

# The Advocate



June 2020

## About Us

Established in 1985, McCormick Dementia Services is Ontario's largest adult day program specializing in dementia care. We are committed to delivering the highest quality programs and services to clients in our day program, programs for overnight respite, and family support. Formerly known as Alzheimer Outreach Services, McCormick Dementia Services is located at the corner of Oxford and Commissioners Road in London, Ontario. The team is a dedicated group of professionals and volunteers who are focused on client needs and personalized care.

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## A Note from the Director

*First, think. Second, dream. Third, believe. And finally, dare.* – Walt Disney

I believe this quote from Mr. Walt Disney perfectly encapsulates the mood and drive of the day program staff for the last three months. We have been forced to re-think how we offer our caregiver education and supports, and how we deliver meaningful recreation programming for clients. In many ways, this pandemic has actually offered us the opportunity to be creative and offer our services in new and unique ways.

The creation of our new *Caregiver's Corner* website and Zoom virtual supports has been exciting, and to ensure we haven't missed those who do not use virtual technology, we hope that our regular telephone contact has been helpful for others. I want to reassure everyone that our brains have not slowed down as we dream up and determine how to implement more supports for our clients and caregivers in the community. I can honestly say that we have some ideas that can have a big impact—and we are currently hammering out the details to make those dreams a reality.

I am excited to share in this issue of the Advocate that we are going to slowly start to re-open our doors on June 22<sup>nd</sup>. Important details are in my article on page 2 . Please check it out.

Beginning July 6th, our new Social Worker, Catherine Robson will be joining our team. Some of you may remember Catherine from when she completed her 4th year BSW placement with us. We are looking forward to her return.

Lastly, I want to share some happy but sad news. Our RAI-CHA Assessor, Joan McKinnon, has announced her retirement. Out of her forty year career of working with older adults, she has been with McCormick Dementia Services for the last eight years-supporting day program clients and caregivers with her excellent case management and interpersonal skills. Her last day with McCormick will be July 15, 2020. We will miss having Joan on our team, however, we wish her all the best in her well-deserved retirement.

Thank you for continuing to be a part of our McCormick family. We are truly looking forward to re-opening our doors, and slowly bringing participants back to the day program.

Most sincerely,

Karen Johnson, MSW, RSW



## MESSAGE FROM THE DIRECTOR

As I write this message, my feelings are of hope and gratitude. Hope because we are going to re-open our doors a small bit very soon, and gratitude for the patience from all our clients and caregivers. I have been communicating with the Middlesex-London Health Unit, and we have received directions on how to safely re-open our program in order to offer high risk clients one-to-one support. This will give us the opportunity to provide a day of respite to those families who are experiencing burnout and clients who are at high risk for crisis placement to long term care, hospital admission, or other urgent services. Beginning June 22, we are opening each weekday to serve two clients per day in the day program. We will allow 20 clients two days of attendance per month. The Health Unit was specific in telling us that small groups are not allowed at this time.

Our Social Workers, RAI-CHA Assessor, and Recreation staff have maintained close contact with our clients and caregivers, and through a structured risk-assessment process have determined those in highest need at this time requiring day program access. The limited client capacity will allow us the opportunity to gain experience in providing this new type of urgent service—all staff to get comfortable with wearing Personal Protective Equipment (masks, gloves, gowns, face shields, eye goggles) when working with clients, and also maintain a new strict standard of Infection Prevention and Control cleaning practices (constant cleaning of high touch surfaces, and thorough disinfecting entire rooms post-visit). We are considering this Stage One of re-opening. Once we are comfortable with the processes that I have noted above and also after receiving further direction from the Health Unit and/or Ministry, we will look at increasing the number of people we can bring through our doors. For the health and safety of our clients, caregivers, and staff, this is a process that must be done slowly and with extreme care.

To prepare for offering this type of support to our community, it means we have to completely shut our doors to the McCormick Home long term care side of our building. During this time, staff who work in the day program will no longer be able to work in the Home as well. Literally, we cannot cross through our hallway into the Home. We will have to be self-sufficient with our laundering, housekeeping, client meals, and more. While we are certainly capable of accomplishing this support, it is a temporary and significant change. We will also be dependent on our caregivers to assist us in actively screening clients when they arrive at our day program front door (answering screening questions if necessary). It will really be teamwork. And I am hopeful that everyone will understand how seriously we are taking this—for some it may feel like excessive risk control, but for us these are necessary safety precautions.

