

BSS Practice Area	Behavioural Statements	Regulated Staff	Unregulated Staff
<b>Core Clinical Practice Knowledge</b> Demonstrates fundamental understanding of physiological and biopsychosocial mechanisms related to cognitive impairment and responsive behaviours.	a) Apply knowledge of the clinical, socio-behavioural, and fundamental biomedical sciences relevant to geriatric clinical practice based on scope of practice, including but not limited to: <ol style="list-style-type: none"> <li>i. Normal aging</li> <li>ii. Falls and mobility</li> <li>iii. Cognitive function</li> <li>iv. Dementias including behavioral and psychological symptoms (BPSD)</li> <li>v. Delirium</li> <li>vi. Mood disorders and other psychiatric manifestations</li> <li>vii. Pain management</li> <li>viii. Nutrition/Malnutrition</li> <li>ix. Bowel and bladder management</li> <li>x. Least Restraint</li> </ol>	x	x
	b) Demonstrate skill in working with older adults with significant functional deficits and communication challenges (e.g. cognitive impairment, sensory impairment, behavioral problems or ethno-cultural pluralities).	x	x
	c) Demonstrate knowledge of medications management, including but not limited to: <ol style="list-style-type: none"> <li>i. Complete a detailed Best Possible Medication History and perform medication reconciliation.</li> <li>ii. Promote adherence to a prescribed drug regimen</li> <li>iii. Identify potentially inappropriate medications for an elderly client</li> <li>iv. Recognize polypharmacy</li> </ol>	x	
<b>Screening, Assessment, and Risk Identification</b> Gather patient medical and social history and clinical data in sufficient depth to inform care planning and effective clinical decision making.	a) Conduct and/or contribute to an assessment within the identified domains of a comprehensive behavioural assessment using clinical acumen in conjunction with standardized, valid, reliable instruments as appropriate.	conduct	contribute
	b) Recognize important clinical indicators to promote client safety (e.g. signs and symptoms, laboratory tests, adverse effects).	x	
	c) Compile a history, drawing from reliable sources, that is relevant, clear, concise and accurate to context and preferences for the purposes of prevention and health promotion, problem identification, treatment and/or management.	x	x
	d) Gather information about a client's beliefs, concerns, expectations and illness experience.	x	x

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	e) Collect a collateral history; supporting details from a close source who knows the client's daily routines and function accurately (e.g. family member or caregiver).	x	x
	f) Recognized the significance of behavioural observations in dementia care.	x	x
	g) Assess an older person for their capacity to consent to treatment and make personal decision	x	
	h) Recognize and identify risk factors for and assess the presence of abuse/neglect (i.e. financial, physical, emotional, sexual).	x	x
	i) Perform and interpret an environmental safety screen.	x	
	j) Identify and assess caregiver burden.	x	x
<b>Analysis and Interpretation</b> Conduct accurate analysis of assessment findings and clinical information to develop a complete understanding of the patient's story. Integrate assessment findings, within and across domains to formulate a cohesive clinical impression.	a) Synthesize relevant information from multiple sources including perspectives of clients and families, colleagues, and other professionals.	x	
	b) Analyze and interpret results against age-appropriate and client-specific norms.	x	
	c) Analyze and take appropriate action related to important clinical indicators (e.g., signs and symptoms, laboratory tests, adverse effects) to promote patient safety.	x	
	d) Demonstrate the ability to deal effectively and efficiently with clinical complexity by prioritizing problems within scope of practice.	x	
<b>Care Planning and Intervention</b>	a) Apply best practice evidence and clinical assessment/observations to identify (or flag) factors that contribute to expressed behaviours and translate that knowledge into a preventative approach.	x	x

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<p>Demonstrate expertise in treatment, education, goal setting, future and advanced planning. With patients and their identified support network, formulate comprehensive, collaborative care plans focused on optimization of function and quality of life. Demonstrate knowledge of community resources and appropriate referral sources and mechanisms to access them. Conduct iterative and ongoing review and revision of the care plan and adjust interventions and modify goals as needed.</p>	b) Identify the role of the BSS Team in providing service for the individual.	x	x
	c) Use information from initial behavioural assessment to inform and create an individualized behaviour care plan. <ul style="list-style-type: none"> <li>i. Engage clients, families, and relevant health professionals in shared decision-making to develop a plan of care.</li> <li>ii. Evaluate the level of engagement and capabilities of caregiver(s) to meet the needs of the client.</li> <li>iii. Include interventions to alleviate caregiver burden.</li> <li>iv. Negotiate and construct timely care plans reflecting a client's goals, beliefs, concerns and expectations in the context of their health trajectory.</li> </ul>	x	inform
	d) Collaborate with caregiver(s) both formal and informal to implement care plan. Inclusive of: <ul style="list-style-type: none"> <li>i. Inform and share care plan with caregiver(s)</li> <li>ii. Assist in the alignment of care plan to internal agency processes where applicable.</li> <li>iii. Facilitate the enactment of interventions through coaching, mentoring and/or demonstration.</li> <li>iv. Check for caregiver(s) understanding, ability and willingness to follow through with recommended interventions within recommended time frames.</li> </ul>	x	x
	e) Mediate situations of conflict between older adults and their family members in relation to care planning.	x	x
	f) Conduct and/or contribute to follow-up visit(s) to evaluate the therapeutic effectiveness of care plans. Continue to refine interventions based on client response and goal attainment.	conduct	contribute
	g) Assess acceptance, tolerance, safety, and adherence to the care plan.	x	x
	h) Communicate the following information to the client/SDM, caregiver(s) and receiving providers prior to any transition: (HQO Standard) <ul style="list-style-type: none"> <li>i. Approaches to care.</li> <li>ii. Updated care plan.</li> <li>iii. Treatment history, including treatment options that have failed.</li> <li>iv. Potential triggers for behavioural symptoms.</li> <li>v. Contact information for discharging and receiving providers.</li> </ul>	x	

