



2017 ONPHA Conference and Trade Show

Shaping
OUR
Future

Connecting Vulnerable Tenants with the Right Care

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Learning goals

1. Understand challenges faced by aging tenants with serious mental health challenges and active addictions when they are no longer able to live independently
2. Review the model and outcomes from a test of change underway to address this need



Background

- Seniors with mental health or addiction issues in supportive housing or assisted living require a specialized level of service not currently being supported.
- Mental health supportive housing is not funded to provide the personal care and assistance with ADL offered by PSWs, and conversely assisted living services are not funded to provide mental health support.
- Viable alternatives are scarce
- There have been barriers and challenges related to Home & Community Care services.



The Impact

- This begins to seriously impact people psychosocially and around the social determinants of health:
 - Housing becomes precarious
 - People are unable to age in place
 - Stigma around aging
 - Housing providers feel like they are helpless
 - Proper eldercare supports are not available



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The Impact

- If Long Term Care is needed and is an option – it can result in crisis placements
- If Long Term Care is needed and is not an option – as there are barriers for individuals living with mental health and addiction challenges - it can result in people stuck in Alternative of Care Beds or worse
- For many – there is no need for Long Term Care if there were community alternatives available

We can do better than this!



The Response

Community agencies came together to design an approach that:

- Encourages centralized specialty
- Leverages expertise
- Maximizes resources while protecting an agreed upon standard of care.



All project activities are being conducted within existing resources for this trial



CSS provide PSW services to residents in mental health supportive housing



Services include personal care such as:		
Bathing	Shaving	Grooming
Tooth care	Incontinence care	
Light housekeeping and laundry if part of a broader care plan		



Mental health workers provide education and guidance to staff and residents in assisted living



Services include:	
Goal setting	Case conferencing
Education on MHA management models	
Recommendation and connection to mental health and addiction resources	



The Process

1

- Identified client consents to service

2

- Worker completes referral form and sends to Central Intake Coordinator

3

- Intake Coordinator forwards to appropriate agency

4

- Receiving program contacts referral source to discuss service plan

5

- Service begins with combined meeting – referring working, worker providing service, client, and clinical leadership if needed.

