Recreation Services in Continuing Care - The Voices of Recreation Staff
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Objectives: The importance of supporting recreation services within continuing care (CC) was one of the top issues identified by the Institute for Continuing Care’s consultation process in 2013. This paper discusses the results of a series of focus groups conducted with recreation staff from across Alberta in 2014.

Methods: The study was conducted in 3 parts: i) an online survey of all CC facilities in Alberta; ii) administration of a resident survey within a select group of these facilities; and iii) focus groups with recreation staff in CC facilities. This presentation focuses on the results of the seven focus groups that were conducted across the province (Grande Prairie, Ft. McMurray, Edmonton [2], Calgary [2], Lethbridge) with recreation staff from both supportive living and long term care. A total of 39 individuals participated. Each discussion at focus group was recorded, transcribed, and analyzed using NVivo.

Results: Data from the focus groups identified 6 major themes affecting recreation services in the CC sector. These themes included: funding, staffing, role clarity, professionalism, programming challenges, and differences in perspective on quality of life (QOL).

Conclusions: Recreation staff view their services as enhancing the QOL of residents, however they do not believe they were well supported within the existing CC funding model. The themes identified by the recreation staff were interconnected and strongly impacted how recreation services were provided within the CC setting. These findings may have significant implications for CC policy and practice.

Healthy Aging: Approaching Change from the Grassroots Perspective
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The province of New Brunswick has one of the fastest growing seniors’ populations in Canada, which is projected to double over the next twenty years. This demographic however has the potential to become one of the province’s greatest assets by bringing their talents, experience, and expertise to the table when reinventing the way New Brunswick defines its aging experience. In June 2011, a small group of long-term care stakeholders came together to discuss their unique and common issues around aging. The conversation has since grown to include 35+ stakeholders, including seniors themselves, whose programs and ideas support NB’s senior population. Three priority areas of focus surfaced as a result of these conversations: caring communities, continuum of care, and consultation and contribution. These in turn have assisted in moving the conversation forward in developing a shared philosophy that assists communities in developing social prototypes that meet their particular aging requirements. The poster will describe the group’s work to date in building
system capacity, impacting culture and affecting needed policy change by providing engagement opportunities that ensure the voices of seniors are heard in developing an aging agenda that affects them directly. Examples to be presented include the senior engagement sessions held during the 2015 federal election and a political forum on healthy aging and care during the 2014 provincial election.

Enhancing Resident Care in Nursing Homes: Characteristics of Opinion Leaders in the Long Term Care Sector in Atlantic Canada
Dr. Lisa Cranley, University of Toronto; Dr. Whitney Berta, University of Toronto; Dr. Jim Dearing, Michigan State University; Dr. Carole Estabrooks, University of Alberta; Dr. Janice Keefe, Mount Saint Vincent University; Erin McAfee, Mount Saint Vincent University

Opinion leaders offer a conduit to social networks that can facilitate the scale up and spread of best practices in long term care. As part of a mixed methods pan-Canadian study, we have identified advice seeking patterns, behaviours, and characteristics of leaders/administrators in nursing homes operating in Atlantic Canada. In the fall of 2015, we conducted semi-structured interviews with individuals identified through the analysis of a social network survey (administered November 2014- January 2015) as opinion leaders, their advice seekers, and boundary spanners. Preliminary results from our interviews suggest that contemporary advice seeking networks are often predicated on enduring, established relationships between advice seekers and opinion leaders from whom they seek advice. The nature of these advice seeking relationships, and the nature of the advice and information sought, changes over time. The characteristics of opinion leaders that advice seekers value included being approachable, knowledgeable, reliable and resourceful, with a good reputation and a willingness to share ideas. Sustained relationships often evolve from unidirectional advice seeking to bi-directional advice seeking and information exchange on topics ranging from care practices, to responses to regulatory change and human resource issues. An enhanced understanding of the characteristics of network actors, particularly opinion leaders, and the nature of their interactions with advice seekers, stands to inform future efforts to speed the spread of new innovations and best practices in regards to resident care.