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# LONG TERM CARE TODAY

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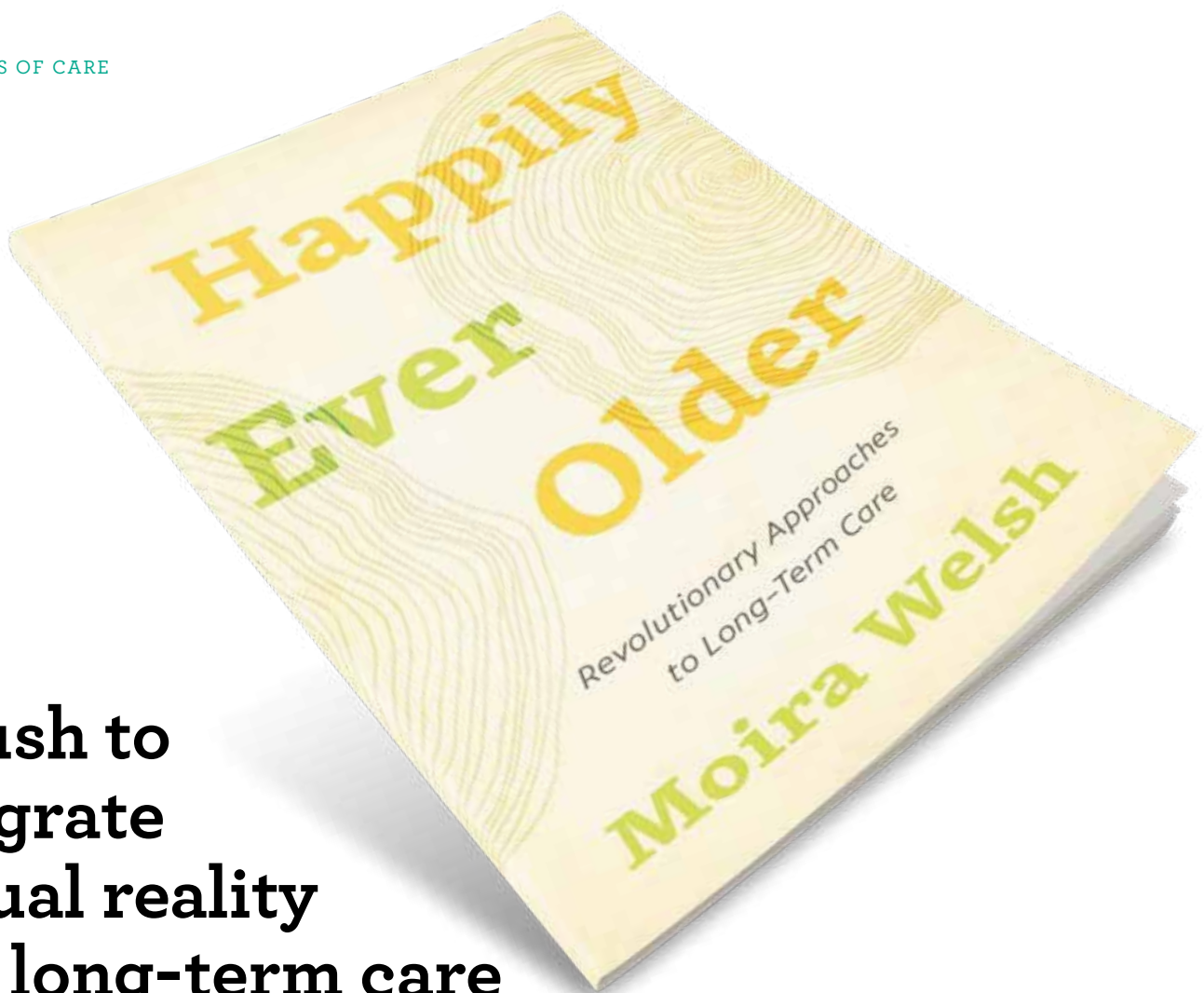


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# A push to integrate virtual reality into long-term care

By Moira Welsh

A few years ago, Matthew Melchior, President and Co-founder of Primacare Living, and his chief operating officer, Jill Knowlton, started discussing the possibilities of virtual reality (VR). They had heard about results that seemed promising in studies of VR on people with early cognitive decline, but they wondered if it would work for the people in their care living with serious or advanced dementia.

Knowlton thought it might help with a big, strapping man who once drove long-haul trucks across North America and now, living in the limited space of a nursing home, had episodes of rage. She wondered what a video of a courtroom would do for a retired judge who spends his days presiding over the nursing station that looks a lot like his old courtroom bench, surveying the room, meting out justice. He now instructs the nurses,

and woe to those who don't follow his orders. "You don't speak unless you are spoken to," Knowlton says. "He's running his life like his courtroom. If the nurse says something, well, you're probably going to get clobbered, because you're speaking and he didn't tell you that you could speak."

Knowlton began her career as a registered nurse, spending most of her time in privately operated long-term care, and is a leader with the Ontario Long Term Care Association, the province's largest nursing home group. She is equal parts warm and professional. She is unafraid of risk, willing to take the unorthodox approach if there's a good chance it will improve lives.

