

healthwatch

Sunderland



The Provision of Meaningful Activities in Fifteen Sunderland Care Homes

November 2015

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1: Introduction

What is Healthwatch?

Healthwatch England is the national consumer champion in health and social care. It was set up by the government to ensure that people's views around health and social care services are listened to and fed back to service providers and commissioners with a view to improving services.

There is a Local Healthwatch for every Local Authority area in England. Healthwatch Sunderland aims to be a strong local consumer champion working with our partners to support:

- People to shape health and social care delivery
- People to influence the services they receive personally
- People to hold services to account

We achieve this by:

- Listening to people, especially the most vulnerable, to understand their experiences and what matters most to them
- Influencing those who have the power to change services so that they better meet people's needs now and into the future
- Empowering and informing people to get the most from their health and social care services and encouraging other organisations to do the same

What is Enter and View?

Under Healthwatch regulations, local Healthwatch organisations have the power to Enter and View providers to enable our authorised representatives to observe matters relating to health and social care services.

The role of the authorised representative is to conduct visits to health and social care premises to capture the patient experience and make recommendations where there are areas for improvement or capture best practice which can be shared.

Enter and View is the opportunity for Healthwatch Sunderland to:

- Enter publicly funded health and social care premises to see and hear first-hand experiences about the service
- Observe how the service is delivered, often by using a themed approach

- Collect the views of service users (patients and residents) at the point of service delivery
- Collect the views of carers and relatives
- Observe the nature and quality of services
- Report to providers, the Care Quality Commission (CQC), local authorities, Commissioners, Healthwatch England and other relevant agencies

Enter and View visits can happen if people tell us there is a problem with a service but equally, they can occur when services have a good reputation, so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Purpose of this research: understanding the importance of meaningful activities in Sunderland care homes

Having a meaningful life with strong relationships and purposeful activity is a central part of an individual's identity. As people become more vulnerable and increasingly rely upon the care of others it is crucial that meaningful activity is supported in a way that meets individual needs, individual personality and individual history.

Healthwatch Sunderland wanted to gain an understanding of how meaningful activity is supported within Sunderland care homes. The aim of this work was to:

- Identify innovative and creative practice
- Identify barriers to promoting meaningful activity
- Identify ways to support the implementation of the recommendations from this report

Acknowledgements

The Enter and View Team would like to acknowledge the welcome and open approach of the Sunderland care homes. All fifteen homes we approached supported our visits. We would like to thank the residents for allowing us into their homes as well as the staff at all levels who took time out to answer our questions.

2: Methodology

Fifteen care homes were selected from a list of local authority commissioned services. The care homes were chosen on the following basis:

- Three homes were chosen from each of the five locality areas (Washington, The Coalfields and the East, West and North areas of Sunderland)
- Each care home selected was from a different provider

An initial pre-visit to each care home was carried out to explain the project, understand the needs of the residents, arrange timescales, and arrange the visits in a way to cause as little disruption in the daily routine as possible.

Trained Healthwatch Sunderland authorised representatives were selected to carry out the Enter and View visits. An authorised representative is a volunteer who is trained in enter and view methodology so that they can effectively capture the patient experience. Each team on average consisted of two or three people chosen from three staff members and one of seven authorised representatives.

Standard questions were asked of:

- Managers
- Activities Coordinators
- Care staff

Family carers were given the chance to fill in a questionnaire left at the care home and whenever possible were spoken to during visits. The Enter and View team spoke informally to residents, many of whom had dementia, and observed a range of activities taking place within the care home. On several occasions the Enter and View team were also shown around the services. This informal approach allowed the team to observe staff and residents in the care home environment.

