

Our vision is a world where all care homes are great places to live, die, visit and work.

## Learning and Impact Framework

### Overview

This briefing describes the My Home Life Learning and Impact framework. As highlighted in previous briefings, the challenges that care homes face are encountered in many related areas of professional practice and this framework may be of interest to others seeking to affect and evidence transformational change.

### Our Learning Ethos and the My Home Life Leadership Support Programme

The My Home Life approach to learning is inquiring, relationship-centred, appreciative and collaborative. We seek to *understand and evidence* how we contribute towards changing behaviours that improve the quality of life for everyone in care communities. Our one year leadership support programme combines intensive workshops with monthly action learning sets and is designed to enable care home managers to empower staff and to foster relationship-centred cultures. This model promotes ongoing learning, through a continuous loop of inquiry, in which we stay curious and ask good questions and think about well-informed risk taking and experimentation. As we encourage each other to try out and review new approaches to practice development, we learn, adapt and innovate. In taking an appreciative approach, we support each other to reflect on day-to-day activities, and to recognise and work creatively to build on practices that work well. We know that appreciative inquiry can be transformational where it focuses on first changing how people think, instead of what they do. This suggests that learning and change can happen in an instant and that a momentary insight or encounter can open up

new questions and alter how we think and act. Our approach to learning seeks to 'capture' such moments of insight and reframing; these are important to give us confidence that changes in practice can be sustained. This promotes the use of continuous feedback and evidence to create self-reinforcing learning cultures and helps to fully understand both what we are able to achieve and how we did so within each care setting.

For us, 'evaluation' is not a laborious, add-on or solely end of programme activity, but is an approach to collaborative learning that is part of everything we do.

### The Ripple Effect

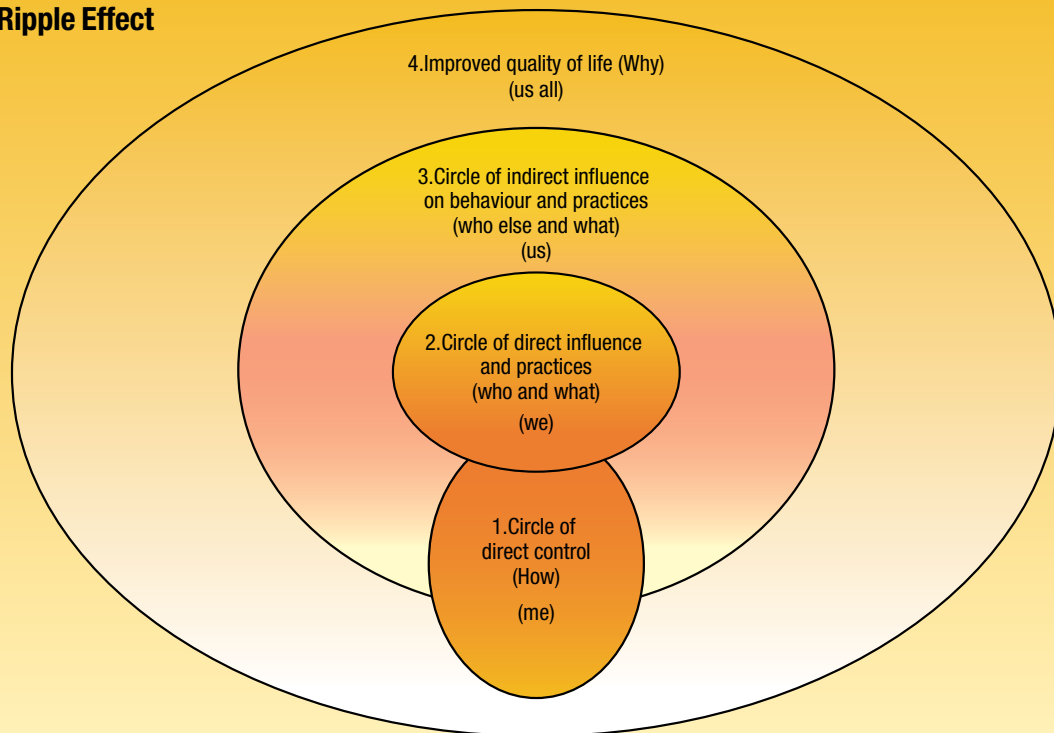
The metaphor of a 'ripple effect' conveys how we expect development to occur and where we might realistically expect to see evidence of influence. This is a shorthand for our 'theory of change' - that developments influenced by the leadership support programme happen through a series of steps or ripples that start with the individual participant. This learning influences other individuals, teams and the wider context in which care homes operate through a series of 'circles of influence'<sup>1</sup>. These circles can encompass, most immediately, those living in, visiting and working in the care home. Outcomes are also influenced and mediated by organisational policies and procedures, the local community, the wider health and social care system, the regulatory system, public policy and societal expectations.

In reality, change is not straightforward and linear; it is a messy process that occurs at different rates, amongst the different

1. Montague, S. (2002) Circles of Influence: *An Approach to Structured, Succinct Strategy*. Available at: [http://pmn.net/library/Circles\\_of\\_Influence\\_An\\_Approach.htm](http://pmn.net/library/Circles_of_Influence_An_Approach.htm)



**Figure 1: The Ripple Effect**



'circles of influence', which are dynamic and interconnected. This complexity, coupled with the ever changing policy and operational context in which care homes operate, highlight both the difficulties of directly attributing change to the programme itself and the false hope and sense of security that such an ambition would engender. Whilst the developments generated by the programme can and do make important contributions, many other influences and results occur within and across the wider systems of which care homes are a part. As we move beyond the closest circles of influence, the effect of the programme will be weaker, more indirect and more complicated by other multiple influences. This makes it harder to show the specific contribution that the leadership support programme makes and highlights the need to extend the collaboration more broadly.

Figure 1 shows these 'circles of influence' and can be used with stakeholders to begin a dialogue about operational and strategic outcomes and the different contributions being made towards them.

### **Mutual Inquiry and Mutually Reinforcing Contributions**

Our approach seeks to be practical and to engage both leadership support programme participants and other stakeholders in a dialogue about learning and change across wider systems. We recognise the commissioning and funding imperatives to demonstrate outcomes and to show how the programme improves care; we see learning as an opportunity to develop and share a fair and credible story of the contribution that the programme makes to quality improvement.

For this to happen, we expect participants to try things out, share, record and bring staff and others on board. Equally, providers must be willing to give 'permission' to try stuff out and be open minded. Commissioners in turn must be clear and honest about the enablers and barriers for system change.

**Ultimately, this must be a mutual inquiry as together we seek to examine the difference we each can make and explore how we can continue to work collaboratively towards improved quality of life in care homes.**