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	i) Identify and appropriately discharge clients whose BSS service goals have been met.	x	
<b>Interprofessional Practice</b> Demonstrate and support interprofessional geriatric practice. Recognize and engage in inter-organizational collaboration through understanding of the roles of internal and external team members, and demonstrate the ability to identify appropriate opportunities to refer to collaborating teams/individuals.	a) Demonstrate both knowledge of critical concepts and the skills needed for the effective functioning in multidisciplinary/interprofessional clinical teams	x	x
	b) Identify and describe the training, role and expertise of members of the interprofessional team in the care of clients.	x	x
	c) Demonstrated insight into limits of own expertise.	x	x
	d) Demonstrate the skills needed to address potential differences and misunderstandings between professionals.	x	x
	e) Regularly reflect on dynamics and productivity of self and interprofessional team.	x	x
	f) Cooperate with and show respect for all members of the interprofessional team by: <ul style="list-style-type: none"> <li>i) Making expertise available to others.</li> <li>ii) Sharing relevant information.</li> <li>iii) Contributing to identification of shared areas of concern and strategies and priorities of client care to address those concerns.</li> </ul>	x	x
	g) Participate in defining team goals and objectives.	x	x
	h) Effectively collaborate with others, including primary health care providers and other partners: <ul style="list-style-type: none"> <li>i. To provide quality care.</li> <li>ii. In research, education, program review or administrative responsibilities.</li> <li>iii. To promote health and wellness in the community.</li> </ul>	x	x
	<b>Professional Practice</b> Demonstrate core values, behaviours and skills required to provide comprehensive, team based geriatric care. Demonstrate confidence in evaluating and maximizing own professional scope to optimize geriatric practice.	a) Demonstrate compassionate and client-centered care	x
b) Facilitate older adults' active participation in all aspects of their own health care (i.e. access to information, right to self-determination, right to live at risk, access to information and privacy).		x	x
c) Respect and promote older adults' rights to dignity and self-determination		x	x
d) Demonstrate leadership and accountability for providing follow-up on identified client needs or directing follow-up as appropriate.		x	x
e) Discuss with the client the ongoing responsibilities of the BSS Team, client and other health care professionals.		x	x
f) Understand and apply the principles of capacity for decision making and informed consent.		x	x

## Comprehensive Behavioural Assessment Core Interprofessional Competencies

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	g) Follow procedures for voluntary consent or proxy decision making (e.g. Substitute Decision Maker, Public Guardian and Trustee etc.) that arise from aging issues.	x	x
	h) Obtain informed consent throughout assessment, care planning and interventions.	x	x
	i) Evaluate the impact of family dynamics on client's health, safety, and therapeutic goals	x	x
	j) Respect diversity and difference, including but not limited to the impact of gender, sexual identity, family dynamics, religion and cultural beliefs on decision-making.	x	x
	k) Address challenging issues effectively, such as obtaining informed consent, sensitively discussing a diagnosis/prognosis, addressing emotional responses, confusion and misunderstanding.	x	x
	l) Identify and appropriately respond to relevant ethical issues arising in the care of older adults.	x	x
	m) Maintain the client's health record as per organizational policy and legislated requirements.	x	x
	n) Document and share within the circle of care, the client goals, appropriate findings of client assessment, recommendations made, responsibilities of involved parties and actions taken.	x	x
	o) Document communication with client and health care professionals across the broad care team in the appropriate locations (e.g. patient record and/or care plan) including connections with inter and extra agency team members, telephone calls of a clinical nature etc.	x	x
	p) Evaluate self and demonstrate an understanding of the importance of and the process of continuing professional development. <ul style="list-style-type: none"> <li>i. Critically reflect on own practice.</li> <li>ii. Assess own learning needs.</li> <li>iii. Develop a plan to meet learning needs.</li> <li>iv. Seek and evaluate learning opportunities to enhance practice.</li> <li>v. Incorporate learning into practice.</li> <li>vi. Act as a preceptor/mentor for Inter-professional team and students.</li> </ul>	x	x

