



Appropriate Use of Antipsychotics (AUA)

AUA and Sleep

How do you feel after a poor night's sleep? Irritable, negative, foggy? Persons with dementia often sleep poorly, this is worsened by:

- * Night time noise, light and facility routines
- * Day time napping and inactivity, dim lighting and early bed times
- * Antipsychotics, sleeping pills and other medications

22 AUA workshops on Sleep and Responsive Behaviours have been offered to Long Term Care (LTC) sites across Alberta. Strategies are presented to improve sleep without the use of medicine. For more information, resources and a 45 minute webinar, see [AUA Toolkit](#), Sleep and Responsive Behaviours section.

Alberta has the lowest LTC antipsychotic use in Canada: 19.8% and falling!

Alberta LTC teams diligently:

- * Review antipsychotics used as chemical/ pharmacologic restraints monthly
- * Look for reasons for responsive behaviours such as pain
- * Work with families to develop person-centred approaches
- * Provide education for families and staff

Many residents are more awake and have regained abilities to talk and care for themselves! Staff are enjoying the residents, and find them easier to care for. Families are pleased with the outcomes.

There are appropriate uses for antipsychotics in dementia such as short term use in physical aggression while looking for underlying causes. Quality of life may also be improved on a low dose antipsychotic when residents are distressed by chronic mental health conditions, hallucinations and delusions (e.g. from delirium).

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*“At this stage we didn’t think Mom could improve this much!”
Family from Sagewood AgeCare*

What’s New with AUA?

- **Next AUA workshop series** is Feb/Mar 2016. Topic recommendations from LTC teams attending the fall workshops included pain, delirium, polypharmacy and physical restraints. Stay tuned!
- **Looking for a place to bring your tough questions?** The AUA team is trialing noon-hour “Curbside Consultations”. See page 3.



BUTTERFLY MOMENTS

It only takes a moment to change someone's day:

A kind word, a hug, a song, a photo, an interesting object from your pocket, a smile, a dance, asking for assistance to move chairs, or to fold baby laundry

Moments of joy and meaningful activities can make all the difference in someone's day. How wonderful to feel connected and to be useful!

Father Lacombe Care Centre had a very depressed resident. They bought infant clothes at the Goodwill and asked the resident to fold them for a mom who would pick them up on her way home from work. She folded them so neatly and

carefully, and talked about the sweet little outfits with staff. So many beautiful memories are connected to babies and baby clothes.

Solitary or 1:1 activities are often less stressful for persons with dementia. Recreation therapists (RecT) are working to provide more activity ideas and options. Not all sites/shifts have RecTs, so it's crucial to have items and ideas to enhance family visits and staff-resident interactions. Here are a few ideas from Alberta LTCs:

- ◆ **Allen Grey Continuing Care** uses "fiddle" blankets with familiar objects attached e.g. measuring cups, wooden spoon and spatula for a homemaker.
- ◆ **CapitalCare Lynnwood** has rummaging drawers: suggested items include purses, jewelry, men's ties, handkerchiefs, combs and socks

See the AUA Toolkit, Person-centred Care section for more ideas and stay tuned for new resources!

Is AUA in your ACE?

High River Continuing Care included the AUA learning modules in their Annual Continuing Education for this year. "Staff love the e-learning modules!"

They can be found on MyLearningLink or in the AUA Toolkit under Dementia Education Resources. These run best with Google Chrome, Firefox or Internet Explorer 11 or higher.

Dementia Advice

Available through Health Link



A new Dementia Advice service launched September 28, providing telephone-based support for persons with dementia, and their families and friends. **Currently available in North, Central, and South Zones**, the service operates from noon until 8:15 pm 7 days per week. In Spring 2016, the service will expand to Edmonton and Calgary.

Dementia Advice is accessed through 811, the Health Link number. Health Link nurses conduct a brief assessment, provide recommendations and arrange follow-up with a Dementia Advice nurse, who listens, supports and facilitates connections to other resources. Examples of recent calls:

- ◆ A physician called from a rural ER. He had investigated a potential delirium and wanted to connect the family to further resources.
- ◆ Daughters called regarding their mother, recently diagnosed with dementia, looking for resources as they support her to live at home.

More information and promotional materials on [Dementia Advice](#) can be found on the AHS external website.

Ahead of the Curve: AgeCare Beverly Glenmore

- * Two residents share music on an I-pod as the aroma of fresh buns wafts through the air
- * A woman holds the hand of her roommate, their language barrier bridged by friendship
- * A woman with dementia pushes the wheelchair of a young resident she's befriended
- * A once withdrawn resident comes alive as favourite tunes play on her headphones.



This is an ordinary day at Beverly Glenmore in Calgary. Two years after their introduction to the AUA project, all 220 beds are involved and only 9.5% of residents are on antipsychotics. Families touring the facility hear about efforts to minimize antipsychotic use, and about staff passion for person-centred care.