The fifteen Care Homes visited were:

Ashbourne Lodge	Bryony Park	Elizabeth Fleming House	Princess House	The Pavillion
Ashlea Lodge	Dairy Lane Care Centre	Glenholme House	Sycamore Care Centre	Washington Grange
Belle Vue	Donwell House	Holy Cross Nursing Home	The Old Vicarage	Washington Manor

3: Summary of findings

Definition of meaningful activities

Meaningful activity includes physical, social and leisure activities that are tailored to the person's needs and preferences. Activities can range from daily living activity such as dressing, eating and washing, to leisure activities such as reading, gardening, arts and crafts, conversation and singing. It can be structured or spontaneous, for groups or for individuals, and may involve family, friends and carers, or the wider community. Activity may provide emotional, creative, intellectual and spiritual stimulation. It should take place in an environment that is appropriate to the person's needs and preferences, which may include using outdoor spaces or making adaptations to the person's environment (adapted from Social Care Institute for Excellence (SCIE) guide 15, Choice and Control , Living well through activity in care homes: the toolkit (College of Occupational Therapists) and expert consensus).

The embedding of meaningful activity within care homes

All managers had a full understanding of the principles and importance of meaningful activities as defined by College of Occupational Therapists.

“Meaningful activity provides stimulation which in turn increases self-esteem, appetite, independence and self-worth”. Care Home Manager.

“It provides a sense of worth and stimulation, purpose and belonging”. Care Home Manager.

All of the managers that we spoke to said that providing meaningful activities was the responsibility of all staff, not just the Activities Coordinator and that meaningful activity was embedded into the daily routine of the care home. The Enter and View team collated the following information:

- Seven Activities Coordinators said that meaningful activity was a responsibility shared by all staff and they were fully supported.
- Three Activities Coordinators said that they were responsible for activities and saw the lack of support from other care staff as a barrier. For example, in one care home a staff member said it ‘wasn’t their job’ to be engaged in activities.
- Three Activities Coordinators said that care staff help out when they can but this was limited due to other work responsibilities.

The importance of the Activities Coordinator for good outcomes around meaningful activity

Only two of the care homes visited did not have an Activities Coordinator (one was awaiting the start of a new Activities Coordinator). The role of the Activities Coordinator was central to the delivery of the activities.

“It is an essential role; we could not afford to lose our Activities Coordinator”. Care Home Manager

‘Yes, my mother used to do activities but with her dementia getting a lot worse she can’t understand how to do a lot of things now. But the Activities Coordinator’s help her and they are a credit to the home for all their help and support they give to the residents’. Family Carer.

The Activities Coordinators we met were highly committed to their role, enthusiastic and really wanted to improve the lives of residents.

Most of the Activities Coordinators we interviewed had themselves been employed as care workers in the past before taking up their present roles in the care home. In a number of the homes we visited the Activities Coordinator had been selected internally.

It was unclear to the Enter and View Team how well, often highly committed Activities Coordinators, could reach the needs of the majority of residents within their home because of the numbers of residents:

One home which did see meaningful activity as the role of all staff and important for all residents included the Activities Coordinator visiting every resident in the morning to speak about the day ahead. For those confined to bed the Activities Coordinator would arrange for their favourite videos or TV show to be put on if requested.

At another home the Activity Coordinator expressed frustration about how difficult it was to meet the needs of so many residents where they were the primary person tasked with providing and arranging social activity.

Meeting the needs of people with dementia

A great deal of activity was designed for people with dementia, specifically around stimulating memory, armchair exercise, singing and much more (range of activity provided below).

There were examples of care homes that made enormous effort to become dementia friendly. For example, developing themed activity rooms (beach, garden, vintage tea party) with sensory and audio equipment.

One home had a box of homemade props they would use to create a 'pop-up' room when required. These could be used for special occasions such as birthdays, traditional tea party or Royal celebrations etc. In several other homes, the upper level of the building was for people living with advanced dementia. The corridors were bright, wide and well decorated. There was plenty of art, sensory aids and fixtures on the walls designed to stimulate memory.

People with dementia also took part in community visits specifically to stimulate memories from their past. This included places of personal historical significance, familiar landmarks and sometimes these visits included family members.

Training around meaningful activities

The Enter and View Team are aware that training around meaningful activity has been provided in Sunderland in recent years. In 2013, The Tyne and Wear Care Alliance offered to provide twenty places for a free two day training course for Activities Coordinators in care homes across Sunderland -

QFC (Qualifications and Credit Framework) Level 3 Certificate in Activity in Social Care.

Only five of the homes we visited had been involved in the offer of training (some of the Activities Coordinators may not have been employed in those homes in 2013).

