



Promoting Quality in Cheshire East Care Services



Proposal to Cheshire East Council

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1. Introduction

This proposal provides an outline of activity to be delivered by *My Home Life* (MHL) to support transformation in quality of life in Cheshire East Care Homes. It follows early conversations with Sue Redmond, Sarah Smith and colleagues at Cheshire East Council. There was recognition that among the 97 care homes in the area, some great work had been undertaken through the new Quality Assurance Team but additional investment would be help to ‘notch up quality’ in terms of:

- Supporting leadership and engagement with best practice in care homes.
- Supporting an integrated approach to improving dialogue across care homes and the wider system in relation to improving system flow to/ from hospital, improving relationships across professionals and potentially exploring the wider role that care homes could play in supporting the needs identified within the community.
- There was also some interest in taking forward community engagement in care homes through the Friends and Neighbours (FANS) model.
- While there was a view that care homes would be the first area of focus, there was potential interest in delivering leadership support to homecare and extracare services but possibly later on.

In response to these identified needs, the proposal offers three strands of activity:

1. Leadership Support to care home managers in Cheshire East

There is national recognition that leadership of care home managers is pivotal to both the quality of life and quality of care that is delivered. My Home Life proposes the delivery of Leadership Support programme to care home managers based on a model that has been delivered to over 900 managers across the UK with proven outcomes.

2. Integration – whole systems support

Quality of life in care homes relies on positive support and partnership between care homes and the wider health, social care and housing systems. Having invested in the leadership of care home managers, this strand helps to ensure that they are supported to

offer a positive contribution to meeting shared priorities and concerns of the wider health and social care system (e.g. supporting system resilience, integration, partnership).

3. **Community Engagement:** My Home Life is developing a new initiative called 'Care Home Friends and Neighbours' based upon some innovative work being delivered in Essex. Our work here will explore the potential value of bringing the initiative into East Cheshire and potentially helping third sector organisations to play a brokerage role to support stronger links between care homes and the wider community.



2. Impact

"Essex CC has been working with My Home Life for the past four years. It has been invaluable to us. It has enabled the 90 care home managers who have been through the programme to understand and put into practice the evidence base for quality in care homes and create real sustainable improvements for their residents, relatives and staff. There is now a movement of managers who have found new energy and capacity to ensure care homes are a positive option for older people. Through the broader community development work of My Home Life, we are helping to open up a dialogue between care homes, health and social care professionals to ensure that they are working collaboratively to deliver improvements."

The work will help deliver some of the key policy drivers currently being developed in Government.

- ✓ Promoting quality of life (wellbeing)
- ✓ Integration of health and social care
- ✓ Better integration and partnership working with NHS
- ✓ Compassionate and dignified care
- ✓ Personalisation
- ✓ Workforce and leadership development
- ✓ Dementia friendly communities
- ✓ Community engagement
- ✓ Stronger commissioning to shape future markets

The work here will demonstrate the following QIPP outcomes (as gathered through self-report from professionals and practitioners):

Quality

- Improved quality of life for older people, relatives and staff.
- Care home managers feeling equipped to lead change and improve quality based on relationship centered care and personalised approaches.
- Care home managers feeling more like a part of local health and social care teams, working together towards a shared vision of quality and asking for help rather than waiting until crisis point.

Innovation

- Care home managers have access to national networks and are part of a local collaboration of care homes, they share best practice across homes rather than ‘holding the competitive advantage’.



- Teams from the public sector have changed the way they work with care homes from 'monitoring' to actively supporting 'quality development' in care homes.
- Care homes work together to try out new approaches to delivering care and support to older people with potential added benefits to the wider health and social care system.

Productivity

- Care homes involved in the programme are more confident, skilled and resilient to both deliver efficient care and to help reduce admissions to acute hospital environments.
- Care home managers are better able to work with others to support improvement, tapping into resources within the community.

Prevention

- Care home managers are better placed to 'nip issues in the bud', prevent problems from developing rather than allowing crises to occur.
- Care homes are more able to develop an offer around prevention of admission, early discharge and supporting people with dementia.
- Staff feel valued in what they do, connecting better with their role, and more motivated to 'go the extra mile'.

My Home Life can provide you with further data to demonstrate the impact of the work to date on request.

