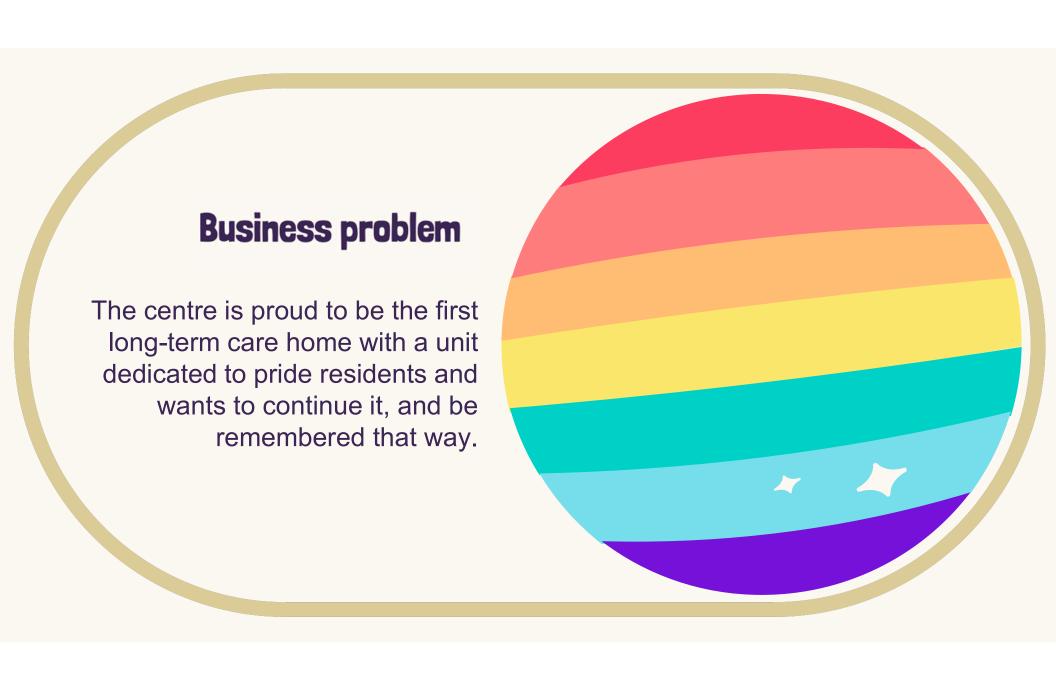


- 1. Desk Research and Hypothesis
- 2. Observation & Interview
- 3. Problem Reframing
- 4. Solutioning
- 5. Implementation and Risks



Desk Research & Hypotheses





Bias Prevention

Appreciation on message boards

"Know the patient" day every month

B

Scheduled birthday party celebrations

Outings to "mundane" locations like malls, museums

Appreciati on message boards

"Know the patient" day every month

Have info sessions with other residents to share stories about the residents Create periodical talks when a member of Rekai shares about any subject

Create a mentor program to guide young members of the 2SLGBTQ+ community through their experience

Select
representatives
from the
community to
organize and
coordinate events
and relay concerns

LGBTQ2S+ patient appreciation night for staff

Monthly

community

events

Have group
meetings within
the community at
Rekai with
bonding activities

Connect with other lgbtq university clubs for sharing stories



Observations & Interviews

Each residents have designated PSWs & nurses Patients & residents don't prefer changing rooms because it forces them to adjust into a new environment Prospective resident asked a lot about basic facilities, activities, etc.

Scheduled birthday party celebrations

Outings to "mundane" locations like malls, museums

Staff who are champions wear special bands Not everyone in the Rainbow wing is part of the 2SLGBTQI+ community

Artworks by residents on all floors

Place of worship

supervise d showers are 2x per week Resident and family services coordinator Memory boxes containing photos & items important to residents

