

P26 - INCREASING BEHAVIOURAL AND MENTAL HEALTH ISSUES IN LONG-TERM CARE

Timothy Cheng, Ontario Long Term Care Association.

Contact: tcheng@oltca.com

Brief Description of Research or Project: Approximately 78.6% of long-term care residents have a neurological disease (IntelliHealth, MOHLTC, 2013): 61.1% dementia, 17.7% Alzheimer's. About 39.3% suffer from a psychiatric/mood disorder: 9.3% anxiety disorder, 32.4% depression, 28.6% severe cognitive impairment. Due to their cognitive impairment, many residents have responsive behaviours: 46% have some aggression, 13.2% wander, 21.4% are verbally abusive, 14.3% are physically abusive, 16.7% are disruptive, 32.1% resist care, 20.8% have negative statements, 29.1% have repetitive questions, 30.9% have repetitive verbalizations, 36.5% have persistent anger, 13.5% self deprecation, 18.3% unrealistic fear, 22.8% insomnia, and 20.3% reduced social interaction. In particular, the prevalence of residents with some aggressive behaviour has increased 6% since 2008. An OLTCA survey found that in 2013, 65% of homes had to call the police at least once due to resident behaviour, up from 49% in 2007. The number of homes using Form 1 on residents increased from 46% in 2007 to 55% in 2013. As 70% of homes in 2013 felt that CCACs do not appreciate or understand the capacity of the home to take in residents with severe mental health or behavioural issues (an increase from 62% in 2007), there is much room for improving the appropriateness of transitions to long-term care homes. The lack of coordination in care is also evidenced by the drop in homes reporting formal agreements with hospitals, from 8% in 2007 to 1% in 2013. Understanding the mental health issues that residents face is crucial to providing safe, quality, resident-centred care for mentally challenged individuals. **Why is this research important to profile at the Research Day 2014?** These data are important to understand the changing nature of the long-term care population which requires new skills, staffing, and resources to safely handle residents with behavioural issues. Better tailored resident-centred care and sustained investment in programs such as Behavioural Supports Ontario (BSO outreach teams as well as in-house resources and specially trained staff) will enable management of responsive behaviours within the long-term care home, forestalling costly transitions to the emergency room as well as hospital admissions.