3. Leadership Support for Care Home Managers

Introduction

Care home managers are pivotal to the delivery of quality. They often work very long hours and operate within a highly stressful environment. Rarely are they offered support to develop professionally and lead change within the home.

Training programmes often have the tendency of taking staff away from their work and engaging on issues which are not directly linked to their normal day-to-day activities. The model we propose here is about ensuring that the learning brings individuals closer to their day-to-day work, helping staff to think objectively about the culture of care in their home and to work creatively, with support, to identify realistic solutions for improving voice, choice, and control and quality of life of older people, their relatives and the staff that support them.

My Home Life supports care home managers on a journey of voluntary self-development, so that they can be inspired to lead cultural change in care homes that makes care for older people more relational, personalised, dignified and compassionate. Our emphasis is on encouraging sustainable transformational change where staff are supported to *do things differently* rather than simply *doing different things*. We work with people wherever they find themselves on the journey of improvement.

Managers are telling us that our approach is completely different from anything else that they have experienced. They are demonstrating greater leadership and transformational skills leading to positive outcomes for residents, relatives and staff and a greater understanding of how their own management style can enable culture change in relation to voice, choice and control for their residents.

They are quickly seeing the benefits of small shifts in their behaviour/practices with regard to working with staff and relatives alike. Some managers now have the skills to influence downwards to their staff and upwards to their provider group/care home owners and across the wider health and social care system. Many managers have stated how, because they are more resilient, they are better able to move from ‘reactive management’ to pro-active

management in preventing staff problems or responding with greater speed/ quality to external requests and requirements (i.e. hospitals).

How it works

The 12-month Leadership Support Programme comprises four workshop days, seven action learning sessions and a completion day for groups of sixteen care home managers. The process has five stages:

a) *Launch and recruitment*

A large group of care home managers, deputies and stakeholders from statutory agencies attend the Launch. The event provides opportunities to:

- Gather information on ‘what’s working well’ and ‘what could be better in delivering quality in care homes’?
- Share the key research messages on delivering quality.
- Identify support needed from the wider system / community to support quality.
- Recruit managers who will go forward with the programme.

b) *Care home proprietor meeting*

An additional session may be held with owners / provider groups to help them engage with the programme, to understand the business case for investing in quality and examine how they can better support their managers’ capacity to drive forward real change in the care home. Following on from these sessions, managers will be recruited to the leadership support programme.

c) *Leadership Support Programme - four-day workshop*

During the first two months of the leadership support programme, each group of 16 care home managers come together on four occasions (2 x 2 day workshop sessions) to learn about the evidence base for best practice and the importance of relationships to ensuring quality. They examine their leadership style and consider their pivotal role as agents of change. These workshop days will help the Group reflect deeply on the skills and best practice required to transform the culture in their Care Homes. The work will have a specific focus on supporting older people living with dementia.

d) *Leadership Support Programme - Action Learning sessions*

Following the workshop days, the group of 16 managers are split into morning and afternoon sub-groups for monthly action learning will support participants to take forward changes in their homes through a process of action learning (seven day sessions in total). Managers will meet as a whole group for lunch discussions.

Action learning involves learning through action. It is a continuous process of learning and reflection, supported by colleagues, with an intention of getting things done. It recognises that individuals learn best when they learn with and from each other, by working on real problems and reflecting on their own experiences with the intention of achieving improvement and transformation in the workplace.

e) *Validation / Completion Day*

The Leadership Support Programme concludes with Validation and celebration. The day is important because it not only recognises the contribution made by the managers thus far but also encourages them to promote and sustain the programme.

Highly experienced Action Learning facilitators are trained and supported by the My Home Life Team at City University, to lead the sessions.

“We have made it less task-orientated and more about people” Manager, Essex

“The whole place is calmer. . . . more residents are referring to staff by name rather than shouting ‘nurse’ which some of them used to do. This is because there is better human engagement between residents and staff” Manager, Derbyshire

“We have seen more engagement between residents, helping to feed each other. Relationship is across the home. There is such an emphasis and feeling of family now” Manager, Kent

4. Integrated Care strand

Quality of life in care homes relies upon positive support and partnership between care homes and the wider health, social care and housing systems. Having invested in the leadership of care home managers, this strand helps to ensure that these managers to work in stronger partnership with the wider health and social care economy to take forward a shared vision and co-ordinated approach for promoting quality in care homes as well as meeting to meet wider strategic goals (e.g. supporting system resilience, discharge / admissions etc.). In particular, East Cheshire may wish MHL to help them support better partnership between care homes and the wider agencies to explore:

- ✓ What works well and what could be better in supporting hospital admission / discharge.
- ✓ How care homes may be able to offer more flexible services (such as 'step-up and step down' services) that will benefit older people living in the community and reduce the pressures placed upon hospitals.

