



BeST* Care for Dementia Behaviours

* Behavioral Support Team

WHAT ... did we hear ?

Nursing staff refer to Psychiatric Services without first discussing with the us [GP]. This can create resentment as there is much we could do to help manage the patient

Wait times depend on what is happening in the community which tend to be prioritized over facility referrals.

Historically the MRP has not been available so our default response was to refer patients. The quickest response in a pressurized system is to refer or prescribe...



...[referral] wait times are too long

The process is disjointed... there are differences in assessment approaches

When we visit the facility, the LPN on duty may not be aware of the details, and charting may not be available

HOW ... will we improve ?



Standardize pre-referral assessment to improve in-house care of patient with behavioural and psychological symptoms of dementia (BPSD) and ensure referral documentation is complete.



Develop a behavioural management team approach to managing and assessing dementia patients by creating and training behavioural support teams at Nanaimo Residential Facilities

Improve processes between facilities and Health Authority to ensure referrals are appropriate and prioritized, and post referral reporting and monitoring is completed.



Build a culture with Family Physicians and facility staff of holistic, person-centred behavioural approaches to care of patients with Dementia.



WHO ... will do this ?