One Activities Coordinator said they had received formal training specifically around meaningful activity.

Two care homes provided Our Organisation Makes People Happy (OOMPH) sessions for residents and to support this activity the Coordinators would have received training.

Five Activities Coordinators mentioned receiving Dementia Awareness training which would give a level of understanding that would influence how meaningful activity is provided. For example, reminiscing sessions and communication skills.

“Training for all staff regarding activities would be beneficial. They (staff) need to be more aware that they have a role to play too - it’s not just me”. Activities Coordinator

Personalisation and meaningful activities

In the field of health and social care, personalisation focuses on placing the individual at the centre of their care with an understanding that they and their family know best what their needs are and how to meet them.

‘This is not possible due to my mother’s advanced state but she believes that she is doing a lot of things in her daily life. I think her experience is real to her and she tells me she is happy when I ask’. Family Carer.

‘The manager had ... created a person centred approach to care. The environment was warm and friendly... (and there)... appeared to be a personal relationship with residents all of whom live with various stages of dementia’. Enter and View Team.

Personalisation can be as significant as supporting a full social life or as small as supporting a resident in a care home to decide for themselves when

they should go to bed - it is about a care plan being designed around the needs of the individual rather than the needs of the service.

The Enter and View Team felt that the degree of personalisation for individuals varied between homes and makes the following observations:

- Where meaningful activity was embedded in the care home personalisation was more clearly demonstrated.
- Every resident we spoke to who articulated an opinion about the activities on offer, apart from one person, was positive about the experience.
- There was a range of ways that homes collected information on individuals. A personal history file or link to the individual care plan was commonly used to ascertain what kind of activity a resident liked or was able to do and family and friends often helped to build up a personal history of the individual that staff could use for future planning.

'The home had a one page profile...which was really visual and easy for staff to get a picture of resident's likes and dislikes'. Enter and View Team

'Yes full assessment done and I regularly meet with staff to review and update the plan'. Family Carer.

'The manager had ... created a person centred approach to care. The environment was warm and friendly... (and there)... appeared to be a personal relationship with residents all of whom live with various stages of dementia'. Enter and View Team.

'Yes suggestions are welcomed'. Family Carer.

On two occasions the Enter and View Team witnessed practice where it was unclear how well these approaches were used. For example:

'No activity timetable was on show where residents and family could see what was on that week and the Activities Coordinator said they didn't have one'. Enter and View Team.

'The manager chaired a meeting with residents and two visiting family members to discuss a booklet designed to record a person's life history and interests. The booklet was a tool to support meaningful activities. When asked to fill in the booklet the residents seemed unable to grasp what it was for? The Enter and View Team felt the booklet should have been completed by family and friends, the resident and with the carer support in order to help develop a rounded picture of an individual's life. The overall impression from this meeting was that the planning of meaningful activities could certainly be improved'. Enter and View Team.

All of the managers or Activities Coordinators that we spoke to said that their activities were reviewed. This was usually done through regular meetings with residents and staff in which family members were invited to attend and discuss the activities. The most common sense method of evaluation undertaken was observing which activities the residents responded positively to and noting this down in record sheets to build up a picture of a person's likes and dislikes.

During the Enter and View visits many residents were talked to informally. However there were 11 residents who could answer more structured questions:

Has anyone in the home asked you what activities you would like to do?

7 residents said yes

2 residents said no

Have staff helped you do some of the things you have said you would like to do?

7 residents said yes

4 residents said no

Do your staff help you get involved with activities?

9 residents said yes

2 residents said no

Are you able to help with the running of your home? E.g. laying tables, preparing food, cleaning

6 residents said yes

4 residents said no

The involvement and opinions of family carers

The Enter and View Team left approximately 10 self-addressed carers questionnaires at each care home, around 150 in total. 15 carer's questionnaires were returned.

Family and friends were mostly satisfied with the range of activities on offer, the opportunities to participate and being able to make suggestions about the activities that might benefit their relatives. The following gives the responses to four of the questions in the carer's questionnaire:

1: Does your relative or friend have opportunities to get involved in activities and have responsibilities around the home?

