

## **EVALUATION OF BEHAVIOURAL SUPPORTS ONTARIO IN MISSISSAUGA-HALTON**

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**Brief Description of Research or Project:** BSO implementation in Mississauga-Halton was associated with a significant decline in ED transfers, likely due to enhanced capacity of staff in long-term care and community settings to identify triggers for responsive behaviours and address them. Key features of the BSO model in MHLHIN include embedded resources (vs. mobile teams), an overarching philosophy of "all behaviour has meaning", and investment in upstream resources. A team from the Schlegel-UW Research Institute for Aging, InterRAI Canada and a certified evaluation consultant conducted an objective external evaluation of the first 6 months of implementation of this program. Unique to this evaluation was the use of RAI-MDS data, not only to look at outcomes, but also to explore underlying contributing factors to responsive behaviours. This methodology can be used by other BSO programs to inform program priorities. Surveys and interviews of over 400 people were also conducted. The evaluation: described the development and implementation of the BSO initiative in Mississauga-Halton; described key stakeholders' perceptions of this model of care; identified quantitative data-based impacts; explored and underlying contributing factors to responsive behaviours with a view to informing upstream interventions; A mixed methods approach was used, using RAI-MDS data, existing data being collected by the LHIN, case studies, on-line/paper survey, and face-to-face interviews methods. All major stakeholder groups were surveyed including consumers. In total, surveys were completed by 336 individuals and interviews conducted with 91 individuals. RAI-MDS data from over 5,000 LTC residents at each of two time periods (pre-BSO and post-BSO implementation) was accessed and analyzed. **Why is this research important to profile at the Research Day 2014?** The Behavioural Supports Ontario (BSO) Program aims to improve the system of care for persons with dementia and their caregivers. It was anticipated that embedding BSO supports (PSW and RPNs) in long-term care homes would enhance staff capacity to prevent/address responsive behaviours, reduce number of responsive behaviours and reduce unnecessary transfers to hospital. It was anticipated that embedding BSO supports (Community Support Workers, Psychogeriatric Resource Consultants) in Adult Day Programs and in the community would improve patient experience, especially related to transitions across levels of care, and would help people live longer in the community. This evaluation reports on these anticipated impacts, many of which were demonstrated. This project contributes an evaluation methodology that uses RAI-MDS data to look not only at impacts of BSO, but also at contributing factors to responsive behaviours, to inform upstream intervention.

