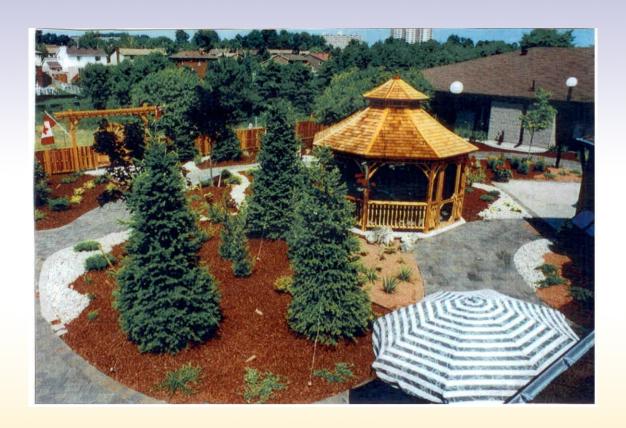
# Partnerships and Creative Options Aging and Developmental Disabilities



#### Coleman Care Centre



Partnership to Support Individuals Living in a Long Term Care Home

# Learning Objectives

- To identify the elements of a shared staffing model within a Long-Term Care home
- To increase awareness of how this type of partnership can evolve
- To gain information about how to sustain shared staffing models over time

#### History

- Coleman Care Centre built in 1981 the company consolidated a number of different homes in the area
- Quite a few of these homes had individuals with developmental disabilities living in them
- There were 72 people with a developmental disability living at Coleman Care Centre in 1984 with 17 full time DS (Developmental Services) positions (through the Tri-Ministry Project)

# History Continued

- Parallel system at the beginning with staffing from DS (Developmental Services) and LTC (Long-Term Care) separate
- Commitment for individuals to then move them into the community
  - 19 moved into the community
  - 31 deceased
  - Currently 4 under 55 yrs that could be placed in the community –
     on waiting list

#### History

- In 1986 clients started going to Simcoe Community Services day program
- Doors closed between sections (LTC Seniors home area and Developmental Disability home area)
- Had to promise seniors there would be no integration
- DS staff provided all care and support

- All activities of daily living moved back to the LTC home staff in 1998
- DS staff followed Coleman Care Centres' policies and procedures and standards required by the MOH-LTC (Ministry of Health and Long Term Care) such as:
  - Infection control
  - Fire
  - Lifts and transfers
- Most home programming is now done with the LTC staff due to changing needs and age
- Part of the accreditation team

- DS staff involved:
  - in any LTC home internal and external training opportunities – LTC staff attend Simcoe Community Services internal training sessions.
  - In staff recognition events, social events
  - There has been a joint social committee and DS representation on Coleman's Joint Health and Safety Committee

- DS staff involved:
  - Involved in Coleman Care Centre strategic planning, general staff meetings and interdisciplinary resident team meetings
  - Offered opportunities to increase education
    - Support PSWs (Personal Support Workers) to bridge through the DS sector by attending Georgian's DSW (Developmental Services Worker) program (Coleman provides placements)
    - Support the DSWs to bridge through the LTC sector such as the Activator/Recreation program position

- 2 DS staff, 5 days a week, ½ day for 15 clients
- Staff complement each other, work together, collaborate
- DS staff read report every day coming on to shift
- DS staff chart in the residents chart, directly into the computer with their code

# New Experience

- The original model of support has changed a great deal over time and the history of how it began was unique for that time
- However, this shared model of support is what is occurring now as DS agencies are supporting individuals transitioning into LTC homes as they age

#### Success

- Interdisciplinary teams
- Involvement in education skills
- DS staff involved in care conferences
  - Giving input into multi-team meetings
- The DS staff learned to follow and enhance the care plan
- On a quarterly basis, DS staff provides updates for the Resident Care Plan and also complete part of the Annual Reports provided to the DDA (Developmentally Disabled Adults) families

#### Suggestions

- The two populations are not that different
  - Need support systems
- Dealing with outside perceptions:
  - let people know up front that the home has a mixed population and if they are not comfortable with this they will not be admitted
  - This is important to bring forward directly during a tour of the home

# Suggestions

- Behavioural issues
  - Need to access services and supports
- Compatibility with room mates
  - Look at individuals seniors and individuals with developmental disabilities
- Education sessions
- Need a cohort to provide a cluster of supports

# Suggestions re: Aging DS Population

- Need to be objective DS will want to hold on to them
- Small proportion of individuals with DS will need LTC
- Need to plan for individuals look at their best interest
- DS Staff may feel inadequate, feel that they need and want to help it is important for the staff to acknowledge like everyone else, that someone they care about may need to be cared for within a LTC home

#### Suggestions

- Very important for the DS provider to remain involved
- Transition process is very important:
  - regular visits by staff and also visits back to their previous home
  - plan of care attended by staff
  - phone calls back and forth from the DS staff to the individual as well as to the LTC staff to check on how they are doing
- Cooperation is key!
  - Important to ask for input

#### Other

- Hired DS staff for part time staff at Coleman Care
- Staff at Coleman have been hired at Simcoe Community Services
- Staff have become fully integrated

#### Cross Sector Learning

- Relaxalon
- Interweaving of specialties
  - Sharing what you are good at
  - For example:
    - Nursing staff have learned behavioural approaches which benefit all residents, or looking at equipment that is used by the other sector and seeing the benefit for others
    - DS staff have learned how to assist in caring for a resident on Palliative Care
- Communication is key
  - Speak a different language
  - Easy to offend, need to have openness to learn from each other
  - Openness to different ideas, approaches

# Cross Sector Learning

- Programming ideas
- Equipment
- Mutual Respect
- In the past there may have been many judgements made about residents by both groups of staff not helpful, not beneficial for the care of the individual
  - Learning from each other helped to move from judgement to understanding to working together

#### Challenges

- Person centred plan provides more individualized programs
- Staff more cooperative
- Past separated the two groups, didn't have as much interaction and working together – the new model shows how inclusion has occurred within a LTC home

#### Challenges

- Joint education is needed we need to continually learn from each other
- Need to develop coordinated processes to help facilitate people to move to appropriate settings if they moved to a LTC home due to alternative reasons
  - E.g. elderly care giver can no longer provide support to their son or daughter
  - how to ensure that the access mechanisms in DS include LTC homes for those considered for priority supports within the DS sector.

#### Thank-You!

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