# Seniors in Crisis

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# Overview

- The Community Network of Specialized Care: Crisis Response Network
- Four County Crisis
- Case study Joe
- Consideration for responding to Seniors in Crisis
- Audience scenarios
- Questions and answers

# Community Network of Specialized Care

Vision:

"Together we will build our capacity to make a positive difference for individuals in our communities with a developmental disability and mental health problems and/or challenging behaviours who need timely access to effective clinical services"

# Community Crisis Response Network Goals

- To provide timely, flexible and appropriate crisis response services to individuals, their families or care givers experiencing a psychosocial or situational crisis
- To intervene early and provide urgent supports to stabilize the person or situation and to avoid the need for more intensive intervention.

COMMUNITY NETWORKS OF SPECIALIZED CARE

# What is a crisis?

*Crisis is defined as the onset of an emotional disturbance or situational distress (which may be cumulative) involving a sudden breakdown of an individual's ability to cope. The individual's state of crisis or distress is not likely to change/improve and may worsen without immediate intention.*

*MOHLTC Making it Happen, 1999*

# What is Crisis Response?

- Crisis Response is an active process that aims to provide relief from the immediate problem/crisis symptoms as perceived by the individual or the individuals family/caregiver, as well as to prevent the condition from worsening

## CMHA Peterborough

- A voluntary service available to people 16 years of age or older, who reside in the four counties of Haliburton, Peterborough, Northumberland and City of Kawartha Lakes
- People experiencing a crisis ( or a concerned third party)

## Services within Four County Crisis

- 24/7 Telephone Crisis Line
- Mobile Crisis Intervention
- Short Term Case Management
- Safe Beds

# Case Study

- Joe is a 60 year old man
- Diagnosed with an intellectual delay and schizophrenia
- Joe moved from his home and supports in Mississauga to a rural area one hour outside of Peterborough and then into the city of Peterborough
- Upon his move to Peterborough Joe was receiving support from
  - his sister in law
  - contract worker through Special Services at Home (SSAH)
  - Joe was calling the Four County Crisis (4CC)crisis line for support
- Joe visited CMHA on his own initiative. He did not know how to return to his home. The Crisis Mobile Team was deployed to assist him to return home
- Referral initiated to 4CC Dual Diagnosis Outreach Worker (DDOW)

# What happened next

- The DDOW was able to provide crisis support to both Joe and his sister-in-law
- With the support of the DDOW, linkages to community resources were developed including to Adult Protective Services and Community Care Access Centre
- In spite of the linkages to outside agencies, as well as the DDOW support, Joe was still experiencing difficulty including increased yelling, problems with other residents, inconsistent medication adherence, and meal and sleep times becoming erratic  the end situation still deteriorating even with increased supports

# New Plans in place

- The DDOW called a Case conference inviting Joe, his sister-in-law and brother, CCAC, a Special Services at Home (SSAH) worker.
- The result was 2x per day 7day/week support from Personal Support workers (CCAC)
  - introduction of a log book for communication between the different members of the team
  - the DDOW supporting Joe's sister in law at his psychiatric appointments
  - increase in hours of support by SSAH worker (hiring of a second), and the use of Safe beds to provide a break from Joe's apartment.
- In the end, the situation continued to deteriorate with increased supports. It became clear that Joe would need a different type of living arrangement

# Supports change

- Adult Protective Services increased their involvement and brought Joe's case forward to HKPR Access Mechanism for Developmental Services
- The family home program was tried but the placement was not successful
- Joe left the family home placement for an interim stay at Safe beds. However, Joe's behaviour escalated leading to a hospitalization and stabilization at the in patient unit of the local hospital
- A case conference was held upon Joe's discharge from hospital regarding next steps for Joe. The team consisted of workers from mental health and developmental service agencies.

# End Results

- Joe had a brief stay at a residence with 24 hour support out of region
- Adult Protective Services continued to advocate for Joe at local level.
- A placement in a supported apartment living situation in Peterborough was secured.
- The placement consists of :
  - his own apartment in a 24 hour staffed apartment building.
  - daily support for meals, medication and activities of daily living.
  - **This program is a collaboration of two different agencies- Community Living Peterborough and Kawartha Participation projects**
- Joe has phoned the Crisis line once just to say he was back and happy!

# Resources

- Community Networks of Specialized Care
  www.community-networks.ca

- Four County Crisis
  www.4countycrisis.com