



At St. Peter's
Hospital

Breaking News. . .Specialized Geriatric Services

Welcome to the RGPc Newsletter. Breaking News brings you current information related to Specialized Geriatric Services (SGS) while offering our Regions a venue for sharing news, events and initiatives with others. If you have news that you would like to share across RGPc please email jhorvat@stpetes.ca

Issue 14

February Newsletter 2006

Special points of interest:

- Highlight on Halton
- RGPc Update
- Education Calendar for February
- Recommended Reading List

Please email this newsletter to all appropriate contacts & networks. If you would like to be added to our distribution list, please contact Jenifer Horvat:

Highlight on Halton

Development of a Behavioural Resource Person in Adult Day Programs

With one-time funds, the Halton Adult Day Programs, with the support of the Halton Psychogeriatric Resource Consultants (PRC) and the Alzheimer Society of Hamilton-Halton, are beginning the process of developing internal Behavioural Resource Persons. The goal is to develop and promote program knowledge and practices so that persons with dementia, who may have behavioural disturbances, who live in the community can be supported in a day program setting. When living in the community is no longer possible, the Adult Day Program will assist in the transition to Long Term Care. All staff will receive training using the full day curriculum of Gentle Persuasive Approaches in Dementia Care (GPA). Two staff (regionally) will attend the training to be GPA coaches so that, on an ongoing basis, GPA will be part of new staff orientation. The Resource person will receive U-First training and support to develop program specific ways of using U-First to support clients, staff, and families on program admission and/or as client issues arise. U-First training is to be scheduled for Spring 2006 and will be open to the Halton community providers to develop/reinforce regional partnerships. For more information contact: mpenko@stjosham.on.ca

Halton Geriatric Mental Health Outreach Program (HGMHOP) and Halton COAST

Effective January 9, 2006 the region of Halton has a new mental health service operating - Halton COAST. COAST is a mental health crisis outreach and support team funded by the Ministry of Health and Long Term care through CMHA Halton. Mental health professionals work as a team in a unique partnership with police officers that are specially



trained in mental health. As a way of gaining a working knowledge of each other's services, COAST has seconded a HGMHOP staff person to work one-day per week for 12 weeks. We are very pleased with the 2-way communication and clinical support systems that have quickly developed between the two programs. The shared experiences have offered great learning opportunities! Both programs will continue to monitor the activity and impact to plan for potential next steps. Contact: jbaxter@stjosham.on.ca or supervisor.coast@haltonhealthworks.ca

Transition, Dementia and Behaviour

Further community development in the areas of transition, dementia and behaviour has occurred under the leadership of Halton CCAC in partnership with the Halton Geriatric Mental Health Outreach Program and Burloak LTC Home. CCAC case management and placement staff have been recently trained on behavioural assessment and tracking tools as a means to better define and problem solve behavioural issues in the community as a complement to their RAI assessment. CCAC staff

Update from Halton, continued...

trained on the Relocation Stress (RS) screen are actively using the screen to work with clients, families and other sector providers to develop effective strategies and partnerships pre, during and post movement into LTC. A one-day invitational conference was held in December 2005 where over 20 different CCACs were represented and related information and strategies were shared. Contact: elsie.irvine@halton.ccac-ont.ca

Hospital changes in Halton - Halton Healthcare Services (HHS)

On January 2, 2006 the Georgetown site of the William Osler Hospital was transferred to Halton Healthcare Services making HHS a 3-campus hospital corporation with locations in Oakville, Milton and now Georgetown. Halton Healthcare – Georgetown site offers 20 complex continuing care beds (formerly rehab beds), outpatient acute rehab services and 2 supportive housing units managed by Halton Healthcare Services. For more information please contact Program Leader Geriatrics and Rehab: kkohlberger@haltonhealthcare.on.ca

Virtual Dementia Tour: A Day Program Educational Experience

The Virtual Dementia Tour is sensitivity training that focuses on both physical and cognitive limitations.. The Psychogeriatric Resource Consultants in Halton along with the Public Education Coordinator from the Alzheimer Society of Hamilton and Halton provided this experience to staff and volunteers in all four programs, five sites, throughout the past few months (about 40 participants in total). Participants of the virtual dementia tour are asked to complete a pre-questionnaire and post-questionnaire. The feedback received after the tours have been very positive. Staff indicated that it was “*enlightening to experience how it may feel for program participants to get through the day*”. After the experience, the staff debriefing session was a time for participants to discuss: their feelings, behaviours exhibited by individuals with dementia and why they occur, the issue of anticipatory stress, and what they will do differently now that they have had the virtual dementia experience. These questionnaires were collated and all Adult Day Programs were provided with a summary report of staff answers and comments, as well as a summary of their “tour” experience (i.e. blood pressure changes, exhibited behaviours, etc.). Individual participants had their questionnaires returned to them along with feedback celebrating their knowledge, areas for further learning, and for a follow-up “reminder” to of the commitment they made regarding one thing they would start doing in their work because of the Virtual Dementia Experience. This program is not just about the time spent in the actual experience but the time taken to reflect on practice, knowledge, and the learning through dialogue that takes place with co-workers. Contact: lturner@stjosham.on.ca

