The PRC Program of Toronto has now provided knowledge-to-practice (KTP) services to Long-Term-Care, Community Service Agencies and CCACs for fourteen years. The program’s mission is building staff capacity to care for frail seniors with dementia and other psychogeriatric challenges using a variety of formats including traditional teaching, case based consultation, behavioral support rounds, bedside coaching, team development and leadership training.

The team is guided by a balanced scorecard evaluation. The scorecard includes the domains of financial responsibility, service, customer satisfaction and innovation. From the service perspective the program’s eleven member team continues to exceed its service targets by providing training to some 27,503 staff. Stakeholder Satisfaction is surveyed each year and continues to be very positive. It was noted that 70% of stakeholders deemed their PRC as an essential member of their responsive behaviour services.

Each year we strive to introduce service innovations for staff. Over the past year the team has refined and tested its evidence informed curriculum to guide the development of ‘in-house” Behavioral Support Resource Teams, developed and tested healthy workplace and management workshop materials and in partnership with Behavioral Supports Ontario colleagues at Baycrest, developed a Volunteers training program on dementia and responsive behaviours. As well, the twelfth PRC whose role is focused on KTP needs in Primary Care continues to develop innovations which have been well received by the TC LHIN physicians and staff as noted on page 5.

The PRC Program of Toronto prides itself on preserving the educational nature of its service while remaining integrated with its clinical partners in dementia care, providing sound fiscal management, satisfying its customers and finding innovative approaches to the knowledge to practice process while remaining agile and able to respond to emerging health system’s needs.
**Innovative Learning Approaches Being Developed in Toronto Central LHIN**

*By John Thomas, PRC Baycrest*

In order to diversify teaching modalities, Toronto area PRCs are continually exploring new methods and resources to enhance knowledge-to-practice processes. The development of multi-media applications to support KTP and especially the development of video based training resources have been one element of this approach. But while these materials, including videos, remain static, the learning needs of our clients change and develop throughout their careers.

In collaboration with Baycrest’s Centre for Education and Knowledge Exchange in Aging, Toronto PRCs have been developing the capacity for dynamic simulation based training to create tailored training resources using simulation performers. This will add to the breadth of existing resources by filling in existing gaps in the current catalogue. These simulations may also contribute to the sustainability of educational initiatives.

**Update on Build a Behaviour Support Resource Team Workshop**

*By Mario Tsokas, PRC UHN - TRI and Sangita Singh, PRC TEGH*

Originally launched in 2013, the Build a Behaviour Support Resource Team workshop, developed by the PRCP Toronto has continued to gain traction in the Long-Term Care (LTC) sector and be continuously improved. Through these workshops, agencies such as long-term care homes are able to build an internal resource team to be their first line of expert problem solving capable of optimizing their skills and their use of scarce external resources in the management of responsive behaviours.

Recent offerings in the TC and C LHINs have ‘sold out’ and a poster presentation at the Ontario Long Term Care Association conference prompted many requests for training in the use of the BSRT materials. Organizations interested in participating in the workshop are invited to contact Kerri Fisher at the Regional Geriatric Program of Toronto at Sunnybrook at (416) 480-5881 or kerri.fisher@sunnybrook.ca.

**Wellness in the Toronto Central Region**

*By Charlene Marshall, PRC CAMH, Tony Schembri, PRC West Park HC and Mario Tsokas, PRC UHN - TRI*

The PRCP’s Knowledge-to-Practice Framework has four components 1) knowledge creation, 2) knowledge transfer – the mechanisms for getting material into user’s hands, 3) knowledge translation – making sure that users understand the material and 4) implementation – the issues that help or prevent users from implementing the knowledge they have gained.

In this regard we have become increasingly aware of the level of stress in the environments in which our clients work, its effect on resident care and staff morale, and its contribution to the retention of staff which is fundamental to good care. Working in healthy workplaces is a fundamental issue in the implementation of new knowledge.

To optimize the effectiveness of our KTP work we are developing and testing materials to support “Building Jobs We Want To Go To: Mindfulness at Work”. This one-day workshop and its follow-up coaching processes is designed to help staff develop an increased awareness of their perception of and response to work related stress and their capacity to build the kind of work environment that we all want to be part of.
Adriana Caggiano, PRC NYGH and Sangita Singh, PRC TEGH

Learning Transfer Group

Members of the PRC Program of Toronto have the opportunity to participate in bi-monthly learning transfer group meetings. This forum provides PRCs with the opportunity to improve the quality of their knowledge-to-practice work and collaboratively solve implementation challenges.

