

April 15, 2019 - Revised Appendix C: LTCHS Dementia Care Journey, 2004 – 2019

Model, Approach, and/or Education Program	Main Components ☑ indicates implemented in LTCHS	LTCHS Approach to Care
<b>PIECES:</b> External training provided to professional staff (RN, RPNs, SW) targeted for complex and high risk residents	☑ Assessment and care planning ☑ Complex and high risk residents with mental health disorders ☑ Holistic, person and care partner-directed approach ☑ Practical strategies for physical, intellectual, emotional, social capabilities and environment	☑ Framework is based on CARE values with care and service expectations to guide everyday work and practice <ul style="list-style-type: none"> <li>• Relationship &amp; Commitment</li> <li>• Safe &amp; Supportive Environment</li> <li>• Person-Centred Care</li> <li>• Professional Practice &amp; Approach</li> </ul> ☑ Integrates main components of the leading approaches and models of care ☑ Flexible and adaptable to resident population including residents without dementia, young adults, LGBTQ2S, culturally diverse populations ☑ Includes family members and community volunteers as partners in care  2019 Priorities include: <ul style="list-style-type: none"> <li>• Education on relationship-based care including person-centered care, emotional intelligence, communication, enhancing use of empathy, and cultural sensitivity, safety and competency</li> <li>• Training in collaborative learning to promote greater flexibility and team work</li> <li>• Leadership education and training including teambuilding, relational care and staff empowerment</li> </ul>
<b>Gentlecare:</b> In-house train-the-trainer by external consultant, implemented division-wide	☑ Adoption of a less rushed more flexible approach ☑ Support residents' abilities ☑ Provide meaningful activities ☑ Adaptive physical environment	
<b>U-FIRST:</b> In-house training provided to frontline staff	☑ Develop common knowledge (flag-interact-reflect-report-support-team) ☑ Identification of behavioural trigger ☑ Individualized support strategies	
<b>Gentle Persuasive Approaches (GPA™)</b> (an education program): Training provided, currently 6 in-house GPA coaches with others scheduled for training	☑ Relationships built on trust, respect and values ☑ Practical strategies for person-centered care, delirium, communication, interpersonal strategies, staff self-protective skills and techniques	
<b>Montessori Dementia Program:</b> Training provided to direct care and nursing management staff, including use of activities and tools	☑ Engage in meaningful activities ☑ Cognitive skills, life skills, movement, sensory, music, art and socialization ☑ Prepare safe environment for residents to life freely, purposefully fulfill potential physically, mentally, emotionally and spiritually	
<b>DementiAbility Methods:</b> In-house training provided and program components implemented	☑ All behaviour has meaning ☑ Focus on independence and support residents' abilities ☑ Provide meaningful activities and adaptive environment ☑ Consider needs interest, skills and abilities ☑ Individualized care plans ☑ Nursing rehabilitation strategies	
<b>Butterfly Household Model:</b> Managers and staff attended presentation during provincial conference, staff attended further training and others attended Dementia Care Matters conference	☐ Emotional intelligence ☑ 5 key care elements: person first; uniqueness; empathy; interactions and inclusion ☑ Stimulating home-like environment with emphasis on the person's past life ☑ Provide meaningful activities ☑ Practical strategies	

