Behaviour*	Context	Observed Behaviour*	Context	Observed Behaviour*	Context	Observed Behaviour*	Context	Observed Behaviour*	Context	Observed Behaviours
/M/Y	10/06/20		11/06/20		12/06/20	25	13/06/20		14/06/20		(For #3-8, check specific behaviours as you observe)
700	1))(1		1 (Blue) Sleeping
730	2		4	A	4	A			2		2 (Green) Awake/calm
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900	2		2	M	2		2	A	4	A	Engaging in Kissing Smiling
000	2	-	2	-	2		2	-	2	^	activity 🗌 Laughing 🗌 Other:
030	45	A	3	·	J		3		â		
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230	2		Ĵ		2		9		2		
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400	3		2)	45	L	5	C	4		Disrobing Pacing Other:
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530	3)	2		23		2		2		6 (Pink) Sexual expression of risk
600	3		2		2		2				Sexual comments/questions Self-pleasuring in other
630	2		2	-	2		2		2	-	Requesting sexual favours presence
700	2		4		3		2		ч Ч	×	Sexual threats Unwanted touching Sexual gestures Forcing others into sexual gestures
730 800	4	A	2		4		4	Q	2		Exposing genitals
830	2		วิ	·	7	A	4	Q	2		
900	2	-	3		4	A	3		3		7 (<i>Purple</i>) Verbal expression of risk Derogatory insults Swearing Other:
930	3		3		2		3	X	2		Screaming/yelling Threatening
000	3		2		2		2		3		8 (Orange) Physical expression of risk
20:30	2		5		Ι		3		2		Biting Kicking Self-injuring
2100	2		2		١				2		Choking others
130			2		1				1		Grabbing Punching Throwing
2200	1				<u> </u>						Hair pulling Pushing Other:
230	1				1				1		Hitting/slapping Scratching
300					<u> </u>						9 Other:
330			4								10 Other:
400											Context
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0130					1				1		C: Personal Care (e.g. bathing, Resident/patient/visitor
200			1		i		1		1		incontinent care, toileting) S: Expressions directed at
230			4				i				F: Family/visitors present X: Other: Pain medication giv
300	i		1		I		1		1		L: Loud/busy environment Y: Other:
330	I						I		I		Q: Quiet environment
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Step 3 Analysis and Planning (Use the completed Data Collection Sheet)

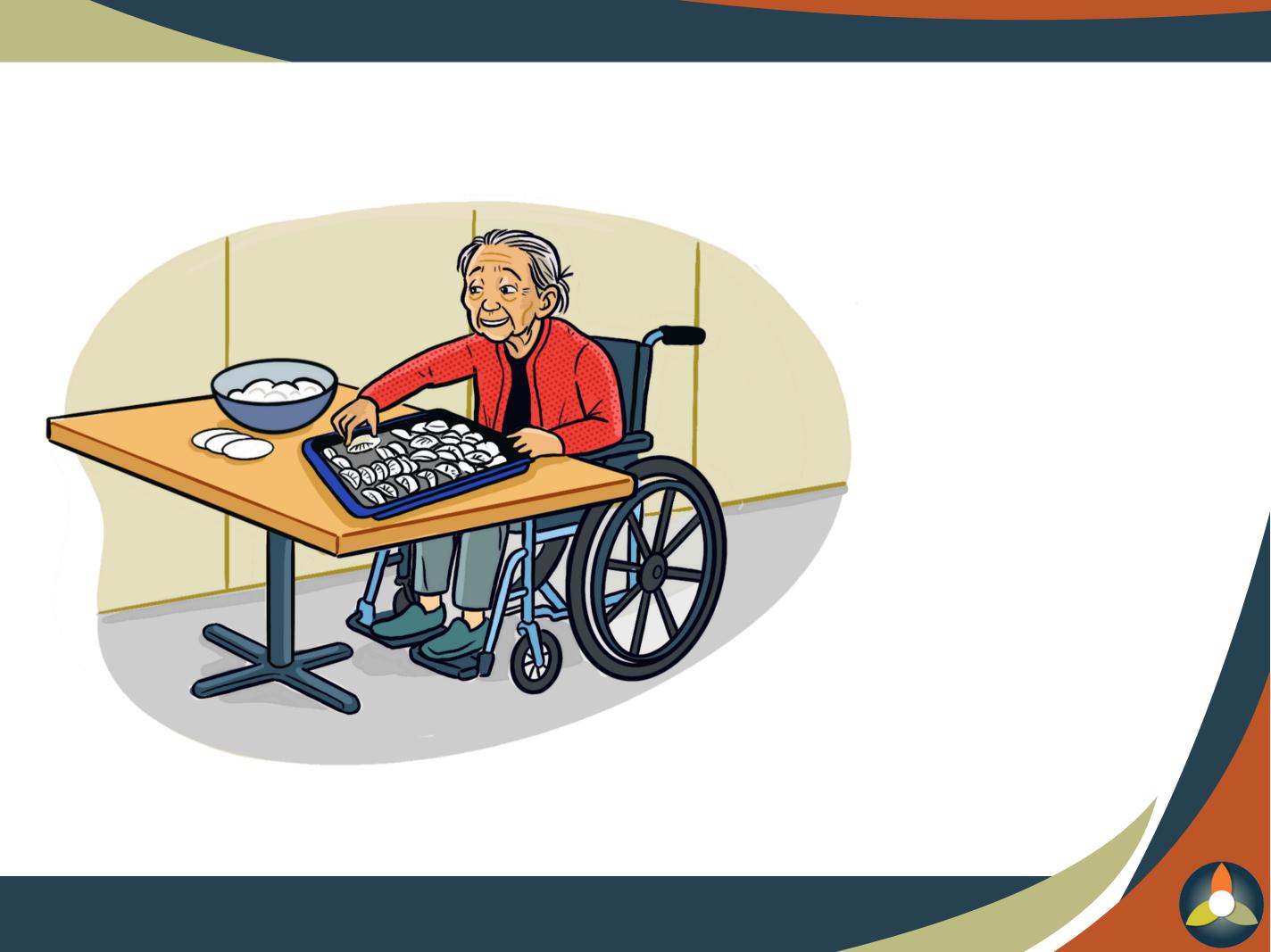
3. a) Highlight the numbers on the Data Collection Sheet according to the colour-coded legend in order to identify patterns. b) Use the table below to calculate how often per day the behaviour(s) of interest occurred (not every row needs to be calculated).