The learning transfer group welcomes participation of any PRC who is able to join us at our meetings convened at the NYGH seniors centre. Please call Kerri Fisher at kerri.fisher@sunnybrook.ca or Adriana Caggiano at Adriana.Caggiano@nygh.on.ca for more information.

PRCs working with Developmental Services sector

Individuals with developmental disabilities (DD) are a subgroup of older adults with complex and unique care needs. PRCs have been collaborating with organizations providing services to this population by identifying knowledge gaps and developing knowledge-to-practice processes that enhance care provision. Staff wellness sessions focused on stress management and self-care, information resources such as the ‘Aging with a Developmental Disability Transition Guide for Caregivers’ and client-specific case consultations are some of the activities in which PRCs have been involved.

In partnership with the Toronto Partnership for Aging and Developmental Disabilities (TPADD), PRCs have been working on the identification of the KTP needs of staff serving older adults with DDs and developing novel ways of addressing these needs. For example, a multi-organization survey of staff learning needs was conducted in the summer of 2015. The results of this survey are being used to develop monthly information bulletins which will be distributed to staff of TPADD agencies. This knowledge transfer process will provide a widespread community-based population of care providers with an easy and accessible way to obtain new knowledge. PRCs will continue to work collaboratively with member organizations of TPADD to identify and address the knowledge to practice needs of these organizations and their staff.

Behavioural Supports Ontario (BSO) Initiative in the Central East LHIN - Behaviours Related to Dementia Intervention Tool Kit

By Kim Kurschinski, PRC The Scarborough Hospital

In response to feedback from front line staff during one of the regular Community Of Practice and Education events in the Central East LHIN, a PRC and educator based working group from the BSO education team embarked upon a project to design and develop a user friendly, “at your fingertips” tool kit for front line to staff to use both ‘in the moment’ as well as to assist in the development of a behavioural care plan.

After reviewing numerous existing tip sheets and toolkit designs, we have developed a format that is user friendly and easily accessible. While providing some intervention ideas when behaviours occur, the tool kit prompts the user to assess the situation and approach the person with creativity, compassion as well as respecting the person with dementias uniqueness and individuality. There was emphasize placed on the difficult to manage behaviours most frequently reported by staff.

This toolkit will be available on-line, downloadable for printing and will also be packaged in laminated small book format. There are hopes to develop this tool kit into a downloadable ‘app’ format and conduct pilot tests of its effectiveness.
**Behavioural Supports Ontario (BSO) Initiative in the Mississauga-Halton LHIN**
*By Ellen MacKenzie, PRC CAMH*

It's hard to believe that another year has elapsed as our BSO educational endeavors continue to gain momentum. I work collaboratively with the Mississauga-Halton (MH) LHIN PRCs to publish a newsletter. This time it was my pleasure to highlight some of the successes the BSO project has accomplished in my Long-Term Care homes.

The annual MH LHIN workshop was held in September 2015. This year’s focus was evaluating our quality assurance projects and brainstorming goals for the coming year.

Last fall, as a member of the executive committee of PEACE (Prevention of Elder Abuse Coalition Etobicoke) I brought my KTP knowledge to the design and implementation of a daylong conference. The theme was ‘Consent, Capacity and Ethics’, topics that are often misunderstood in LTC.

Currently the PRC’s of the MH LHIN and I are planning the agenda for our annual conference to address the training needs of the BSO teams in LTC. Traditionally I’ve been responsible for organizing the speakers for this yearly conference. This year will be particularly exciting as our focus will be on ‘sexuality and ethics’, I was lucky enough to book ACE for the morning session and Chris De Bono for the afternoon session.

**Behavioural Supports Ontario (BSO) Undercover Project in Central East LHIN**
*By June D’Souza, PRC Providence Healthcare*

As BSO initiatives continue to evolve in the CE LHIN, an innovative multi-model training workshop was developed in which a LTCH management team including the Director of Care developed a ‘worst of all worlds’ caregiving scenario. The skit on how not to approach your resident, poor communication, making assumptions and lack of teamwork was then acted out by the management team before front line staff were encouraged to enthusiastically critique the ‘actors’. The dramatization was then followed by a lecturette and meditation on using relaxation techniques and coping statements to clear one’s mind.

To enhance the knowledge transfer elements of this ‘undercover project’ leading up to its delivery at the BSO revival day, a series of mysterious structured messages embedded within invitations to participants were circulated in advance of the workshop. Messages included such items as ‘how many caregivers does it take to create chaos? – Come and see our (facility name) Players and find out how to declutter our minds’.