In one of my first interviews with Knowlton, she told me a story about long-term care that I've never forgotten. A man, a resident with

serious dementia, was frustrated by a high libido. He was young, just in his early 60s. His dementia left him with few inhibitions and sometimes he would touch female residents in his home. His wife had a plan to fix that. She asked his nursing home for permission, and it was granted. Once a month, the wife hired a sex worker to visit her husband at the home. Staff reserved the private family "stay-over" suite. It was beautifully appointed, like a luxury hotel room, with a comfortable bed and soft lighting. They left the man and the sex worker alone. After, he seemed more relaxed, and for the next month, his behavior was under control. Everyone was happier.

Knowlton likes possibility thinking. So does Melchior. Together, they have pushed the rights of LGBTQ2S people. Understanding sexuality is an important piece of long-term care.

They sought help from The 519, a City of Toronto agency that advocates for the LGBTQ2S community. It provided the mandatory training for staff and volunteer sessions for resident and family councils. Knowlton says the resident councils embraced the sessions. "We're all living here, together, so let's make everyone feel welcome." One resident, Knowlton says, identified as a woman, wearing feminine clothes, but when she was sick and couldn't put on her wig, she looked like a man. With The 519 training, Knowlton says staff always approached her as a female, no matter how she appeared.

With Melchior, Knowlton researched ways to improve the lives of people in their homes, choosing the Butterfly program because of the way it helped shift the culture from a medicalized model to one that allowed individuals to live with freedom, to follow their interests. They looked at technology for people with dementia, examining the possibility that it would help people stay calmer, happier and avoid the problematic antipsychotics that many use to keep people quiet. Or the physical restraints, to keep them still.

Knowlton approached the Centre for Aging + Brain Health Innovation associated with Baycrest in Toronto. She was interested in participating in its research projects, part of its Industry Innovation Partnership Program. CABHI, as it is called (pronounced cabee), describes its program as "an opportunity for companies around the world to accelerate their disruptive senior care innovations by testing them in a real-world opportunity."

Trial sites are found across North America, in long-term care homes, community care, hospitals, memory clinics and day programs. Before applying, CABHI connects the industry players with tech companies to see if they can make a match. "Like dating," Knowlton says.

Around the same time that Knowlton reached out to CABHI, Tara Kruse was at work as a server in a downtown Buffalo restaurant. Armin St. George and his business partner, John Adamo, arrived on a March evening, holding



court at their table for four hours, celebrating Adamo's 75th birthday, discussing life, aging, technology and the virtual reality experience of Armin's mother, Genevieve St. George.

A few nights later, Kruse waited on a couple from Toronto, and after learning of their professional connection to CABHI, she mentioned the owners of a local company who were interested in virtual reality with spatial sound in research for the elderly. She described Armin's story about his mom and her happiness after visiting the virtual forest. The next time Armin and Adamo returned for dinner, it quickly became clear that Kruse shared a mutual interest in medical education. She was in school studying to become a physician's assistant. Armin called it serendipity. Armin and Adamo offered Kruse a job. It worked out well.

Adamo was a friend of Armin's mom; sometimes they wrote poetry together. The two men became business partners in the late 1970s, involved in arts, music, advertising jingles, marketing or the creation of fine food, as restaurateurs. But these days they focus on Crosswater, their company that produces virtual reality, including teaching videos for many of the University of Buffalo's medical instructors.

It was Kruse's fortuitous restaurant meeting with the CABHI people that ultimately led to the meeting with

Knowlton and the discussion about Crosswater Digital Media playing the role of tech partner in Primacare's application for 2018 research funding. After an initial connection with a VR company didn't work out, CABHI sent Primacare three more options. Knowlton and her team spent an afternoon interviewing each of those potential matches. Crosswater was one of them.

Kruse, Crosswater's new medical content director, drove with Armin and Adamo to London, Ontario, for the interview with Knowlton and her team. It turned out to be a meeting of the like-minded. The group discussed the possibilities that virtual reality, combined with Adamo's instrumental compositions and Crosswater's spatial audio sounds, could take people with moderate to severe dementia to a peaceful place, tapping into memories, creating a relaxation that pharmaceuticals, with nasty side effects, could never match.

Knowlton focused on the potential outcomes of their proposed study. Would it help residents relax, rather than grow angry, depressed or aggressive? Could it lessen the use of antipsychotic medication given to people with dementia? Would it help people calm down at the end of the day, enabling a deeper sleep? Could it lead to greater contentment? Make life easier for workers? Or create a fun, happier experience, enticing families to visit more often?

Knowlton didn't commit, not that day, although it felt as though the meeting would end with a swipe to the right, as the kids say, a match and an agreement to work together on Primacare's application. [LTC](#)

*This article is an excerpt from Happily Ever Older: Revolutionary Approaches to Long-Term Care by Moira Welsh. ©Moira Welsh. Published by ECW Press Ltd. [www.ecwpress.com](http://www.ecwpress.com)*

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