- 13 people replied yes
- 2 people said no

2: Are you happy with the range of activities on offer?

- 12 people replied yes
- 3 people said no

'I am sure that if I did make any suggestions to benefit the residents it would receive consideration from the staff of the home'. Family Carer.

'My mother has advanced Alzheimer's and every effort is made to involve her in many activities, she enjoys helping at mealtimes and collecting cups and plates. If it were not for this level of stimulation, I think she would be much less responsive. (These are some of the activities she is involved in)... music, baking, pamper times, hairdressers, chiropody, bingo, live music, themed days such as VE day, rock 'n' roll day, tea party. There is a varied programme on a daily basis'. Family Carer.

3: Have you been asked about your relative or friend's interests and wishes in respect of activities?

- 11 people said yes
- 4 people said no

'Yes, she is always telling us about what she's done during the day and seems to enjoy it. If she doesn't take part she will watch but she likes to do this'. Family Carer.

4: Do you feel able to make suggestions or comments about the activities that might benefit your relative or friend?

- 15 people said yes

Some family members were proactive in providing items that their relatives could use for activity or stimulation. One family member did her own

research into dementia related activities and brought in a doll for her relative to hold as this was thought to help her relative (see section on Range of Activities below).

“My mother likes to flick through newspapers and magazines even though she doesn’t read them - there is none anywhere around the home so we bring in old ones for her to browse through”. Family Carer.

‘Yes very much so - they are offered different activities each month and we are asked what we want and what our relatives would like’. Family Carer.

‘The Activities Coordinator takes the time to speak to families and residents to see if anything can be improved upon’. Family Carer.

“ (The Activities Coordinator) is constantly looking for new things to stimulate resident’s interests”. Family Carer.

‘They never take mum out into the garden’. Family Carer.

Range of meaningful activities

One of the purposes of this report was to **identify innovative and creative practice**. Below is a range of some of the activity provided in the homes. This list is by no means exhaustive.

Examples of activity

Most of the care homes had some link with the local community such as church and school choirs visiting at specific times of the year.

Intergenerational activity which involved school children coming into the home was generally thought to be beneficial to the residents.

Many of the homes also held fayres and open days where the local community was invited to attend.

Community Visits: locations such as museums or other attractions, local coffee or tea shops or community centres

Sensory Rooms: a room designed to stimulate emotional, memory and social responses. In the context of care homes for elderly people and people living with dementia, they are generally themed around things like historical events, items to stimulate memory, themed rooms such as beach or garden. The aim is to create a comfortable and stimulating environment that will encourage interaction.

Entertainers: some care homes used a list of entertainers such as singers that visited the homes. Entertainers could provide group activity for all residents.

Our Organisation Makes People Happy (OOMPH): The Activities Coordinators in three of the care homes visited were trained to deliver OOMPH sessions. This activity is designed to offer innovative, personalised exercise and activity sessions to improve physical mobility, social interaction and mental stimulation.

Exercise Sessions: in addition to OOMPH sessions, other forms of exercise to support residents were promoted. Examples include, armchair exercises in the 'sit and be fit' tradition and the use of stimulating aids and props such as pom-poms, ribbons and flags to encourage arm movement.

Reminiscing: Memory stimulation through reminiscence activity was a common theme running through most of the homes visited. The methods

adopted varied but music and song designed to invoke memories was a commonly used variant on the reminiscence theme. Other activities involved quizzes or games. For example, one Activities Coordinator would place an object (from the past) in the centre of the room and those residents taking part were asked to shout out what it was and what it was used for. Other forms of informal or personal activity was also used by Activities Coordinators, such as simply chatting about the resident's experiences or aspects of their life history. One Activities Coordinator told us that by learning about a resident's past, they could use that knowledge to good effect. For example, when they were driving the home's mini bus back from an outing they would make a small detour and drive past local landmarks (churches, schools etc.) that were a source of fond memories for a resident on the bus.

Doll Therapy: a number of care homes used lifelike dolls, cuddly toys or prams to help keep residents living with dementia stimulated. The Activities Coordinators said that this helped when some residents were agitated or stressed. One home, where all of the residents were living with dementia, had a room furnished like a living room and contained dolls, teddy bears, and shopping items such as baskets etc. that residents could pick up and handle.

