

## HFA – Behavioral Support Workshops Learning Objectives

### Day 1

- To review PIECES Framework when assessing residents
- To review the 3D's (Depression, Delirium, Dementia)
- To review the U-First Training Program
- To practice applications of key behavioral training curricula

### Day 2

- To reflect on behavioral support services across the continuum of care
- To understand the process of referral to behavioral support services
- To understand the Long-Term Care Behaviour Management Team Model

### Day 3

- To understand core features of Acquired Brain Injury
- To understand the relationship between brain injury and behavior
- To practice communication techniques responsive to the needs of ABI
- To improve assessment through behavioral observation of ABI residents.

### Day 4

- To understand the aggression cycle in the context of dementia.
- To practice escalation prevention strategies and techniques
- To learn incident debriefing techniques
- To reflect on systemic approaches to crisis intervention

## Behavioural Support Role Day One at a Glance

Time	Session	Facilitators
9:00 –9:30 am	Overview and Introduction	Dr. David Ryan Director of Education and Knowledge Processes, Regional Geriatric Program of Toronto
9:30-10:00	Learning Needs Pre-test	John Thomas, PRC <b>BA, BEd, MSW</b> (PRC)
10:00 – 10:15 am	<b>Break</b>	
10:15 – 12:00	Using Case Explorer’s - techniques and tools such as PIECES will be applied in reviewing 3D’s protocols.  U-First! – Learn how this framework supports and enhances the Behavioural Support Role,	Anne Stephens RN, BScN, MEd, GNC(C)  Catherine Brookman EdD Director, Special Projects InterRAI CHA Project Lead SHRTN Co-Chair
12:00 – 1:00	<b>LUNCH</b>	
1:00 - 1:30 pm	LTC-Mental Health Psychogeriatric Decision-Tree	Marsha Nicholson
1:30 – 2:30 pm	Walking through the Assessment Tools	John Thomas <b>BA, BEd, MSW</b> (PRC)
2:30 –2:45 pm	<b>Break</b>	
2:45 – 4:00 pm	<u>Build-a-Case</u> In small facilitated groups, participants will use the build-a- case method to develop scenarios in which behavioral resource staff would be needed	Ellen McKenzie (PRC) Ken Wong (GiiC Consultant)
4:00 – 4:30 pm	How did we do? Review of the day.	John Thomas (PRC)

## Bipolar, Psychosis, Schizophrenia and Dementia Day Two at a Glance

Time	Session	Facilitators
9:00 – 10:00 am	Jeopardy – Test your knowledge. Win Prizes	Tony Schembri PRC West Park Health Care Center
10:00 – 10:15 am	<b>Break</b>	
10:15 – 11.30	<p style="color: blue;">Behavioral Support Services Across the Continuum of Care: From the Community to Special Care Units.</p> <p>Dr. Goran Eryavec - Medical Director, Geriatric Psychiatry and Memory Clinic NYGH</p> <p>Pam Roberts, RN, BA, CPMHN(C) - Case Coordinator, PACE</p> <p>Erin MacLean, RN, MSc. - Geriatric Mental Health Outreach Team</p> <p>Dr. Ilan Fischler –Psychiatrist Seniors Program, Special Services Whitby Mental Health Centre</p> <p>John Thomas, BA, BEd, MSW (PRC)</p>	
11.30 – 12.00	<b>Ask the Experts</b> – All the things you wanted to know about behavioral support services but didn't have an opportunity to ask	
12:00 – 1:00	<b>LUNCH</b>	
1:00 – 2:00 pm	Review of Tools and Referral Process to Toronto Rehabilitation Institute and CAMH	Ken Wong, IPE Mario Tsokas, PRC Jacqueline Lyn, PRC And facilitation team
2:00 – 2:15 pm	<b>Break</b>	
2:15 – 3:00 pm	Long-Term Care Behaviour Management Team Model	Jacqueline Lyn, PRC And Facilitation Team
3:00 – 3:30 pm	How did we do? Review of the day.	John Thomas (PRC)

