

How can we support care homes to respond to the future needs of our frail older population?

A resource to enhance positive engagement with care homes for quality improvement, created by *My* Home Life.

The future need for care homes

Even with the development of alternative forms of care and support for older people, the number of care home beds is likely to double over the next 30 years in response to demographic changes¹. In the future, we are also likely to see care homes providing more specialist services and, with our investment and support, they may be able to deliver a broader range of care options that better meet the needs of older people and avoid unnecessary and potentially traumatic and costly episodes in hospital.

Despite commonly held negative assumptions about care homes, there is evidence that they provide a positive option for some of the most vulnerable older citizens in our society². The general lack of trust in care homes, held by public and professionals alike, has a significant impact on practice. It is not easy for care homes to deliver real improvement in systems that engender fear, are control-based, and often blame-orientated.

What works?

Professional support for managers!

My Home Life has learned that when managers are offered regular and professionally facilitated support, they are much more able to take forward focused quality improvement2. This type of support helps managers to reflect upon their practice, share their challenges and learn from each other, develop new ways of working and act as positive role models. Our research also demonstrates that many of them then feel more resilient and more confident in their work and so are more able to work collaboratively with external professionals in taking forward a shared agenda for change.

What works? Better partnership working!

Historically the care home sector has typically not been fully involved in setting the agenda for quality improvement. More often than not they feel 'done to' in terms of instructions, guidance, and policies from commissioners and inspectors, rather than, an active stakeholder in conversations about what needs to happen.

What works? Focusing on the positive!

Where statutory bodies can come together with care homes on a regular basis to identify a shared vision for quality, based upon what individuals 'want' and 'what works' in care homes, this can help restore trust and positive engagement. From this, a broader conversation can take place about what is realistic and achievable and how the wider statutory and community organisations can support care homes to make it happen.

¹Nat Lievesley, N; Crosby, G; Bowman, C; Midwinter, E (2011) The changing role of care homes. London: Centre for Policy on Ageing and Bupa

²Owen T and Meyer J (2013) My Home Life: Promoting quality of life in care (homes, York: Joseph Rowntree Foundation (available at: www.jrf.org.uk

Step 9: Establish some ground rules

Explain the broad aims and its potential influence. Establish 'ground rules' by inviting Group members to identify what they need from each other in order to feel safe and supported to talk openly and honestly about the challenges and to explore the possibilities. For instance, being committed to attend, respecting confidentiality, valuing different perspectives, reflecting on own learning and linking this to action.

Step 10. Develop a partnership agreement

Explore within the Group what positive partnership working means to them (set of principles and behaviours), drawing from their own experience? Write this up as a partnership agreement and invite everyone to sign it.

Step 11: Consider the evidence base for best practice in care home

Open up a dialogue about creating a shared agenda for quality improvement in care homes. Refer to the *My* Home Life Vision for best practice (see over-leaf), which is evidence-based and relationship-centred.

For each of the *My* Home Life themes, focus positively on:

What is currently working well? What will it look like at its best?

Step 12: Link to action

Consider next 'What more needs to be done to make this happen?' Identify which agencies are best placed to deliver the actions. If the agency is not represented in the Group, invite a volunteer to follow up the discussion with the agency and ask them to join the Group, if appropriate.

Step 13: Invite feedback

Invite participants to share how they felt about the meeting and what they will take away from it (action and/or learning point).

Step 14: Follow up

At the next meeting, revisit and amend (if desire) the ground rules/partnership agreement. Invite participants to report back on their actions from the last meeting the last meeting. Consider what further work needs to be done to meet the shared vision for quality improvement.

Final word

In these challenging times of limited budgets and high pressure jobs, the work of the Group should not feel like an added burden. Help the group stay positive by allowing expression of feelings, revisit their core values and purpose and help them to recommit to the shared vision. It is this commitment that will create the potential for real sustainable change over time.