Singing for the Brain: This was a commonly used activity for people living with dementia. Activities Coordinators and managers commented that when memories are hard to retrieve, music can be an important and enjoyable aid.

Animal Therapy: Three of the care homes visited had used animal therapy with residents living with dementia. This involved bringing various animal types into the home and residents could groom or hold the animal in a group setting. Staff said that this form of therapy can reduce agitation for those living with dementia.

Aromatherapy: Two of the care homes visited had a therapist visit regularly to give residents hand massages. This was viewed as an individual or personal activity.

Seasonal activities: Most care homes held Christmas parties or other activities where family and friends could be involved. School choirs coming into the home was also a common activity.

Baking and cooking: In a small number of the homes, some residents were involved in cooking and baking with kitchen staff.

Quizzes and games: Games such as bingo and quizzes were popular and commonly used for group activities. Some Activities Coordinators would stage their own version of popular television quiz shows using props and resources.

4: Barriers to meaningful activity

Several members of staff mentioned that they were limited to the number of residents they could take out into the community. This was due to a number of reasons, including limited seating on a mini bus and staff to resident ratio whilst on community visits.

Several managers and Activities Coordinators cited:

- Availability of staff to support with activities
- Funding to support activities

Having a high turnover of staff created problems with continuity. One manager commented that it was her low turn-over of staff and their commitment over many years which had allowed such a 'family atmosphere' to develop.

Lack of training and understanding of the importance of meaningful activities across all staff was another factor.

In some cases there was a lack of specific dementia awareness training around meaningful activity

Some Activities Coordinators viewed the approach of other staff as a barrier - 'it's not my job'.

5: Recommendations

Recommendations for Care Homes

- If not already done so, then understanding, providing or assisting with meaningful activities should be built in to the job description and person specification for all care home staff.
- Meaningful activity should be embedded into the culture of the care home so that ‘meaningful activity and engagement is everybody’s responsibility’.
- The status of the Activities Coordinator should be raised to reflect the importance of both personal and group activity in the wellbeing of residents in care homes.
- A formal training qualification focusing on activity should be a mandatory requirement for all Activities Coordinators to undertake. The training should include awareness of the benefits of and approaches to personal activity for those living with dementia.
- All staff should receive mandatory training that includes the awareness of and approaches to personal activity for all residents.
- Care home managers should explore the possibility of using volunteers to help deliver some meaningful activities. Volunteers could assist with communal activities within the home and activities in the community.
- Where possible, family, relatives and friends should be encouraged to play a greater role in the care of the person they visit in the care home by being more involved in meaningful activities. This could include bringing in meaningful items such as magazines, memory boxes and other personalised items for their relative, as well as supporting them on community visits.
- An information resource pack explaining the approach to meaningful activities, in particular supporting people with dementia, should be

provided for all residents and their families. This will give a context to activities such as OOMPH training, sensory rooms, doll therapy and various other stimulation aids which will aid the family's understanding of why these methods are used.

Recommendation for Commissioning Services

- Partners should be identified to establish a city-wide forum where Activities Coordinators could discuss and share best practice and problem-solving relating to meaningful activities.

“I would like some kind of meeting with other Activities Coordinators to bounce ideas around as you can get in a rut on your own”. Activities Coordinator.

Conclusion

The provision of meaningful activity is an important function of life within a care home setting. The Enter and View Team have found many examples of excellent practise and have particularly noted how enthusiastic the Activities Coordinators are and how they impact upon the well-being of residents. The position of Activity Coordinator has become an essential role within the care setting. This report essentially makes recommendations about how to support and enhance the role of the Activities Coordinator: ensuring meaningful activities is ‘everybody’s business’, supporting increased networking, promoting related training and recognising the status of the role.

This report will be shared with the Local Authority Commissioning Team, and the Care Home Providers to ensure this learning is embedded in future activities.

Distribution List:

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Alzheimers Society

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Sunderland Clinical Commissioning Group

Care Quality Commission

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Care Home providers