	Total the blocks for each day						Total the ½ hour blocks		Calculate the average	Concerns			
		p the nur ry per da		blocks fo	r each		(Add up the number of blocks for each category over 5 days)		number of 1-hour blocks per day (Divide the total blocks by 10. Hint: move the	Frequency	Duration	Risk	
	Day 1	Day 2	Day 3	Day 4	Day 5				decimal one space left.)	Ě	ă	, in the second	
1 Sleeping	20	15	22	24	20	=	101	÷10	10.1				
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Table completed by (print name): Nellie Wilkins

Signature: Nellie Wilkins





Progress Note

New Progress Note

Type: Responsive Behaviours/Personal Expressions

Date: 15/06/2025 13:00

BSO-DOS[©] completed 10/06/2025 - 14/06/2025. Paper copy scanned to chart.

Summary of Analysis Table:

• Concerns identified in relation to frequency and duration of Vocal Expressions (3.0 blocks per day), frequency for Motor Expressions (0.7 blocks) and frequency for Verbal Expressions of Risk (0.5 blocks).

The BSO-DOS[©] data reveal the following:

- Repetitive vocal expressions typically occur when resident is alone mostly the morning when she gets out of bed and after meal times.
- When resident has poor sleep the night before, these vocal expressions are more likely to escalate into verbal and physical expressions of risk.
- When resident is positively engaged, she expresses less responsive behaviours.
- On average, resident was positively engaged during 1.3 one-hour blocks per day.

Identified possible causes and contributing factors:

- It is stressful for resident to be alone. She is used to having a lot of family around.
- Resident sleeps better when she has pain medication at bedtime. This was not given the night she slept poorly.
- Resident may need more time engaged in activities that are meaningful.

Planned next steps:

- Writer to request MRP to change pain medication to a scheduled dose in the evening, rather than prn. Pain to be assessed each shift.
- Team members to turn on the radio in resident's room at 0730, as this is when resident often starts to call out.
- Team and family to promote meaningful activities. Team to trial a new activity whereby they provide resident with white, non-toxic playdough to simulate dumpling dough. After each meal, a team member to provide Mrs. Cheng with the playdough and a tray from home. Family members plan to visit her during these times to make the dumplings together.
- Care plan updated as per above.
- Writer will initiate another BSO-DOS[©] (17/06/2025 21/06/2025) to measure the outcomes of these new approaches.

Created By: Nellie Wilkins, RN



Challenges to Implementing the BSO-DOS[©]

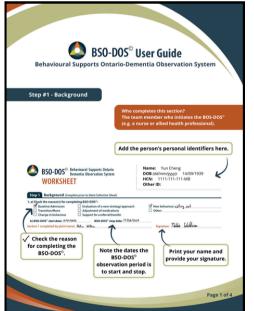
What challenges does your team face in using the BSO-DOS[©]?

How might your team overcome these challenges?

What next steps are needed for your team to use the BSO-DOS[©] in an effective and valuable way?

Additional BSO-DOS[©] Resources Available





Fact Sheet

A two page document that provides quick facts about the BSO-DOS[©]



User Guide

A four page user-friendly guide for point-of-care team members to reference as they complete the BSO-DOS[©]



+ MORE!





Resource Manual

A 50+ page resource that includes definitions, details for completing each section, frequently asked questions, and case studies

Video

A six minute educational video



Questions?





Contact Information

BSO Provincial Coordinating Office



provincialBSO@nbrhc.on.ca



www.brainxchange.ca/BSODOS