My Home Life has significant experience in 'whole-systems' working that focuses on being appreciative – considering what works rather than what doesn't. This allows us to address shared issues and promote positive and equal relationships between care homes and the wider agencies in enabling a step-change in partnership-working and integration.

"My Home Life is assisting us in bringing about a cultural change in how we work with local residential and nursing home providers. The role of the council and health in working with providers is becoming clearer. Through facilitation by My Home Life, we have all begun to examine how we need to change in order to bring about better services for very vulnerable residents" **Ray Boyce, (former) Head of Older People's Services, London Borough of Southwark.**

We were delighted with the benefits offered to our homes through My Home Life. It helped the authority in providing a mechanism through which to explore some difficult issues such as improvements in discharge from hospital, access to a fuller range of health and social services, and protocols for accessing equipment. I would strongly recommend My Home Life and feel that it has much much more to offer – as the potential to build on its foundation is enormous, and the benefits clearly cascade down ... to the residents.

How it works

My Home Life will adopt the right approach in order to respond to the specific priorities and local context. That said the typical intervention comprises three stages:

1) Information is gathered

Information is gathered at the Launch and from managers undertaking the Leadership Support Programme. We do this to ascertain what support from the wider health and social care will enable care home managers to deliver quality of life to residents, relatives and staff in care homes.

2) Information is shared

Local commissioning teams across health and social care sectors explore and consider how the issues identified relate to their own strategic priorities. An initial plan is agreed for taking forward some key work that supports these priorities (i.e. how we reduce pressures placed upon hospital and offer greater quality to older people).

3) Whole-systems group for Change is created

Health and social care stakeholders come together with care home managers who are undertaking the Leadership Support Programme in an attempt to explore:

- What is currently working well?
- What would make it better?
- How can we make this happen together?

The outcome of this ‘discovery phase’ will be the emergence of a better understanding of the challenges and opportunities facing different stakeholders and a clear understanding of the small changes and large strategic changes that need to take place to deliver improvements.

The work is facilitated by My Home Life using a model called Appreciative Inquiry – a well established approach that helps deliver positive change. Those involved are supported to identify an Action Plan for change which is owned and taken forward by all stakeholders.

Different models of this strand have been adopted across the UK. Our intention is to convene half day meetings in the afternoon of some of the leadership support action learning sessions, so that managers attending the morning action learning sessions will be available in the

afternoon for these discussions with wider stakeholders.



5. Community Engagement

Existing work that My Home Life and others have developed supports the idea of **having a role of a connector between care homes and the wider community**. This connector, which might be a local charity or social enterprise, is identified and supported to foster positive and trusting relationships between care homes and their local communities. The connector gains the endorsement from public and private organisations to support implementation, and encourages care homes and community partners to understand each other better. A voluntary organisation acting in this connector role is able to navigate around the often-seen reservation of businesses and funding bodies about working directly with care homes (due to poor public image and around 75% care homes being run by private companies, making them ineligible for grants).

Recently, Essex County Council has made an investment into the My Home Life Essex Community Association to support greater community involvement with Essex's care homes and to support this they have established the Friends and Neighbours (FaNs) programme (<http://www.fansnetwork.org/>). Initial feedback has been very positive, and an evaluation is planned which will provide further details. MHL is exploring the transferability of this model to different areas and is currently working on a strategy for national rollout with MHLECA.

What is the FaNs model?

FaNs stands for Friends and Neighbours. Its ultimate aim is to help improve the quality of life available to older people living in care homes. It does this, firstly, by encouraging, supporting and helping people and organisations to be good 'friends and neighbours' to their local care homes and the people who live in them. Secondly, it offers practical help and support to care home owners and managers to build on existing links with their surrounding communities and make sure their residents benefit from the fan, the friendships and the opportunities that these links can open up.

