



STAFF REPORT INFORMATION ONLY

Involvement in Research, Castleview Wychwood Towers

Date:	October 10, 2008
To:	Advisory Committee on Long-Term Care Homes and Services
From:	General Manager, Long-Term Care Homes and Services
Wards:	Ward 21
Reference Number:	

SUMMARY

The Long-Term Care Homes and Services Division has an Ethics and Research Committee that reviews and considers written requests for research studies to be carried out within the division. No research study is initiated without prior approval of the Ethics and Research Committee and the division's General Manager.

The Ethics and Research Committee has clear criteria for the consideration and approval of research proposals, including:

- a) prior ethical approval from an accredited university, teaching hospital or national granting organization;
- b) support by the senior management team at the location (i.e., home or community program) proposed for the research study;
- c) evidence that the research project will cause minimal disruption to residents, clients, families and staff;
- d) no cost to the City of Toronto;
- e) specific and individual resident consent prior to any involvement in the research project, with an opportunity to withdraw at any time;
- f) evidence of confidentiality in a manner that complies with both MFIPPA and PHIPA;
- g) execution of a research agreement that complies with the requirements of MFIPPA and PHIPA; and
- h) agreement to produce and provide a final report, with acknowledgement of the City of Toronto's contributions.

Although the division's General Manager has authority to approve non-invasive research without obtaining specific approval from City Council, the division has a commitment to report through the Advisory Committee on Long-Term Care Homes and Services,

including the presentation of a final report, summarizing the results of and lessons learned from the research study.

Involvement in research studies promotes evidence-based practice, contributes to the body of knowledge in gerontology and the advancement of long-term care and contributes to meaningful, enriched lives for residents.

In the past five (5) years, Castleview Wychwood Towers has been involved in five (5) research studies, all of which were initially reported to the Advisory Committee on Long-Term Care Homes and Services. Some but not all of these studies have had final reports submitted to the Advisory Committee on Long-Term Care Homes and Services on completion of the research. This report provides a summary of the results of all of these studies.

The research studies have contributed to the body of knowledge, improved resident care systems and led to the development of shared resources.

The home is not involved in any research projects at this time. The report provides a full report of the final results of all research studies at Castleview Wychwood Towers.

Financial Impact

There are no financial implications arising from this report.

COMMENTS

Castleview Wychwood Towers has participated in five (5) research studies over the last five years.

1. Phenotype/Genotype study in Alzheimer Disease (“Gen ADA Project”) – Dr. Fornazzari (CAMH)

Castleview Wychwood Towers participated in this research study between December 2002 and May 2003, in collaboration with the Centre for Addiction and Mental Health (CAMH). This multi-site collaborative study, coordinated by CAMH, McGill Centre for Studies in Aging, Verdun and the University Health Network researched genotype – phenotype associations in Alzheimer’s Disease. The principal investigators were Dr. L. Fornazzari, Dr. S. Gauthier, Dr. P. St. George-Hyslop and Dr. J. Wherrett.

The research studied genetic material such as DNA and cells and proteins associated with memory problems in Alzheimer’s Disease with the objective of studying the genetic basis of Alzheimer’s Disease. The knowledge gained may help persons with an increased risk for memory-related diseases, permit more rational drug development, and find new treatments that can be used earlier. In some cases, disease may be prevented.

This study was completed in March 2004 and the results of the study have been used by the multi-site collaborative in order to identify the genes associated with common forms of Alzheimer’s Disease. This would assist in providing opportunities to develop

individual therapies in Alzheimer's Disease and innovations towards preventative strategies to help combat this disorder.

2. Creating Home in the Institution: Community Development in the Context of Dementia – Dr. Maura McIntyre (U of T/OISE)

The project was conducted on the 5th floor at Castleview Wychwood Towers between June 2002 and June 2003 and a final report was submitted to the Advisory Committee on Long-Term Care Homes and Services in December 2003. This study focused on the area of human interactions between staff and the residents they provide care and service for. Highlights of the researcher's findings included, but are not limited to, observations of high quality care and interactions; the need for improved public perception of long-term care through education; "home" is a feeling created by people and this feeling is being advanced by management and staff within the home; the majority of staff contribute in unique ways by sharing the beauty of their diversity, complexity and extraordinary richness beyond role definitions; observation of success and satisfaction amongst residents and families; the opportunity to assist family members to feel more at home and an integral part of the home's community; and the opportunity support and recognize how staff feel so that they truly recognize the importance of their work and feel valued.

Dr. McIntyre presented her report to staff, residents and families in the form of a Street Theatre in the fall of 2004. Presentations of the Street Theatre also occurred at the OANHSS annual convention and at CBC as part of the 'Coffee Break' of the Alzheimer's Society of Canada in honour of World Alzheimer's Day.