## Acquired Brain Injury Workshop – Day Three at a Glance

<b>Time</b>	<b>Session</b>	<b>Facilitators</b>
9:00 – 9:10 am	Opening remarks	
9:10 – 9:30 am	Jeopardy	Tony Schembri (PRC)
10:00 – 10:15 am	<b>Break</b>	
10:15 – 12:00	ABI – Difference between Traumatic and non-traumatic brain injuries. Areas of the Brain	Tony Schembri (PRC)
12:00 – 1:00	<b>LUNCH</b>	
1:00 – 3:00 pm	Interactive case studies and hamming it up with ABI	Tony and Facilitation team
3:00 – 3:15 pm	<b>Break</b>	
3:15 – 4:00 pm	Behavioral observation and building consensus for client-centered care	Tony Schembri (PRC)
4:00 – 4:30 pm	Evaluation	John Thomas (PRC)

## Aggressive Behaviour Workshop Day Four at a Glance

Time	Session	Facilitators
9:00 – 9:10 am	Opening remarks/Case Study:	Steve Mathew (Whitby Mental Health Centre)
9:10 – 10:15 am	Plenary: Dementia disease process, client centered models of dementia care and the aggression cycle	
10:15 – 10:30 am	<b>Break</b>	
10:30 – 12:00	a) Pre-crisis assessment and prevention Intervention techniques	Steve and Facilitation team
12:00 – 1:00	<b>LUNCH</b>	
1:00 – 3:00 pm	b) Crisis intervention skills: including personal safety demonstration and practice, crisis de-fusion and containment techniques	Steve and Facilitation team
3:00 – 3:15 pm	<b>Break</b>	
3:15 – 4:00 pm	c) Post crisis skills including: crisis debriefing and double loop learning	Steve Mathew
4:00 – 4:30 pm	Incident Debriefing Techniques Becoming a Change agent Evaluation and Closing Remarks	Steve Mathew



**Homes for the Aged Behavioral Support Role  
Evaluation Results Summary  
Day One**

**TOTAL Number of respondents = 66**

Please read the following items and circle the value on the scales provided that best reflect your rating of the conference.

1. Please circle the number that best describes your feelings on various aspects of today's presentation:

**1 = Inadequate 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent**

<b>Topic</b>	<b>RANGE</b>	<b>MEAN RATING</b>
Overview of the 3 D's	2 - 5	4.0
Building Assessment Tool Kit	3 - 5	4.2
Interprofessional Collaboration	2 - 5	4.2
Using / Understanding the Tools	3 - 5	4.2
U-First! Overview	2 - 5	4.2
Build A Case (Building it)	2 - 5	4.1
Case - Strategy Application	2 - 5	4.2

Did the case that you helped to build accurately reflect the kind of situations that you think would need the help of a behavioral resource nurse? **YES - 60** **NO - 6**

Did the experts provide information that would help you to better manage the challenges presented by the case you built? **YES - 59** **NO - 7**

<b>Questions</b>	<b>Percentage</b>	<b># of people</b>
Good opportunity to interact with others	86	57
Good pace of today's presentation	88	58
Clarity of explanations	98	65
Presenters use of visual aides	80	59
Previously PIECES trained	17	11
Previously U-First trained	14	9
Previously GPA trained	.015	1

What content did you find the most useful?

- All of the assessment tools
- All of the session was very important, informative and refreshing
- Assessment tools for assessing clients for sudden change in behavior
- Building a case
- First half of the morning
- How to use/apply the assessment tools
- Learn about the tool and resources
- Learning how to use the tools - case building

PIECES and the tools  
Review of tools and forms at end of day  
Assessment process. Not just for harmful behavior pts.  
Most useful is PIECES and assessment tools  
To utilize the resources of the PRCP team/outreach team earlier in  
Tools in assessing behavioral problems of the resident  
U-first  
U-First overview  
Working together

What did you like most about the session?