B

Room decors are personal to each resident

Dining room only for family

Rainbow wing is on the 3rd floor

Priderelated events

Observation:
Our visit to the Centre



People

Objects

Environment

Message

Services

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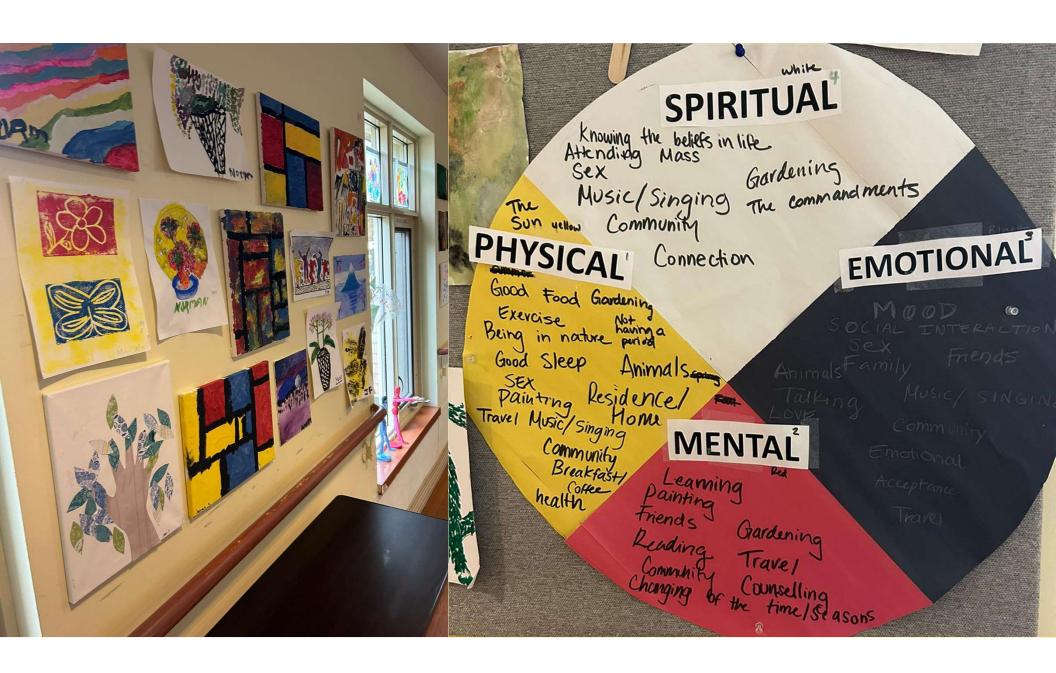
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B

Interview: Fact Finding

Interviewees	Interesting findings
Residents	 "I ask three people about an event and got three different answers" "When they decided to make the rainbow wing, I didn't hear anything about it." "I don't feel that there's an outlet to talk about negative PSWs" "There was a caretaker, not a resident, and I talked with her. It felt nice to talk to someone." "Rainbow wing feels safe"
Life Enrichment, Volunteers, Admin	 "We have champions in every ward and wing." "Champions are there to represent the rainbow wing and to instill those best practices to the home and staff." "One of the problems is to find someone who is truly empathetic."
Nurses & PSWs	 "Regarding champions, some of the staff only knows the basics, not the full champion training." "Depending on the feedback, we have a confidential form for patients." "If the residents of the rainbow wing want to talk, we usually will bring someone from church street to talk to." "You need a close relationship with the residents, like a friend"

B.



PROBLEM REFRAMING

3

KEY AREAS WE IDENTIFIED AS IMPORTANT

01: Key problem

The Rainbow wing is not just for Pride residents yet, and there are 2SLGBTQI+ residents across different wings. Our focus is to extend to the community as a whole

03: Outcome of the need

Fostering inclusion across the i center, so that all residents feel they are part of a community

02: Objective of Residents

Having a safe space and a sense of community is a common theme from interviews and our observation of residents expression through artwork

04: Core need

Residents ultimately want to feel valued and safely heard without having their routine disturbed

PROBLEM STATEMENT

Given the complexity of building a community for Pride residents, how might the Centres ensure the comfort, safety, and inclusion of 2SLGBTQI+ residents in the larger community, so that all residents feel valued without having their current routine disturbed?



SOLUTIONING

"Given the complexity of building a community for Pride residents, how might the Centre's ensure the comfort, safety, and inclusion of 2SLGBTQI+ residents in the larger community, so that all residents feel valued without having their current routine disturbed?"

Comfort

- Hire a full-time
 psychologist to gather
 and organize patient
 information where they
 can feel listened to while
 keeping their anonymity.
- Create a clear downstream information system so the patients perceive consistency from the staff.

Safety

- Create an induction and training program for new rainbow wing residents.
- Everyone should be a champion: make the champion program mandatory for <u>all</u> staffs.

Inclusion

 Create other wings within Rekai so the rainbow wing is just one more of the group, instead of the only "different/special" group.