Creating a process of positive engagement with care homes for quality improvement

Volunteers

Based upon the work that My Home Life has undertaken in a number of local authorities, we have created guidance on how to develop a positive process of engagement with care homes that can lead to sustainable improvements.

Step 1. Getting senior level buy-in

Get the buy-in and support from the top (e.g. Director of Adult Social Care, the Clinical Commissioning Group, acute hospital and/or the Health and Wellbeing Board) to set up a Care Home Strategy Group. This should give the Group the status it needs to make a difference to quality improvement in care homes.

Step 2: Getting the right people around the table

Include care home managers from the start. They are pivotal to quality improvement and need to be treated as equal partners. If you work in an area with hundreds of care homes, identify and begin with a small group only.

Step 3: Share your ideas and get advice

Ask the care home managers' for advice about when the Group should meet, how frequently, likely costs incurred and how best to run the meeting. Explore if they need additional support to help them develop their confidence and communication skills in dealing with external agencies.

Step 4: Work with the enthusiastic

Identify in the local community those who are "champions for change" and are passionate about changing the quality of life for older people. Do not invite people because you think you should.

Step 5: Consider the full range of stakeholders

Consider the value of inviting stakeholders from the following areas:
Care Quality Commission
Commissioning – health and social care
Contract Monitoring
Allied Health professionals
District Nurses and Community Matrons
General Practitioners
Healthwatch
Safeguarding

Step 6: Involve residents and relatives

Explore how residents and relatives might be involved either directly in the Group or have their views heard by the Group.

Step 7: Appoint the right chair

Identify the right person to chair and lead the Group. S/he needs to value the role of care homes and have strong interpersonal skills in order to appropriately clarify the purpose of the Group and set the tone for successful partnership working.

Step 8: Setting the tone

Create an environment that supports an open and honest, no-blame culture between the different stakeholders. Arrange the chairs in a circle without tables to enhance communication and pay attention to helping participants to establish a relationship with each other by introducing themselves to each other and sharing how they are feeling. Meetings should be focused, not too long, but also not rushed.

The evidence base for quality of life in care homes

My Home Life is a UK-wide initiative promoting quality of life in care homes for older people, through relationship-centred and evidence-based practice. It is led by City University in partnership with Age UK and Dementia UK. This resource to enhance positive engagement with care homes was created with funds from The City Bridge Trust.

My Home Life has worked with over 60 academic researchers from universities across the UK to develop an evidence base for quality of life in care homes. The review of evidence explored 'what residents want from care homes' and 'what practices work in care homes'.

The evidence was found to cluster around 8 best practice themes (right), which together offer a vision for care homes, a framework from which to deliver quality of life. The vision is underpinned by 'relationship-centred care' that recognises the importance of seeing the care home as a community where the quality of life of residents, relatives and staff are all crucial to improvements in practice.

Other resources are free to download from the MHL website: www.myhomelife.org.uk

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The My Home Life Vision

Maintaining Identity

Working creatively with residents to maintain their sense of personal identity and engage in meaningful activity.

Improving Health & Healthcare

Ensuring adequate access to healthcare services and promoting health to optimise resident quality of life.

Creating Community

Optimising relationships between and across staff, residents, family, friends and the wider local community. Encouraging a sense of security, continuity, belonging, purpose, achievement and significance for all.

Supporting Good End of Life

Valuing the 'living' and dying' in care homes and helping residents to prepare for a 'good death' with the support of their families.

Sharing Decision-making

Facilitating informed risk-taking and the involvement of residents, relatives and staff in shared decision-making in all aspects of home life.

Keeping Workforce Fit for Purpose

Identifying and meeting ever-changing training needs within the care home workforce.

Managing Transitions

Supporting people both to manage the loss & upheaval associated with going into a home and to move forward.

Promoting a Positive Culture

Developing leadership, management and expertise to deliver a culture of care where care homes are seen as a positive option.