The workshops engaged 80 participants from two homes were enormously successful and met with thunderous applause. Some of the comments from the participants are listed below.

“I think it was a strong message in the play regarding the importance of resident’s care and dignity.” F S, Activation Department

“Really enjoyed the play, managers did a real nice job role playing and it really gave me joy at the end of the day.” J K, Janitor

*BSO Undercover Project in Central East LHIN continued on page 5*
Special thanks to colleagues Lorie Sheridan Psychogeriatric Outreach Program (POP) and Celyne Wong (ADOC Extendicare Scarborough) who pioneered this model. Lorie’s husband made Oscars for the Players which were awarded based on the ratings of staff. The events included draws for a variety of prizes, many photographs were taken and delicious Oscar cookies were available for everyone.

Lorie proved an inspiring workshop leader and the events demonstrated the value of learning environments that were unexpected and fun.

Oscar Designed by the Sheridans

The PRC Primary Care Innovations in 2015
By Einat Danieli, Primary Care PRC, Mount Sinai Hospital

My role as a PRC providing Knowledge-to-Practice services in primary care in the TC LHIN was developed by Drs David Ryan & Joel Sadavoy as an element of the LHIN’s BSO innovations. The uptake of this service by primary care physicians has been super and several innovations have emerged including the following:

- **Tool development** - development of over 17 tools to support primary care management of psychogeriatric patients and their families.
- **PRC-PC website** - to centralize access to tools and information online and increase accessibility to information. The toolkit available with a simple registration at [http://www.mountsinai.on.ca/care/psych/patient-programs/geriatric-psychiatry/prc-dementia-resources-for-primary-care](http://www.mountsinai.on.ca/care/psych/patient-programs/geriatric-psychiatry/prc-dementia-resources-for-primary-care) at the PRCProgram website at [http://prcp.rgp.toronto.on.ca/](http://prcp.rgp.toronto.on.ca/)
- **Dementia in the Waiting room** – newly developed training to train primary care receptionist to better identify and respond to early signs of dementia and responsive behaviours in the waiting room.
- **An Electronic Medical Record Integrated KTP Approach to Dementia Care** – we continue to explore the integration of these resources within primary care EMRs.
- **I-SEE-U** - a new framework that guides practitioners on how to systematically identify elements of risk for distress in a caregiver and recognize the appropriate resources to meet those needs. Developed in collaboration with the High Risk Clinician at the Reitman Centre, Mount Sinai Hospital.

The PRC Primary Care Innovations in 2015 continued on page 6
The Primary Care Innovations in 2015 continued from page 5

- **Knowledge Bite** – A monthly newsfeed to share information with primary care providers regarding: tools, resources, education opportunities and case scenarios.
- **Primary care receptionists care for patients with dementia too** – a workshop for office staff.
- **Dementia Talk App** – A phone application is being developed to empower caregivers in managing responsive behaviours at home and enhancing communications between both primary care givers and family members.

**Assisting Staff in Long-Term Care Homes at Transition Points**  
*By Hazel Sebastian, PRC, St. Michael’s Hospital*

Toronto Central LHIN’s Behavioural Supports System Action Plan, December 2012 identifies the need for effective care transitions between acute care and LTC to prevent the breakdown of care processes. There is heightened awareness and recognition of the need for planned interventions to support transitional care between acute care, LTCH and other settings.

Long-term care residents sometimes need acute care services and the transitions to and from EDs and hospitals can become complex. In the past year and a half, staff from the Toronto CCAC placement office, LTCH and acute care has reached out to PRCs to provide KTP support in order to optimize seamless transitions. The following are some examples of the issues that are identified through this work:

- How can we more effectively communicate issues related to substance misuse, suicide risk, anxiety, depression and other complex mental health?
- How can we optimize transition management when behavioral challenges are evident?
- How can we make sure that we are all using the same language when talking about dementia and its complications?
- How can we transfer a successful intervention from specialist units to LTCHs and help acute care understand what works when a LTCH resident is transferred for acute medical needs?
- How can we share recommendations that can work in our unique environments?
- How can we make better use of PRCs, Nurse Led Outreach Teams and Geriatric Emergency Management Nurses in the transition process?

A well-managed transition enhances care, improves inter-organizational communications, and satisfies both families and staff. PRCs can help everyone to achieve effective, low stress and high quality transitions.
To access PRCP of Toronto Knowledge to Practice Services - Here is Who to Call

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