End of Life in Dementia Care

The Alzheimer Society of Hamilton-Halton has been working with the Halton and Hamilton PRC's related to the topic of End Of Life in Dementia Care. A Community Forum was held in Halton Region on November 17/05 titled “Quality End-of-Life Care: Physical and Spiritual Support”. Speakers were Dr. Irene Tuttle and Rabbi Bernard Baskin. In attendance were family members, staff, and students. A series of fact sheets are being developed, with the first ones being on pain and artificial nutrition and hydration related to caring for persons with dementia who are at end of life. These will be circulated via the Palliative Care Initiative Newsletters (Halton-Peel and Hamilton) or through the Alzheimer Society of Hamilton-Halton.

Alzheimer Society Support Groups

Beginning in the Spring of 2006, the Alzheimer Society of Hamilton and Halton will be expanding their support groups into the Halton area. One of the new groups will provide education and social support for the person with the disease and their family members. As well, the Alzheimer Society of Hamilton and Halton is in the process of establishing a support group for families who have a spouse/parent in a LTC home. For more information please contact Hendrika Spykerman, Halton Outreach Coordinator at (905) 529-7030

Many thanks to Julia Baxter, Marion Penko & Leanne Turner all of the Halton Geriatric Mental Health Outreach Program for this information from Halton. Please watch for an update from Waterloo in March.

RGPc Update

Delirium Resources: Linking with B.C

Last March a small group of nurses working in Mental Health and Addictions Service at the Vancouver Island Health Authority developed a teaching DVD on Delirium and the Older Person. The DVD expands upon the work done by Anne Tassonyi, a Niagara Ontario-based PRC, who generously shared with the group her DVD on Recognizing Delirium. The final production will be ready to distribute in April 2006 and will contain a generic section for all health care professionals and menu items pertaining to the different health care sectors - acute care, residential care and home and community care. The DVD also contains brief information on delirium at end of life and an education resources section. All of the resources posted on a related website, and will also be linked with the work that the RGPc has compiled on Delirium.

Part of this project involves a public forum in Victoria BC at a Seniors centre. The group has ordered 300 of the "YOU can help prevent Delirium" posters developed by the Hamilton-based Committee for the Enhancement of Elder Friendly Environments (CEEFE) and sponsored by the RGPc. The posters will be disseminated across the Island especially where the public gather - e.g., Doctors offices, health units, seniors centres and in hospital and residential facilities - with the intent to cue staff, seniors and family members to Delirium prevention strategies.

For more information, please contact:

Ann Marie Monahan RN, MSN
Ph: (250) 755-7691 annmarie.monahan@viha.ca

To view/order the delirium poster, please visit www.rgpc.ca

RGP Geriatric Emergency Management conference

Dr. Lorraine Mion, the Director of Nursing Research and Geriatric Nursing at Metro-Health Medical Center, Case Western Reserve University in Cleveland Ohio and a pioneer in the development of emergency services for frail seniors, will give the keynote address at our 2nd Annual Geriatric Emergency Management Conference (GEM) planned for Thursday, March 2nd, 2006.

The conference, entitled "GEM: A Program Development Toolkit", will provide a very practical perspective on this important new service for frail seniors and will be of interest to health professionals, administrators and policy developers across the spectrum of care.

To view and print the conference brochure and registration form, please visit:
<http://rgp.toronto.on.ca/GEMConference2006.pdf>

McMaster Spring Workshop on Gerontology: Montessori-Based Dementia Interventions

The McMaster Centre for Gerontological Studies is pleased to present a special 2-day Spring Workshop on **Thursday, March 9 & Friday, March 10, 2006**, featuring "**MONTESORI-BASED DEMENTIA PROGRAMMING®**", led by **Dr. Cameron Camp**, Ph.D., Director and Senior Research Scientist, Myers Research Institute, in Cleveland, OH.