Our Social Workers and RAI-CHA Assessor this week started to contact and offer spaces to clients/caregivers. If you are not contacted in this first round of space offers, I ask for your understanding and continued patience—we are trying our best to keep high risk clients from prematurely moving into long term care or having to be hospitalized. We are one big McCormick family, and I promise we will eventually get everyone back through our doors.

With gratitude,



Karen Johnson, MSW, RSW  
Director

## What is Infection, Prevention and Control?

We are living through extraordinary times and during this pandemic we have had to learn to adapt and survive. A part of this adaptation includes a few new terms such as social distancing, donning and doffing personal protective equipment (PPE), self-isolation, self-quarantine and self-screening. As stores, malls, churches and the day program begin to reopen you will start to hear about IPAC.

IPAC stands for Infection, Prevention and Control. For any facility to currently reopen they must have proper IPAC, enough PPE and be able to promote social distancing as much as possible. The combination of all three will help decrease the rate of infection and most importantly make people feel safe again.

### How are clients kept safe while in the day program?

All staff must wear PPE when in close contact with a client as it is difficult to adhere to the social distancing rule of 6 ft. /2m apart during programming and nursing care.

During programming, the recreational staff will wear a mask and face shield. In addition to regular use of hand sanitizer, they will be instructed to wash their hands hourly. If in contact with another client during the day, they will change their PPE to help prevent cross contamination. Clients will be receiving one to one programming while a client is present in the day program.

During nursing care, the nursing staff will wear a mask, face shield, gloves and gown. PPE will be changed between each client that is being served to prevent cross contamination. Like the recreation staff, nursing staff are instructed to wash hands hourly. Isolation carts will be within reach to store all the PPE.

### What is the day program's IPAC routine?

The day program space needs to be cleaned three times in a 6-8 hour visit.

1. Before the client arrives
2. While the client is present
3. When the client leaves the day program.

These areas include but are not limited to high touch points such as light switches, table tops, chairs, railings, washrooms, and program materials such as paint brushes, etc. All staff will be trained on IPAC and will be

responsible for keeping the day program clean and free of illness.

### Why is the screening process essential?

The day a client is to attend a staff member will contact the caregiver in the morning and will ask a series of pre-screening health questions. These questions will help determine if it is safe for the client to attend the day program. Together with the caregiver, we will assess if your loved one is well enough to attend. If they have woken up with a cold that was not present the night before, they will not be able to attend. This will help keep our environment free from illness and keep other clients safe.

Our active Health assessment includes measuring the client's temperature and asking health related questions. These assessments will occur 3 times during their visit:

1. When the client arrives in the morning
2. Before lunch
3. Before the client leaves for the day

If at any point the client develops a temperature that is 37.8 and above, or has developed any symptoms of illness, the client will have to be sent home and will be encouraged to be assessed by their family doctor and tested for Covid at any assessment center before returning to the day program.

While in the day program each client will be in their own program room receiving one to one support from a recreation specialist and also a nursing staff if required. Currently day program clients will be unable to share the same room and socialize with each other. We look forward to receiving direction from the Ministry of Health and the Health Unit when it is safe to allow the social time together.

The health and safety for our clients and staff is something we all take very seriously during these difficult times. If you have any questions regarding IPAC or any of the day program's processes, please feel free to be in contact. I will be happy to speak with you and answer all of your questions.

Stephanie Garcia, Nursing Care Manager

519-439-9336 ext 2346 or  
sgarcia@mccormickcare.ca

### Understanding Shadowing Behaviour

By Tara Machacek, MSW, RSW

One of the most common issues that we are hearing about from caregivers is “I don’t get a minute to myself”, “my spouse is following me everywhere”, “I can’t even go to the bathroom by myself”. This is a common behavior for a person with dementia and is often referred to as shadowing. Shadowing is often an indication of anxiety. When someone is anxious they often seek out comfort and security. Caregivers are often that source of comfort and security for their family member and so it is natural that the person wants to be with their caregiver to reduce that feeling of anxiety.

This behaviour can be difficult to cope with in the best of times, but is even more difficult when you are in self-isolation with the person, not able to go out anywhere, not able to have family and friends come over to help out, and all of your respite options, including the day program, have been closed during the pandemic.

So what can you do? Here are some tips that you can try.

#### **Tips:**

**Respond calmly and gently** – If you show your frustration the person you are caring for will pick up on this and likely become more frustrated and agitated themselves.