All of it/very useful  
All the sessions  
All topics  
Anne Stephen's presentation  
Anne Stephen's presentation and I enjoyed the exercises  
assessment tools  
building a case and scenarios  
Case discussions  
Different assessment tools  
Everything  
Excellent  
Group discussions case study  
Group interactions building a case homework assessment (own resident)  
Information about PIECES  
Interaction with the group session  
More sessions like this  
Speakers were very good.  
Techniques and tools  
Thank you for the information  
The mini test to see what I know  
The opportunities to ask questions and receive relevant answers  
The overheads with explanation  
This has helped to define what my role will be in the future  
U-First, PIECES  
Understanding PIECES. How to use different assessment tools.  
Very informative  
Very interesting

What could be done to improve the session?

Change the format of how to do the assessment before the case study  
have more community based behavioral support  
It is perfect and an excellent program  
More explanation of the tools before the case building exercise so we could incorporate them in the case study.  
More practical  
More speakers  
More time to be given to use of assessment tools  
Presenters could use more examples during presentations

Read before about the topics  
 Reduce build a case time. Less use of acronyms  
 Review case tools pre to case study



**Homes for the Aged Behavioral Support Role  
 Evaluation Results Summary  
 Day Two**

**TOTAL Number of respondents = 70**

Please read the following items and circle the value on the scales provided that best reflect your rating of the conference.

1. Please circle the number that best describes your feelings on various aspects of today's presentation:

1 = Inadequate 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent

Topic	RANGE	MEAN RATING
Jeopardy	2 – 5	4.5
Bipolar/Schizophrenia – Anne Stephens	1 – 5	4.3
GMHOT – Erin Maclean	1 – 5	4.1
Whitby MHC – Dr. Ilan Fishcler	1 – 5	4.1
PRC Role	2 – 5	4.3
Depression – Dr. Goran Eryavec	3 – 5	4.5
Assessment Tools	1 – 5	4.3
TRI referral	1 – 5	4.2
Behav Support CAMH	1 - 5	4.1
<b>TOTAL</b>		<b>4.3</b>

Question	Percentage	# of people
Good opportunity to interact with others	66	46
Good pace of today's presentation	56	39
Clarity of explanations – <b>Very clear</b>	40	28
Presenters use of visual aids – <b>Very helpful</b>	43	30

What content did you find the most useful?

- All the program was excellent
- Homework with the tools
- How to get help when needed
- How to refer patient to hospital
- Overview of bipolar/schizophrenia psychosis
- PRC role
- The referral process
- Using assessment tools

What did you like most about the session?

- Afternoon session
- All the topics
- Everything



Explanation of the tools  
 I like all the sessions.  
 Informative and relevant  
 Jeopardy  
 Most of the speakers were great.  
 Overview of bipolar-schizophrenia psychosis  
 Perfect and interesting topics  
 They were trying their best. I have no complaints.  
 This program is very well organized and extremely helpful  
 Tools were very helpful  
 Visual aids helped  
 WMHC guest speaker was informative  
 Working together

What could be done to improve the session?

It would have been helpful to have more education or hands-on tools that can be used to assess clients. A lot of the info was too general and not really applicable to my workplace.  
 More exercises and feedback  
 More explanatory  
 More working examples of assessments



**Homes for the Aged Behavioral Support Role  
 Evaluation Results Summary  
 Day Three**

**TOTAL Number of respondents = 65**

Please read the following items and circle the value on the scales provided that best reflect your rating of the conference.

1. Please circle the number that best describes your feelings on various aspects of today's presentation:

1 = Inadequate 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent

<b>Topic</b>	<b>RANGE</b>	<b>MEAN RATING</b>
Jeopardy Day 2 Recap	3 – 5	4.6
Definitions of brain injury	3 – 5	4.6
Areas of the brain	3 – 5	4.5
Types of memory	3 – 5	4.6
Different types of aphasia	2 – 5	4.3
Baseline discussion	3 – 5	4.2
Creating a decision matrix	2 – 5	4.2
ABC process	3 – 5	4.4
Functional assessment	3 - 5	4.3
ABI general guidelines	3 – 5	4.4
Case application	3 – 5	4.4
<b>TOTAL</b>		<b>4.3</b>

Question	Percentage	# of people
Good opportunity to interact with others	88	57
Good pace of today's presentation	91	59
Clarity of explanations – <b>Very clear</b>	58	38
Presenters use of visual aids – <b>Very helpful</b>	66	43

What content did you find the most useful?