KPIs for new measures

DSM-L1

Depressive symptoms in the DSM-L1 are captured by two questions that utilize a 5-point Likert scale to evaluate how much, or how often, an individual has been bothered by that symptom during the last 2 weeks

Quality of Social Support

We can measure the quality of life by the share of people who report having friends and family, time spent in social interactions per week or satisfaction with personal relationships.







Implementation

Threats, risks & mitigation

Threats

- Residents could be afraid to talk to psychologists
- Some aspects of the KPIs are difficult to measure such as we cannot objectively measure "Emotional Support"

Risks

- People with different ethnic backgrounds might have different opinions on talking to psychologists
- If residents are afraid to talk to the psychologist, the close communication expected will not develop

Mitigation

- Introduce psychologist with a different title (e.g., as a friend)
- Education to residents about the value of outside people to talk to

Cost Feasibility

Comfort

Initially, we can start with a consulting psychologist/psychotherapist at an initial budget of \$5000/month. (Approximate cost for hiring a psychologist is \$100 to \$120 per session). This can eventually be extended to a full-time in-house psychologist which would be around \$100K per year

Safety

Create an induction and training program = Internal training

(Estimated cost: 5 people working 10 hours a week for 4 weeks)

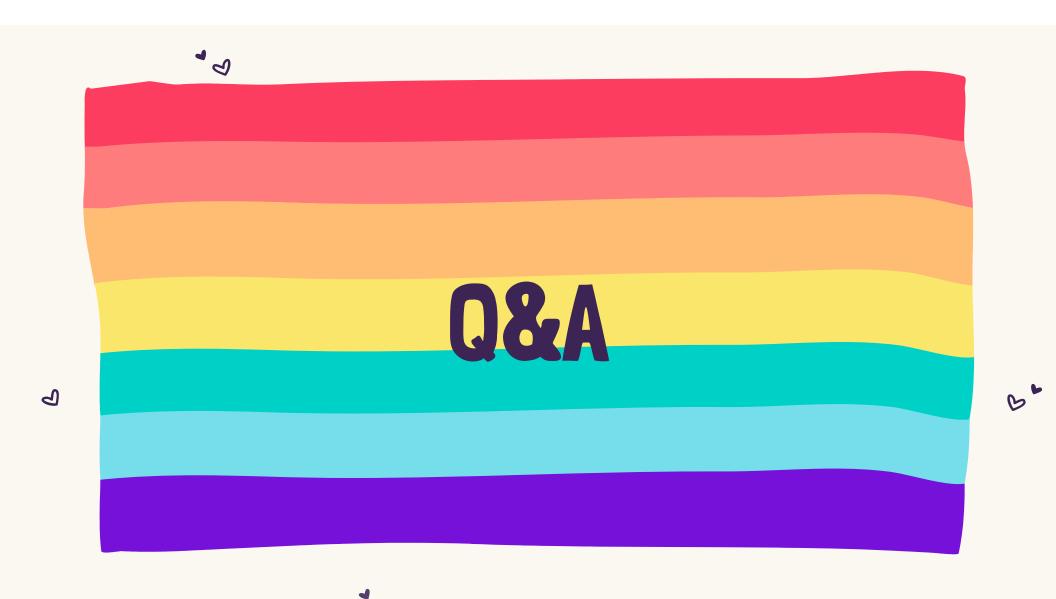
Inclusion

Rebranding of different wings would be more about leveraging preexisting facilities and activities already offered and capitalizing on other accommodations which facilitate diversity such as there are already staff which speak 14 languages.

(Estimated cost: 3 people working 6 hours a week for 3 months)

Organization reality: How our solution fits

- A psychologist fits in the culture for the need of empathy at work in such a human-centered working environment. Depending on the direction taken, a psychologist can easily be integrated within the existing organization structure.
- As a way to ensure resident comfort, when implementing this change for the care home, we need to ensure it doesn't disturb any current resident habits or routines.
- The psychologist should be an addition to the team of nurses and PSWs, not a replacement. Both sides can leverage each other's' expertise to produce the best results. A holistic method ensures that both the mental health and physical health needs of the residents are fulfilled.
- The ultimate goal: to improve the wellbeing of the centre's community, and this facility of a psychologist can actually be extended to nurses, PSWs, etc. and even the family to alleviate Caregiver burden in the future.
- Rebranding of wings fits with the care home's existing ability to create and accommodate events and programs, but elevating it one step further.



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