



**BC PATIENT SAFETY
& QUALITY COUNCIL**
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Clear

Improving care for seniors living
with dementia in long-term care

Driver Diagram Addendum

High Impact Changes

PRIMARY DRIVERS

HIGH IMPACT CHANGE IDEAS

1 Appropriate antipsychotic use in residential care

- » Use antipsychotic medications only when appropriate and following recurrent assessment
- » Enhance interprofessional medication review processes; specifically, review antipsychotic medications more frequently*

2 Best practice management for residents with BPSD

- » Introduce BPSD Algorithm as the basis for BPSD recognition and assessment using case studies, quizzes, etc. to make the Algorithm accessible
- » Trial and review non-pharmacological strategies before considering antipsychotic medications
- » Enable a change in staff responsibilities to address resident needs 24/7 e.g. sit with residents and talk, play cards, more staff at the end of the day, during "sun-downing"
- » Deliver enhanced education about dementia and BPSD for all staff/residents/families/caregivers*
- » Work with family/caregivers and care team to plan person-centred responses to BPSD during care delivery, and document during care plan

3 Enhance teamwork and communication in workplace and workflow

- » Implement focused team huddles on units*
- » Support an environment of respectful communication, teamwork and learning (e.g. use Culture Toolbox*)
- » Identify local champions to support staff during challenging care situations
- » Debrief with staff following incidents resulting in harm associated with BPSD
- » Have leaders spend time with direct care staff, residents and families/caregivers to hear about issues and concerns on the unit/village/home*

4 Resident care planning for quality of life and safety

- » Track, communicate and follow up on observations from all levels of staff and family/caregivers
- » Develop interprofessional resident care planning sessions
- » Implement behaviour tracking for a residents exhibiting BPSD
- » Involve family/caregivers in all of the above (e.g. resident behaviour tracking, interprofessional care planning and care reviews*)

*These changes may be considered an "enabler" for other change ideas