The first day of the program will focus on learning about the theory, principles, techniques and many applications of Montessori-Based Dementia Programming® and day two will focus on putting the techniques into practice. Also, this program is being subsidized (the fee is half the price of future 2-day sessions) and will be offered to a limited number of participants. Don't be disappointed – register early.

NOTE: An evaluation of the training and its delivery will be conducted to assist us in the development of a national training program that will focus on Interventions for Dementia.

The registration form can be accessed at:
www.socsci.mcmaster.ca/gerontology.

Please call 905-525-9140 x24449 to receive a hard copy of the program

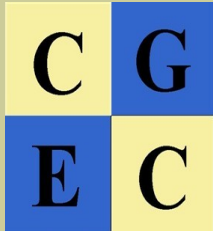
RGPC Education Calendar February 2006

For more information, please visit the Education calendar online: www.rgpc.ca

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			1	2	3	4
				RGPC Elder Abuse Train the Trainer Workshop		
5	6	7	8	9	10	11
					Geriatric Medicine Grand Rounds	
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

**Long Term Care Resource Centre
February 2006 Recommended Reading List
Compiled by Shannon Buckley**

**“When you absolutely positively have to know, ask a librarian!”
American Library Association (ALA)**



- Pope, S.K. et al (2006) Complementary and alternative therapies for Alzheimer's disease: a conference summary. *Alzheimer's Care Quarterly*, 7(1), 13-
- Gitlin, L.N. & Chee, Y.K. (2006) Use of adaptive equipment in caring for persons with dementia in the home. *Alzheimer's Care Quarterly*, 7(1), 32-
- Hancock, K. et al (2006) Palliative care for people with advanced dementia: the need for a collaborative, evidence-based approach. *Alzheimer's Care Quarterly*, 7(1), 49-
- Mitchell, M.G. (2005) The lived experience for older adults leaving a familiar situation. *Perspectives*, 29(4),
- Bernick, L. et al (2005) Caring of the body: maintaining dignity and respect. *Perspectives*, 29(4),
- Berlowitz, D.R. et al (2005) The PUSH tool: a survey to determine its perceived usefulness. *Advances in Wound Care*, 18(9), 480-
- Ostwald, S.K. et al (2006) Medications, comorbidities, and medical complications in stroke survivors: the CARES study. *Rehabilitation Nursing*, 31(1), 480-
- Walsh, M. & Coleman, J.R. (2005) Trials and tribulations: a small pilot telehealth home care program for Medicare patients. *Geriatric Nursing*, 26(6), 343-
- Fiori, K.L. et al (2006) Social network typologies and mental health among older adults. *Journals of Gerontology*, 61B(1), P25-
- Wilson, D. & Truman, C. (2005) Comparing the health services utilization of long-term-care residents, home-care recipients, and the well elderly. *Canadian Journal of Nursing Research*, 37(4),
- Surr, C. et al (2006) Dementia care mapping update: DCM 8 is ready for action. *Journal of Dementia Care*, 14(1), 17-
- Walker, B. (2006) Getting your facts right: insights for care staff. *Journal of Dementia Care*, 14(1), 20-
- Verity, J. (2006) Dolls in dementia care: bridging the divide. *Journal of Dementia Care*, 14(1),
- Ward, R. et al (2006) What is dementia care? An invisible workload. *Journal of Dementia Care*, 14(1), 28-
- Blondeau, D. et al (2005) Physicians' and pharmacists' attitudes toward the use of sedation at the end of life: influence of prognosis and type of suffering. *Journal of Palliative Care*, 21(4), 38-
- Koffman, J. & Higginson, I.J. (2005) Assessing the effectiveness and acceptability of interprofessional palliative care education. *Journal of Palliative Care*, 21(4), 262-
- Newman, M. et al (2006) Helping practitioners understand the contribution of qualitative research to evidence-based practice. *Evidence-Based Nursing*, 9(1), 4-
- El-Kadik, A. et al (2006) Review: multivitamins and mineral supplements do not reduce infections in elderly people. *Evidence-Based Nursing*, 9(1), 24-
- Avenell, A. et al (2006) Multivitamin and multimineral supplements did not reduce reported infection days and related use of healthcare services in the elderly. *Evidence-Based Nursing*, 9(1), 25
- Powell, P.M. et al (2006) A simple risk score predicted 7 day stroke risk after transient ischaemic attack. *Evidence-Based Nursing*, 9(1), 26-
- Richards, D. et al (2006) Trimethoprim reduced dysuria in women with symptoms of urinary tract infection but negative urine dipstick test results. *Evidence-Based Nursing*, 9(1), 17-