Community Needs Driven Research Network

CNDRN

Mental health related issues

Mental health related issues, and how to deal with them, were the highest priority item identified by front-line workers. These issues included:

1. Dealing with challenging/responsive behaviours
2. Care of non-dementia clients
3. Client Mix

This fact sheet will talk about Challenging/Responsive Behaviours. See Fact Sheet 01.2 for the other issues.

Challenging/Responsive Behaviors

Front-line workers told us that there is a need for more research and more education of staff in terms of:

i) management of challenging/responsive behaviours,

ii) lack of strategies for adequate caregiving of people with challenging/responsive behaviours, and

iii) poor community education and knowledge that results in stigma of people with challenging/responsive behaviours.

Front-line workers also told us of the relationship between challenging/responsive behaviours and other contextual factors such as: i) continuous moving of the client between facilities; ii) lack of rehabilitation and recreation activities; and iii) language barriers with staff.

These factors may cause the client/resident to become anxious and be "labeled as having challenging/responsive behaviours" but perhaps what is required, is a different approach to care. These factors also impact care and the navigation of these clients throughout the system. Front-line workers raised needs such as:

i) how to develop a care plan;

ii) what strategies can be used to manage challenging/responsive behaviours; and

iii) what is the most adequate assessment that can reliably and consistently reflect their functioning..

What Front-line Workers said

- "The staff haven't got the training in mental health so they don't know how to recognize signs that maybe they are becoming acute again and maybe they need to have admission to acute psychiatry or how to manage these behaviours."

- "The staff are having to make pretty complicated decisions around what to do when they run into situations in the home and they don't have any immediate backup. It's not like they can run down the hall and say, "What do I do now with this person who's acting out?""

- "We have what we label "behaviours" because we haven't engaged them in anything meaningful, so care delivery tells me is a very passive "I do to you" already in the label, as opposed to a relationship with this client, with their family."

What are we doing about the issue?

In November 2012 ICCER co-hosted a one-day symposium to identify and discuss issues related to the provision of health care services across Alberta for individuals, their families, and their caregivers, who live and cope with responsive behaviours associated with dementia, mental illness, addictions, brain injury, developmental disabilities, and other neurological conditions. The symposium was aimed at developing an action plan (involving clinical practice, education, and research) to address this challenge across the continuum of care—from acute through to continuing care.

As a result of the great interest from providers at the symposium, ICCER has provided seed funding to a researcher at the University of Alberta to conduct a secondary analysis of data collected at the symposium, and to further develop Behavioural Supports Alberta.

What is Behavioural Supports Alberta?

Behavioural Supports Alberta (BSA) is a newly forming provincial network of service providers, caregivers, policy and decision makers, researchers, and academics interested in supporting those exhibiting challenging/responsive behaviours (due to mental health conditions, addictions, cognitive impairment, developmental disabilities, brain injury and other neurological conditions), as well as those who support or offer care to them.

For more information go to the BSA website at http://www.bsa.ualberta.ca/