**Address the underlying feeling if possible** – See if you can figure out why they are anxious - if you can identify the cause it is easier to find a solution so that you can reduce the anxiety.

**Give the person something like coins or beads to fiddle with** – sometimes having something to keep their hands busy and to focus on will allow you to have a few minutes to yourself

**Make sure the person gets enough exercise** – this can be a challenge in these times but try to go out for a walk if possible or play the exercise videos which can be found on the Caregiver’s Corner website. This will give them some exercises to do and may give you a few minutes to yourself while they follow along to the video.

## Change from caffeinated to non-caffeinated drinks

**Try to find an activity or task that the person is able to do that will hold their interest.** This may be colouring a picture, doing a word search, watching a movie, folding laundry, or sorting different objects.



Have a look at our website to see if there are any activities you can try. If you have questions or need some ideas you can call and speak to one of our recreation specialists to help you out.

**Have a way to escape when things get too much** – take a walk around the block (if it is safe to leave the person on their own) or have a room where you can be alone.

**Ask a friend or family member for help.** In “normal times” you could have someone come over to stay with the person, however this is not possible at this time. But this doesn’t mean family and friends can’t still help out. Set up a virtual call using FaceTime, Skype, or Zoom. Have your family member or friend have a chat or do an activity with the person so that you can have some time on your own in another room.

**Join a virtual support group** – During COVID-19 McCormick Dementia Services will be offering our caregiver support groups virtually using our secure Zoom account. Joining the meeting by phone only is also an option. If you are interested in joining a group please contact your social worker to register

Remember not everything works for everyone, and what works one day may not work the next. So even if something doesn’t work the first time, try it again another day and it may be more successful. Social work support is available via telephone during COVID-19. If you have questions or need support please contact us.



## Hello from the Recreation team!

Our approach to recreation here in the day program often encompasses a few different philosophies: Meaningful Activities, Montessori and Person-Centred care. If all that sounds foreign to you, the good news is that these concepts can be implemented in any setting, including your own home.

With the closing of the day program, we quickly sprang into action to develop resources that caregivers and clients could access from home. The Caregiver's Corner website was launched, Facebook and YouTube videos have been posted regularly, and kits have been delivered to those who were seeking recreation supports, but didn't have access to a computer or the internet. We have now started to offer recreation over the phone and have even been trialing zoom programs with small groups.

We are happy to hear that many clients and caregivers find the resources very valuable. We have also learned that despite the number of resources that are available online, or even in a physical kit, is that caregivers are finding some challenges in implementing recreation in the home. As recreation professionals many of us have been in this role for several years and with any profession, our "tricks of the trade" come pretty naturally to us. Our job now is to try our best to impart our wisdom on to you, just like our team members in nursing and social work are doing through their supports.

As you try to implement recreation at home, keep these points in mind:

- **Have a sense of humour!** Keep the mood light.
- **Don't say "would you like to..."** because the response may often be "no.", **Instead say "let's..." or "I need some help with..."** Example: Let's get these cards sorted so that we can play a game later.
- **Set up is key.** Avoid a lot of clutter, extra noise, too many instructions.
- You (or hired caregiver's) **mood, energy and body language plays a big role.**
- **Keep requests simple, positive and inviting.**
- What's effective and enjoyable in one moment, may not be the next.

- Sometimes a **little quiet time is good** too.
- **Forget about what you or society thinks about acceptable activities or objects.** If a person has always loved babies or pets, a doll or stuffed animal may be enjoyed.
- **Activities can include cleaning tasks** like sweeping, wiping surfaces, folding washcloths or hand towels and matching socks. Accept that the job may not be perfect or even completed in entirety. That's okay.
- **Counting, sorting and organizing** items can be great activities such as decks of cards, tools, buttons, junk drawers.
- **Cutting and shredding items** such as coupons, monopoly money, shapes/seasonal decorations.
- **Consider the person's interests and occupation.** Perhaps there's a skill from a job that you may be able to tap in to i.e. math, childcare, music, sports, gardening, Sunday school teacher.
- **Incorporate physical activity into your day;** Whether through helping tasks, walks or following a simple exercise program, movement can increase energy, mood and ability to think and focus.
- **Cue, encourage and reminisce .** Just placing an activity in front of someone won't be enough to get him or her started. Depending on the person, their stage of the disease or the familiarity of the task or activity, he or she may need some gentle instructions and reminders and encouragement. Make conversation about the topic. Talk about the good old days and reminisce wherever possible.