Beverly Glenmore integrates a variety of approaches into the care they provide:

- ⇒ They're the only registered Eden Alternative site in Alberta—a community where residents feel at home and are involved as partners in their daily decisions of care
- ⇒ Adjustments in the special care neighbourhood have been made: bathrooms are labeled, the kitchen looks more homey, staff don't wear uniforms, and care aides are encouraged to use spare moments to create enjoyable experiences for residents such as going outside to feed the birds
- ⇒ Student HCAs have set up personalized playlists for residents (see [Music and Memory](#), and the Alive Inside movie trailer for more information)
- ⇒ Storybooks delight residents: a woman from Norway cries, "Mama, mama". She quiets when she sees pictures of familiar foods, scenes and people.

Sleep Enhancement for Residents

Tuesdays are long and rewarding days for Director of Care Carol Henckel who returns after supper to chat with staff from evenings and nights. Carol uses this time to understand the needs and challenges of each shift and to provide in-services on topics such as Supportive Pathways and Sleep.

1. **Sleep interruptions are tough on residents.** Chronically sleep-deprived people are crankier, nap much of the day, and have poor quality of life. Fewer residents are now interrupted for routine repositioning at night; person-centred strategies are in place for those at risk for skin breakdown.
2. **Too much light at night interferes with sleep.** Smaller flashlights were purchased; under-bed LED motion-activated night lights are being investigated.
3. **Older adults still average about 8 hours per night.** Evening staff are encouraged to keep residents up later so they can sleep during the night.
4. **People with dementia often wake up at night.** Staff made a list of things to try including offering sandwiches, hot blankets and music.

Supporting sleep is a 24 hour job so day staff and families received education as well. As with many LTC sites, it has been important to rethink the meaning of residents waking up wet. Instead of assuming someone didn't do their job, it can indicate night staff facilitated a great sleep, and the resident was well-hydrated during the day and evening!

Curbside Consultation

Have you "tried everything" for a responsive behaviour—and the solution still eludes you?

The AUA team hosted a noon-hour Curbside Consultation November 18 to explore a case study about a resident who wanders into unsafe situations.

Many creative solutions were offered by LTC teams from across Alberta, including:

- Door disguises
- Deprescribing
- "Black holes" (duct tape, tiles or mats)
- Stop signs, pilons, velcro strips, door locks
- A change of position
- Pain control

Would you appreciate input on a responsive behaviour at a future curbside consultation?

Contact us: aua@ahs.ca



Seniors Health Strategic Clinical Network: Meet the People!

The AUA provincial project is led by the Seniors Health Strategic Clinical Network (SH SCN) in collaboration with the Addiction & Mental Health SCN.

SCNs bring together people from across Alberta who are passionate and knowledgeable about specific areas of health, to find ways to improve care.

Changes to the AUA team: We wish Vanja Jovic all the best in her new role on the

RAI Edmonton zone team! We welcome Michele Ray-Jones, our newest AUA Practice Lead.

Michele has worked in Victoria and Yellowknife LTCs in a variety of roles from staff nurse to Director of Care.

Michele brings a wealth of experience and a passion for excellence in dementia care. She currently coordinates an exciting pilot with nine Supportive Living sites from across Alberta!

Brilliant Solutions in Person-Centred Care

We always begin our workshops with stories—the successes and challenges of working with persons with dementia. Here are a few of the inspiring stories the AUA project team heard this fall:

Walden Heights—AgeCare had a resident who knocked on every door at the end of each evening. It turned out she was a retired nurse. She now “rounds” on evenings, and waits outside the room while the HCA checks each resident. With her last round complete, she can relax and go to bed!

Bow View Manor—The Brenda Strafford Foundation had a new admission who pushed her walker into others. The care manager learned she was a Holocaust survivor who believed she was in a concentration camp. Reassurance and support helped her feel safe.

Bethany Care Centre set up a retired silversmith with safe metal-working tools—he kept bending forks. They also offered to pay for unbent forks. Now he happily does his work!

Stoney Plain Care Centre—Good Samaritan Society involves a former Canada Post supervisor in sorting “mail”, which greatly eases her stress!

St. Josephs—Covenant Health finds residents are often hungry.

Citadel Care Centre—Qualicare discovered regular toileting helps a lot. **Innisfail Health Centre—AHS** discovered the impact of noise during a 48 hour power outage, which disabled TVs and computers. During this time there was not one report of resident aggression. Staff had more time to interact with residents and solve issues. The Director came around frequently to see if more staff was needed but the opposite happened!

Extencare Leduc had a resident with a chronic mental health diagnosis whose medications had been discontinued at some point as she transitioned from one facility to another. She became the “darling of the unit” once restarted on her anti-depressant and a low dose antipsychotic!

CapitalCare Dickinsfield has a photo gallery lining the walls of their dementia care unit. Each resident has been artfully photographed by their unit clerk, with props depicting careers and interests: an old manual typewriter and stylish hat for a fashion-conscious secretary, a rotary phone and fedora for a business man, a hard-hat for a pipefitter... short captions give a glimpse of history and personality. Beautiful!

Keep up the great work Alberta LTC Teams!

