



Toronto Central Behavioural Supports Ontario - Referral Form
Fax Referral to 647-788-4883 or Email to behaviouralsupport@baycrest.org

Referral Date (dd/mm/yyyy): _____

Please check the service/s referred to: Behaviour Support Outreach Team (BSOT) BSOT ED Program (including Inpatient discharges)

Specialty BSO programs: Geriatrics Addictions Specialist Caregiver Specialist

Patient Information

Name (last, first) (PLEASE PRINT): _____ D.O.B (dd/mm/yyyy): _____

Primary Language: _____ Interpretation needed? Yes No Patient identifies their gender as: _____

Health Card #: _____ VC: _____

Current patient location: Hospital LTC Community Other (please specify in address)

Address/location name: _____ Unit: _____ Postal Code: _____

Name of SDM/POA (if applicable): _____ Relationship: _____

Contact #: _____ Email: _____

Consent

Patient/SDM/POA consents to referral to and service from Behavioural Support Outreach Teams, which operate in collaboration with:

Alzheimer Society, Baycrest, Home and Community Care Support Services, LOFT, UHN, & Woodgreen Yes No

Patient/SDM/POA consents for BSO Coordinating Office at Baycrest to share information regarding current and previous Behaviour

Support Services with current health care team members: Yes No Comments/Exclusions: _____

Patient Medical Information

Immediate reason for referral: _____ Urgent review requested
(i.e. patient at high risk of harm to self/others)

Dementia diagnosis Yes No Unknown/suspected Please select: Alzheimer's, FTD, Vascular, Mixed, Lewy Body, Korsakoff, Other

Psychiatric History (if applicable): _____

Additional medical diagnoses: _____

Behavioural issues identified related to reason for referral (please check off the relevant issues):

- | | | |
|---|--|--|
| <input type="checkbox"/> Wandering (exit-seeking)
<input type="checkbox"/> Physically Responsive Behaviour (spitting, kicking, grabbing, pushing, scratching, biting etc.)
<input type="checkbox"/> Sexual behaviour (unwanted verbal/physical sexual advances toward others, disrobing/exposing self)
<input type="checkbox"/> Suicidal behaviour
<input type="checkbox"/> Resists Care (incl. medications/injections)
<input type="checkbox"/> Destroying property
<input type="checkbox"/> Verbally responsive behaviour (yelling, screaming, threatening, cursing etc.) | <input type="checkbox"/> Agitated behaviour (restless, anxiety, inability to settle)
<input type="checkbox"/> Delusions (fixed, false beliefs)
<input type="checkbox"/> Hallucinations (visual, auditory, gustatory, tactile, olfactory)
<input type="checkbox"/> Fidgeting/picking/repetition
<input type="checkbox"/> Calling out, crying
<input type="checkbox"/> Hoarding (collecting objects and refusing to part with them) | <input type="checkbox"/> Oral intake of non-edible items/substances
<input type="checkbox"/> Low Mood/Depressed (crying, tearfulness, reduced social interaction, loss of interest/pleasure)
<input type="checkbox"/> Rummaging (touching/handling objects with no obvious purpose)
<input type="checkbox"/> Other: _____ |
|---|--|--|

Support for transition to/from another location: Transition from: _____ to: _____ Permanent Temporary

Significant Caregiver Stress/difficulty coping

Does this patient need support with smoking and/or Substance Use Disorder? Yes No

Services currently involved: Internal BSO External BSO (please specify): _____ Home & Community Care

Alzheimer Society Other: _____

Primary Care: Family physician name: _____ Contact information: _____ Billing Number: _____

Specialists: Geriatric Psychiatry Geriatrics/Memory Clinic Other: _____

Referral Source Information

Referring Organization: _____ Referring person name: _____

Phone #: _____ Fax#: _____ Email: _____

***Please attach medical information, if available such as: List of current medications, recent behaviour team reports and relevant consult notes**

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BSO PROGRAM DESCRIPTIONS
BSO Clinical Navigation

PROGRAM	SERVICE DESCRIPTION	ELIGIBILITY CRITERIA
BSO Coordinating Office	The BSO Coordinating Office serves as one centralized access point for behaviour support services. The service includes: A behaviour support Hotline available 7 days a week and Clinical Navigators to provide system navigation and program triage. The BSO Coordinating Office serves to connect people with appropriate services by various partnerships which include: Toronto Seniors Helpline (TSH), Crisis Outreach Service for Seniors (COSS), GeriMedRisk, LTC+, RGP, Specialized Geriatric Service (SGS) providers, SPIDER, SCOPE, and TIP, amongst others.	<ul style="list-style-type: none"> • 55+ (exceptions for younger ages based on geriatric presentation) • Primary concern is responsive behaviours • Patient is currently medically stable • Resides in the Toronto Central Region