### *Would you like:*

- the recreation staff to try programs by phone or Zoom with the person you are caring for?

-more information about Meaningful Activities, Montessori Methods or Person-Centred Care?

-help navigating our Caregiver's Corner website, Facebook page, YouTube or signing up for our virtual newsletter?

**Contact the recreation team at [community.support@mccormickcare.ca](mailto:community.support@mccormickcare.ca) or by phoning 519-439-9336 extension 2391.**

# CLIENT BILL OF RIGHTS



*IN KEEPING WITH THE BILL OF RIGHTS UNDER THE HOME CARE AND COMMUNITY SERVICES ACT (1994) FOR PEOPLE WHO ACCESS COMMUNITY SERVICES, MCCORMICK CARE GROUP SHALL ENSURE THAT THE FOLLOWING RIGHTS OF CLIENT'S RECEIVING SERVICES AT THE MCCORMICK DEMENTIA SERVICES ADULT DAY PROGRAM WILL BE FULLY RESPECTED AND PROMOTED.*



1. EVERY CLIENT WILL HAVE THE RIGHT TO BE TREATED IN A COURTEOUS AND RESPECTFUL MANNER AND WILL BE FREE FROM MENTAL, PHYSICAL AND FINANCIAL ABUSE BY THE SERVICE PROVIDER.
2. EVERY CLIENT WILL HAVE THE RIGHT TO BE TREATED IN A MANNER THAT RESPECTS THE PERSON'S DIGNITY AND PRIVACY AND PROMOTES HIS/HER AUTONOMY.
3. EVERY CLIENT WILL HAVE THE RIGHT TO BE TREATED IN A MANNER THAT RECOGNIZES THE PERSON'S INDIVIDUALITY AND THAT IS SENSITIVE TO AND RESPONDS TO THE PERSON'S NEEDS AND PREFERENCES, INCLUDING PREFERENCES BASED ON ETHNIC, SPIRITUAL, LINGUISTIC, FAMILIAL AND CULTURAL FACTORS.
4. EVERY CLIENT WILL HAVE THE RIGHT TO BE INFORMED ABOUT THE COMMUNITY SERVICES PROVIDED TO HIM/HER AND WILL BE TOLD WHO WILL BE PROVIDING THE COMMUNITY SERVICES.
5. EVERY CLIENT WILL HAVE THE RIGHT TO PARTICIPATE IN THE SERVICE PROVIDER'S ASSESSMENT OF HIS/HER REQUIREMENTS AND A PERSON WHO IS DETERMINED UNDER THIS ACT TO BE ELIGIBLE FOR A COMMUNITY SERVICES HAS THE RIGHT TO PARTICIPATE IN THE SERVICE PROVIDER'S DEVELOPMENT OF THE PERSON'S PLAN OF SERVICE, THE SERVICE PROVIDER'S REVIEW OF THE PERSON'S REQUIREMENTS AND THE SERVICE PROVIDER'S EVALUATION AND REVISION TO THE PERSON'S PLAN OF SERVICE.
6. EVERY CLIENT WILL HAVE THE RIGHT TO GIVE OR REFUSE CONSENT TO THE PROVISION OF ANY COMMUNITY SERVICE.
7. EVERY CLIENT WILL HAVE THE RIGHT RAISE CONCERNS OR RECOMMEND CHANGES IN CONNECTION WITH THE COMMUNITY SERVICE PROVIDED TO HIM/HER AND IN CONNECTION WITH POLICIES AND DECISION THAT AFFECT HIS/HER INTERESTS, TO THE SERVICE PROVIDER, GOVERNMENT OFFICIALS OR ANY OTHER PERSON, WITHOUT FEAR OF INTERFERENCE, COERCION, DISCRIMINATION OR REPRISAL.
8. EVERY CLIENT WILL HAVE THE RIGHT TO BE INFORMED OF THE LAWS, RULES AND POLICIES AFFECTING THE OPERATION OF THE SERVICE PROVIDER AND TO BE INFORMED IN WRITING OF THE PROCEDURES FOR INITIATING COMPLAINTS ABOUT THE SERVICE PROVIDER.
9. EVERY CLIENT WILL HAVE THE RIGHT TO HAVE HIS/HER RECORDS KEPT CONFIDENTIAL IN ACCORDANCE WITH THE LAW.



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**The Day Program will be closed on**

**July 1, 2020 - Canada Day**

**August 3, 2020-Civic Holiday**

**September 7, 2020-Labour Day**