Work has continued in relation to the themes identified by Dr. McIntyre, including expanded information about the City's homes (brochures, posters, presentations), how to access the City's homes, speaking engagements in the community, submissions for Public Sector Quality and CHEQA awards, enhanced Family Council education and strengthening of the Family Committee and a stronger focus on workplace wellness and Occupational Health and Safety.

In addition, the "Creating Home in the Institution: Community Development in the Context of Dementia" project raised awareness among staff as to how they are perceived by residents and family members through their body language, tone and pitch of voice.

3. Management of Diabetes for Seniors in Long-Term Care Facilities – MOHLTC Health Strategies Branch

There were thirty (30) residents with a diagnosis of diabetes in Castleview Wychwood Towers in 1996. Currently there are one hundred (100) residents in the home with a diagnosis of diabetes. Diabetes management is one key initiative being considered in provincial chronic disease management work.

In response to a recommendation from the Ministry of Health and Long-Term Care's Seniors' Diabetes Committee, the Director of Nursing and the Medical Director became

part of a group of health care providers who began strategizing to develop a broad critical path for the management of diabetes amongst seniors residing in long-term care homes. The goal was to develop a framework and critical path from which other long-term care homes could learn, model and to meet their unique needs.

Castleview Wychwood Towers was one of five project sites in Ontario that tested the proposed critical path. The long term goals were to introduce best practice guidelines for the management of seniors with Type 2 diabetes residing in long-term care homes and to reduce morbidity and mortality associated with Type 2 diabetes among seniors in long-term care homes.

Castleview Wychwood Towers was able to provide excellent feedback throughout the study resulting in clinical protocol changes, development of the care plan and education recommendations. In addition, participation in the study levered excellent discussion amongst team members regarding the management of Type 2 diabetes. The “Interpretation of Best Practice Guidelines: Manager Type 2 Diabetes in Seniors Residing in Long Term Care Facilities” was introduced by the Ministry as an outcome of this study.

Residents at Castleview Wychwood Towers achieved improved health outcomes and satisfaction; improved guidance to staff to help minimize errors, reduced variations in testing and reduced staff workload; improved disease management, reduced hospitalization and ambulance transfer and savings in associated costs and in staff time.

4. Communicative Access Improvement Project at CWT – Toronto West Heart and Stroke Steering Committee and the Aphasia Institute

The purpose of this project was to improve resident care team knowledge and competence in communicating with residents who suffer from aphasia as a result of stroke. Twelve (12) staff, from the 5th and 7th floors attended a two-day workshop at the Aphasia Institute and participated in scheduled in-home and self-directed learning regarding communicating with individuals with aphasia.

The project measured resident outcomes arising from the education provided for staff. Outcomes have been of a qualitative nature (i.e., a resident who had been aphasic for two years spoke a staff person’s name; a resident who for the last six months refused to participate in programs and activities now attends because of communication techniques adopted by the staff, etc.). In addition, the 12 staff shared their learning with the other care team members on the 5th and 7th floors.

The benefits of participating in this research study mushroomed beyond the home’s wildest expectations. Some of these benefits include: further educational materials from the Aphasia Institute at no charge to the home, including six (6) binders with pictograph resources that residents suffering from aphasia may use in communicating with different health team members. The home has photocopied some of the pictographs for expanded

resident use. In addition, the Aphasia Institute provided a half-day education workshop for a group of volunteers, at no cost.

As a result of this study, the home was asked to become a member of the Toronto West Stroke Network. Participation in this network has resulted in new linkages and resources which resulted in the development of the successful Low Tolerance Long Duration rehabilitation program in the home.

5. Dysphagia Care Team for Stroke Survivors in the Long-Term Care Setting

The funding agencies for this research project were the Ministry of Health and Long-Term Care and the Toronto West Regional Stroke Network. The project was supported by the Ontario Stroke System.

The project proposed the establishment and training of an inter-disciplinary dysphagia care team at Castleview Wychwood Towers. Dysphagia is an abnormality in swallowing physiology that occurs in 50 – 60 percent of acute stroke patients and in 40 – 52 percent of rehabilitation stroke patients. Its presence has been associated with aspiration pneumonia and malnutrition. There are one hundred and thirty (130) residents at Castleview Wychwood Towers who are stroke survivors and may be at risk of dysphagia. The proposed model was based on expert consensus and utilizes a swallowing screening tool and feeder training program based on best available evidence.

The findings of the study concluded that the educational materials were useful to staff.

The research study resulted in the provision of training materials for Castleview Wychwood Towers and copies of the Best Practice guidelines. The focus was one of education to staff in order to screen residents. The raised awareness and learnings resulted in an increase in dining, quality improvement projects in the home and assisted all units in implementing the “Live to Eat” program in the Home. In addition to the benefits realized by Castleview Wychwood Towers, the home shared lessons learned with the other long-term care homes to assist staff in feeding residents with swallowing problems in a comfortable and safe manner.

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SIGNATURE

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