WELCOME

Reawakening the Connection: Technology and Person-Centered Care
Person-Centered Care

- A philosophy that focuses on the person as an individual, rather than focusing on their illness or on abilities they may have lost.
Activation Time

- 13% of available activation time is used
- 6 hours / day available for activation

- Number of hours awake minus ADL’s, eating, personal hygiene
- Hours per day for sleep : 12
- Hours per day for meals : 3
- Hours per day for ADL’s: 3
- Bath & Hair : 2 hours per/ week
Boomerang Life – Content Development

• Boomerang LIFE was designed to enhance person-centered care with limited resources.
  • Limited funding for psycho-social needs.
  • Lack of human resources and training.
  • Isolation and depression.
  • Lack of time.
Links

- https://www.youtube.com/channel/UCeOhrTOIPghwWPp37mgOZgQ
- Boomerang Youtube
Boomerang LIFE

• Specifically designed to intellectually engage seniors with Alzheimer’s and dementia.
• Can be used with or without supervision.
• Can be used as a tool to re-direct reactive behaviors.
QUALITY ENGAGEMENT

CHALLENGING BEHAVIOURS

ACTIVATION
Boomerang LIFE Tools: The Journey Cards

- Large, easy-to-hold cards with a stunning image on one side and related information on the other side.
  - Stimulate discussion and reminiscing.
  - Encourage sharing and reading between residents
Boomerang LIFE Tools: The Trivia Series

- Uses a combination of sound and pictures with cues for dialogue.
- Exercises the memory stores in the mind.
- Promotes evocative and enjoyable conversation.
A variety of visually rich images paired with peaceful music will take the users on a nostalgic journey
• Stimulate the mind
• Promote memory recall
The Facts about Depression

• Depression effects over 15% of seniors over the age of 65. ¹
• Depression exacerbates the effects of dementia and isolates seniors. ²
• By keeping seniors involved and engaged, we can reduce depression and the reactive behaviours that come with it. ²

¹ Geriatric Mental Health Foundation. Late Life Depression : A Fact Sheet. http://www.gmhfonline.org/gmhf/consumer/factsheets/depression_factsheet.html

Decreasing Reactive Behaviours

1. Assess resident's abilities and needs
   • Baseline their agitation levels and times
   • Identify limitations for programs

2. Find the essence of the person
   • Assess cognitive and physical abilities
   • Assess communication and social skills
   • Assess psycho-social needs and personality

3. Choose a program that works with the resident.
   • Adapt program to their changing needs
   • Observe their response to the program
Medication USE

1. 51% of residents in BC Care Facilities are taking nine or more different medications.
2. Adverse Effects: older people more susceptible to the effects of drugs (stays in blood longer and may reach higher concentrations).
3. The BC RAI data shows that only 4% of seniors in a residential care facility have a diagnosis of a psychiatric disorder, yet 34% of this client group are prescribed antipsychotic medication, AND ARE PROBABLY A TOOL TO TREAT BEHAVIOUR ISSUES RELATED TO COGNITIVE OR MOOD DISORDERS RATHER THAN ACTUAL PSYCHOTIC DISORDERS.
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- Office of the Seniors Advocate Report #3 April 2015
Ellen Munroe:
An 89 year old woman diagnosed with dementia, depression, and anxiety.

**Challenge**
At certain points in the day, typically during shift change, Ellen becomes extremely anxious, often calling out and becoming verbally aggressive towards people.

**Solution**
With a combined intervention of Boomerang LIFE DVDs and the use of the internet in the Media Room, Ellen had:
• 11/11 successful Media Room interactions.
• 100% of her interactions resulted in decreasing challenging behaviours and left Ellen with a feeling of positivity.
Case Study

Daisy Goffman:
An 83 year old woman with dementia and depression.

Challenge
Daisy is very passive and does not look engaged with regular activities. At times she will become very emotional and repeat “No, no, no”.

Solution
Using Boomerang LIFE’s Babies Scenic Journey, staff and volunteers are able to engage her and make her smile.
• 6/6 interactions with the Babies Scenic Journey engaged her and decreased the challenging behaviours.
Evidence-Based Results

- Increase in person-centered care.
- Decrease in reactive behaviours.

What did the Care Takers say?

100%

- Felt seniors were engaged.
- Felt it connected them with the seniors.

What did the Seniors say?

100%

- Enjoyed using Boomerang LIFE
- Agreed it stimulated their mind.
Increasing Activation and Engagement

- 1:1 sessions with residents
  - Run with either staff, volunteers, or family members
- Group sessions.
  - Supervised groups
  - Semi-supervised groups.
- Great in place of regular TV or Movies.

- Using group sessions of Boomerang LIFE, we add an average of 105 interactions each month.
• We had 25 1:1 sessions with residents during our testing session.
During the program, families, staff, and volunteers observed the level of reactive behaviour. The noted if the behaviour level stayed the same, decreased, or stopped completely. We had a total of 27 responses.
Behaviour After Programing

• After the program finished, families, staff, and volunteers observed the level of reactive behaviour.
• The noted if the behaviour level stayed the same, decreased, or stopped completely.
What do the users say?

- 96% of respondents agreed that the technology engaged the residents.
- 100% of respondents agreed the program was easy to use.
- 100% of respondents agreed they would use this program again.

*One user found the product increased the reactive behaviour, but still agreed Boomerang LIFE flashcards were easy to use and would use it again.*
Which program do you use?

- Flashcards: 44%
- Boomerang LIFE Video: 37%
- Internet: 19%
Reactive Behaviour Coping Tools

- Find out what your residents like – explore person-centered care with the options listed.
- Discover new coping tools and list them down for future use.
Our Media Room

• Fraserview’s Media Room:

• Smart TV with Apple TV
• iPad and other tablets
• Touchscreen computers
• Portable media station
Our Media Room

- Sample shots
- Ilene & Jane Mighton – SKYPE / FACETIME
Week One: Benchmarking

- Benchmarking is a great way to start the foundation of person-centered care.
- The form provided will allow you to track and identify patterns in reactive behaviours.
  - Ex. Person becomes very agitated during shift change.
- Customize the form for behaviours that are specific to your resident.
Week Two & Three: Implementation

• Use the coping tools discussed at the beginning of the package.

• Choose a few times where you noticed the most behaviour occur.
  • Try using a coping tool 30 minutes before these behaviours.

• Each time you try a new coping tool with your resident, fill out the Media/Boomerang LIFE Implementation Form.
  • Helps you keep track of what worked best.

• Use the Coping Tool Log as a quick way to see who has worked with the resident and what tools worked best.
  • Keep it in mind for future use!
Week Four: Review and Plan

• What time did you notice the most reactive behaviours occur?
  • Was it better to intervene before, during, or after?
• What tools did your resident like the best?
• Use the Summary of Results form as a one page summary of the package.
  • Lets you know what time to intervene as well as what the best tools are.
Intellicare
A MIND BODY APPROACH TO ALZHEIMER'S

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@Boomerang_LIFE
Intellicare Group
ARE YOU READY?

Press play and change their lives.