BSO Outreach Teams (Community/LTC/Hospital/Transitional Care)

PROGRAM	SERVICE DESCRIPTION	ELIGIBILITY CRITERIA
Behavioural Support Outreach Team (BSOT) in all Sectors: Community, LTC, and Acute Care	In LTC and Community, an interdisciplinary team of clinicians including Clinician Leaders, Nurse Practitioners, Behaviour Support Specialists, Registered Nurses, and Personal Support Workers (PSWs) across AST, Baycrest, HCCSS, and Woodgreen. Acute care teams consist of: LOFT BSTR (Psychogeriatric Case Managers and PSWs) and UHN BSS (Behaviour Support Specialists and PSWs). These outreach-based services serving across all sectors is short-term (average length of service is 8-10 weeks), and focuses on assessment and management of responsive behaviour(s). The team(s) will also support patient transitions between all sectors and will foster collaboration with various resources and care partners. Service is delivered virtually and in-person as needed.	<ul style="list-style-type: none"> • 55+ (exceptions for younger ages based on geriatric presentation) • Primary concern is responsive behaviours • Patient is currently medically stable • Resides in the Toronto Central Region
Behaviour Support Outreach Team (BSOT) Emergency Department (ED) Program	One of our Advanced Practice Nurses - Nurse Practitioner (NP) /Clinical Nurse Specialist (CNS) will contact the patient/family/SDM within 3-5 business days to complete an in-home behaviour assessment for discharged ED patients. These assessments include a medication reconciliation. If there is no primary care, or the patient is poorly connected to primary care, the NP will assume that role on a short term basis. We work in collaboration with all other healthcare providers involved with the patient.	<ul style="list-style-type: none"> • 55+ (exceptions for younger ages based on geriatric presentation) • Primary concern is responsive behaviours • Patient is currently medically stable • Resides in the Toronto Central Region

Specialized BSO Services

PROGRAM	SERVICE DESCRIPTION	ELIGIBILITY CRITERIA
Addictions Specialist	Support for Long-term care and transition to long-term care for older adults with Substance Use Disorders (with or without dementia). Includes addiction to alcohol, opiates, cannabis, nicotine, benzodiazepines and other drugs. Addiction specialist will support care teams and caregivers with a transition plan to support cessation or harm reduction to ensure safe transition to and or care at the LTCH environment. This includes consulting in cases where home is considering declining an application due to addiction or substance use.	<ul style="list-style-type: none"> • 55+ with responsive behaviours related to substance use living in Toronto Central Region
Caregiver Specialist	The program based at Alzheimer Society of Toronto, funded under BSSP Toronto Central Region. It supports caregivers of people with dementia living in the community, through transitions and in LTC	<ul style="list-style-type: none"> • Caregivers are supporting people living with cognitive impairment & responsive behaviours within the Toronto Central Region

Escalation Options

PROGRAM	SERVICE DESCRIPTION	ELIGIBILITY CRITERIA
Virtual Behavioural Medicine (VBM) Program	The VBM program provides rapid access to short term tertiary level virtual behavioural medicine consultation and pharmacological management of severe unmanaged neuropsychiatric symptoms of dementia (responsive behaviours). This service is a collaborative partnership between Baycrest, Toronto Rehab and TC BSO. The VBM team recommend that individuals should first be seen by their local Behavioural Support Outreach Teams and Geriatric Mental Health Outreach Teams/Community Psychogeriatric Outreach Teams/specialists, prior to referring to the program to make best use of local services and encourage continuity of care.	<ul style="list-style-type: none"> • Physician or nurse practitioner referral • Available to all sectors in Ontario • Individuals with a diagnosis of dementia; primary concern is severe unmanaged neuropsychiatric symptoms of dementia (eg. physical aggression and agitation) • Patient is at risk of harm to self and/or others due to behaviours associated with dementia • When an application for a tertiary specialized behaviour support bed (CASS bed) is being considered • Patient is currently medically stable
Complex Case Resolution Table (CCRT)	The Complex Case Resolution Table is provided by the TC BSO Coordinating Office to escalate and support cases for responsive behaviours that have not successfully resolved with current available behaviour support and specialized services. CCRT brings together specialists, relevant resources and the patient care team to mutually discuss the patient needs and develop a care plan to address them.	<ul style="list-style-type: none"> • 55+ (exceptions for younger ages based on geriatric presentation) • Primary concern is responsive behaviours • Patient is currently medically stable • Resides in the Toronto Central Region • Previous involvement of Behaviour Support Services • Available to all sectors (Acute, LTC, Community) in Toronto Central Region

For the most up to date list, contact our BSO Coordinating Office at: 416-785-2500 ext. 2005; behavioursupport@baycrest.org.