Fans is not an organisation in its own right, but a movement of people who are united by a shared belief in the aims and values of Fans and who choose to take an active interest in the wellbeing of care homes and the people who live in them. Fans can be members of any

organisation or none. They are not required to make any specific commitment and can make their contribution in whatever way suits them.

What will we offer?

Across the country, organisations are thinking about how they can include care homes in the activities and services they already deliver to communities. Our role will be to open up a dialogue with care homes and those third sector organisations that would potentially be interested in taking forward this area, providing them with the concept and some support in taking it forward.

6. Evaluation

What data is captured?

- 1) The facilitator of the Leadership Support programme typically captures data on ‘the collective journey of the group of managers’ in terms of the qualitative outcomes and challenges that the group has achieved over the period of the programme. The date is translated into a confidential report for managers to validate and add to, during the completion meeting of the group. During this meeting we will ask:
 - Has this leadership development programme worked for you?
 - What difference, if any, do you feel this programme has made in raising the quality of life for residents, staff and visitors in your Home?
- 2) To measure change over time, self-report measures are used at the beginning and end of some of the Leadership Support programmes – in particular, the Perception of Workplace Change Schedule (POWCS) which reports perceived changes to themselves or their place of work as a result of the programme has been adapted for the My Home Life programme from work done by Nolan et al¹ and Patterson et al².
- 3) We will work with the funder to identify other data that is routinely gathered that can help measure impact of the Integration Strand.

1

M, Nolan, G, Grant, J.Brown and J. Nolan (1998); Assessing Nurses Work Environment: old Dilemmas, New Solutions Clinical Effectiveness in Nursing 2, 145-156

2 Patterson M, Nolan M, Rick J, Brown J, Adams R, Musson G (2010) *From Metrics to Meaning: Culture Change and Quality of Acute Hospital Care for Older People* SDO Project (08/1501/93), University of Sheffield.

Added value of working with My Home Life

- Access to a very large range of accessible tools and resources that MHL have developed to support quality
- Opportunities to work together to develop joint funding bids for research that supports on-going improvements
- Opportunities to feed in to My Home Life influencing activity at national policy/regulation level
- Links to the National Care Home Research & Development Forum (Reg. nurse role in care homes) and a range of seminars that will be developed
- Ad hoc advice on a range of issues that relate to promoting quality of life in care homes

Appendix 1: About My Home Life

My Home Life is a UK-wide initiative that promotes quality of life and delivers positive change in care homes for older people. It is based on a vision for best practice that is evidence-based and relationship-centred. My Home Life is led by City University London in partnership with Age UK.

The My Home Life Transformation Package has emerged through working with care homes in approximately 35 local authority areas across the UK.

The underpinning evidence base was created by over 60 academic researchers from Universities across the UK in partnership with older people, relatives and staff in care homes. Comprising eight best practice themes, ‘the Senses Framework’ and ‘Caring Conversations’, the evidence base offers a framework from which to deliver quality:

- | | |
|----------------------------|--------------------------------------|
| 1. Maintaining Identity | 5. Improving Health and Healthcare |
| 2. Sharing Decision-making | 6. Supporting Good End of Life |
| 3. Creating Community | 7. Keeping Workforce Fit for Purpose |
| 4. Managing Transitions | 8. Promoting a Positive Culture |

The vision is underpinned by ‘relationship-centered care’ that recognises the importance of seeing the care home as a community where the quality of life of staff, family, friends and residents are all crucial to improvements in practice.

My Home Life is endorsed by:

- ✓ Government and CQC, as a ‘recognised quality scheme’ for care homes in England.
- ✓ Residents and Relatives Association & all UK national provider organisations for care homes.
- ✓ Local Government Association/NHS Confederation/Age UK Commission on Dignity.
- ✓ Centre for Social Justice Older Age Review & the Welsh Assembly’s Review of Residential Care.

CONTACT US

The My Home Life Team is based out of City University, School of Community and Health Sciences. The team have had considerable experience in working with the care home sector.

A team of facilitators who are highly experienced in leading action learning across a range of organisations, for example Primary Care Trusts, Acute Trusts, Independent Care Homes and Higher Education Institutions has been developed.

The My Home Life team have considerable experience of working and researching care home practice. Our work has helped us develop a full understanding of the barriers and problems facing both the sector and the wider health and social care system. We have also developed a range of tools for use within culture change initiatives. Full CV and publication details are available on request.

MHL Core Team includes:

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