ABC process  
 ABI information  
 Areas of the brain  
 Case studies scenarios  
 Decision matrix  
 Explanation of the lobes of the brains  
 Jeopardy

What did you like most about the session?

ABC process  
 Developing strategies of ABC  
 Excellent speakers  
 Information was presented well and was very informative  
 Jeopardy  
 To increase communication with CCAC re: new admissions

What could be done to improve the session?

Bigger print on the screen and brighter background  
 Review all case studies and notes  
 Information was presented well and was very informative  
 Developing strategies of ABC  
 Excellent speakers  
 To increase communication with CCAC re: new admissions

**Homes for the Aged Behavioural Support Role  
Evaluation Results Summary  
Day Four**

**TOTAL Number of respondents = 63**

Please read the following items and circle the value on the scales provided that best reflect your rating of the conference.

1. Please circle the number that best describes your feelings on various aspects of today's presentation:

1 = Inadequate 2 = Fair 3 = Satisfactory 4 = Good 5 = Excellent

<b>Topic</b>	<b>RANGE</b>	<b>MEAN RATING</b>
Dementia disease process	3 – 5	4.5
Person centered care	3 – 5	4.6
TABC charting	3 – 5	4.3
Dementia internal experience	3 – 5	4.4
Aggression cycle	3 – 5	4.5
Nervous system overview	3 – 5	4.2
Physical strategies – strikes	2 – 5	4.5
Physical strategies - holds	2 – 5	4
Physical strategies - Containment	2 - 5	4.6
Debriefing	3 – 5	4.6
Case application	3 – 5	4.4
<b>TOTAL</b>		<b>4.4</b>

<b>Question</b>	<b>Percentage</b>	<b># of people</b>
Good opportunity to interact with others	82.5	52
Good pace of today's presentation	87	55
Clarity of explanations – <b>Very Clear</b>	62	39
Presenters use of visual aids – <b>Very Helpful</b>	62	39

What content did you find the most useful?

- Aggression cycle
- Case applications
- Containment
- Everything especially the demonstrations
- Interactive segments
- Person centered care
- Physical strategies
- Principles of physical approach

What did you like most about the session?

- All that was presented was new to me. I had no formal training to work on a psycho/special care unit so this has put all that I have learned over the years in perspective.
- Thank you.
- Importance of person centered care

Practice sessions

Presenter was wonderful

Thank you to all those involved in the planning and delivery of this workshop. I hope to take what I've learned and apply it to my every day practice  
Wonderful and very informative program



**PRC Program of Toronto Behavioral Support Training Pre/Post Knowledge Quiz  
Comparisons for each training day**

<b>Program</b>	<b>Topics</b>	<b>Comparison</b>	<b>Means (sd)</b>	<b>t value</b>	<b>d.f.</b>	<b>Sig (2-tailed)</b>
<b>Day 1</b>	PIECES 3 Ds U-First!	Day 1 pre Day 1 post	4.7 (1.57) 5.9 (1.45)	4.883	62	.000
<b>Day 2</b>	Behavioral support roles/ Developmental Disabilities	Day 2 pre Day 2 post	2.5 (1.08) 6.0 (1.45)	19.189	62	.000
<b>Day 3</b>	Acquired Brain Injury/communication/ Behavior assessment	Day 3 Pre Day 3 post	3.7 (1.14) 4.1 (1.33)	5.835	62	.000
<b>Day 4</b>	Cycle of aggression/. Systemic response/ and Debrief	Day 4 pre Day 4 post	2.5 (1.33) 5.0 (1.53)	9.721	59	.000
		Total Pre Total Post	13.3 (3.11) 21.5 (3.42)	17.935	62	.000