6

- Status check-ins established and scheduled

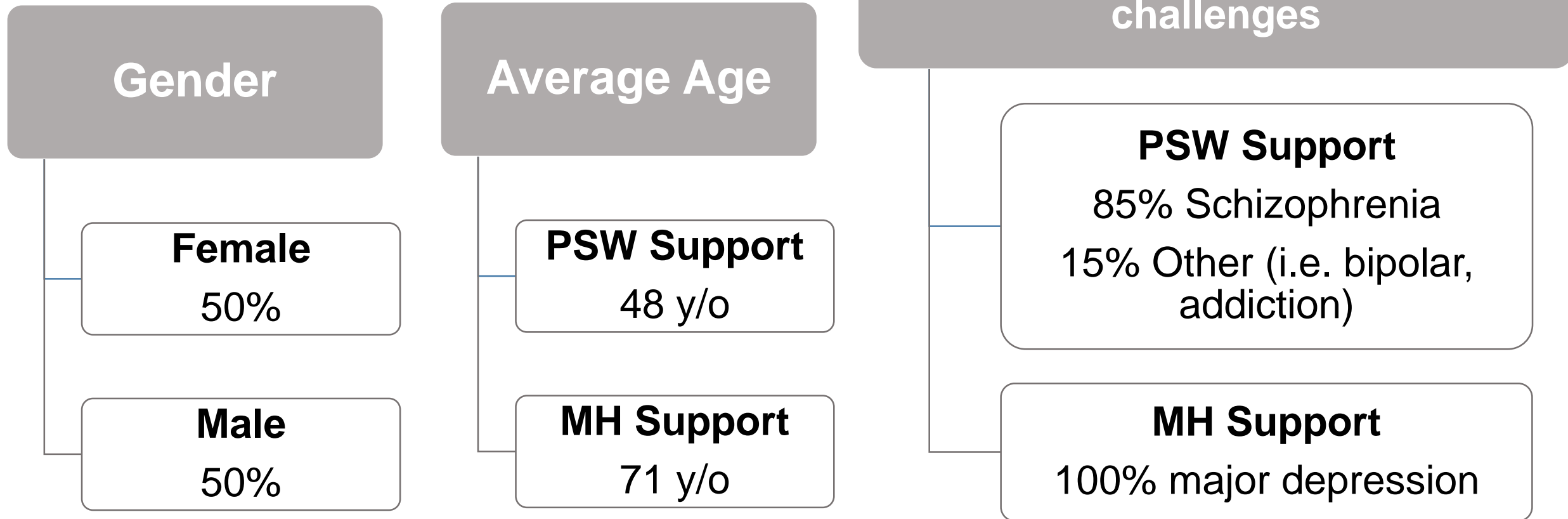


Outcomes

After a 5 month trial period

Population Served

- ❖ 23 referrals for PSW Support
- ❖ 5 referrals for Mental Health Support

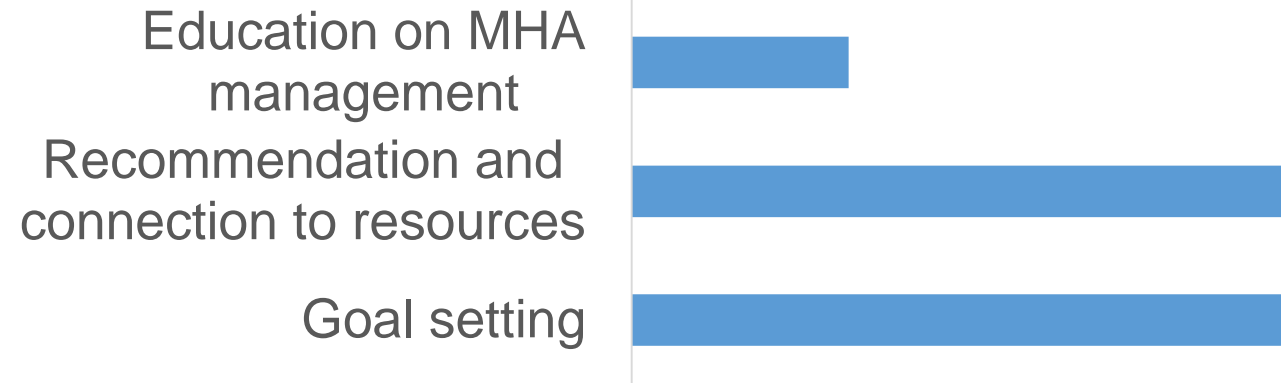


Services Requested

PSW Support Services



Mental Health Support Services



Addressing a Service Need

Eligibility criteria for PSW support stipulated clients have made an application to Home & Community Care that was declined or services were not effective. Workers were also asked to explain why..

Why were these services was not effective

- Client refused PSW service. Client is particularly complex due to immobility and blindness, abusive language.
- PSW's lack of experience with mental health and addiction clients made the relationship unmanageable on both sides. Client requires trauma informed practice.
- CCAC service inadequate for such high-needs clients

Why Home & Community Care declined service

- Client deemed ineligible as she is not a senior
- Client was declined and transferred to a paid service they cannot afford
- Denied because additional services had to do with mental health rather than physical needs



Resident Stories



- ☐ Client with complex physical and mental health diagnosis living in a boarding house.
 - ☐ Recently had a leg amputated due to complications with diabetes.
 - ☐ Laundry not located on the same floor as her apartment and struggling to complete activities of daily living with new physical challenges.
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- ☐ PSW is helping client through difficult time, re-learning basic life skills, and client is slowly becoming more independent.



Resident Stories



- ❑ Gentleman living with schizophrenia having a hard time managing incontinence.
- ❑ Causing great deal of discomfort for the client and contributing to difficult behaviours.
- ❑ Also caused problems for roommate, jeopardizing stability and well-being for both.
- ❑ Client refused service repeatedly before the test of change.
- ❑ Specialized PSW took time to build rapport and demonstrated the difference expertise can make.
- ❑ Client is now well supported and showing significant improvement.



Importance of Specialized PSW

- In this context, Specialized PSW's refers to PSW's that are specially trained around mental health, addictions and behaviours
- They work in a framework of recovery, psychosocial rehab and person centredness
- They come from larger service teams also focused on this specialty which lends itself to consistency of staff and
- Through this training they have the ability to:
 - develop rapport quickly
 - adjust approach to care as needed
 - apply flexibility and creativity appropriately



Specialized Training

- Along with having their PSW Certification and the training that goes along with that these specialized PSW's receive additional training including the following:
 - Ufirst
 - Asist – Suicide Intervention training
 - Montessori Methods in Dementia Care
 - Training around Responsive Behaviours
 - Mental Health First Aid
 - Recovery/Psychosocial Rehabilitation Training
 - Gentle Persuasion Approach (GPA)
 - Non Violent Crisis Intervention



The Future

- New base funding
- Evaluation to determine next steps and the most valuable service and support
- Continue to work together to provide integrated services



Questions & Comments

