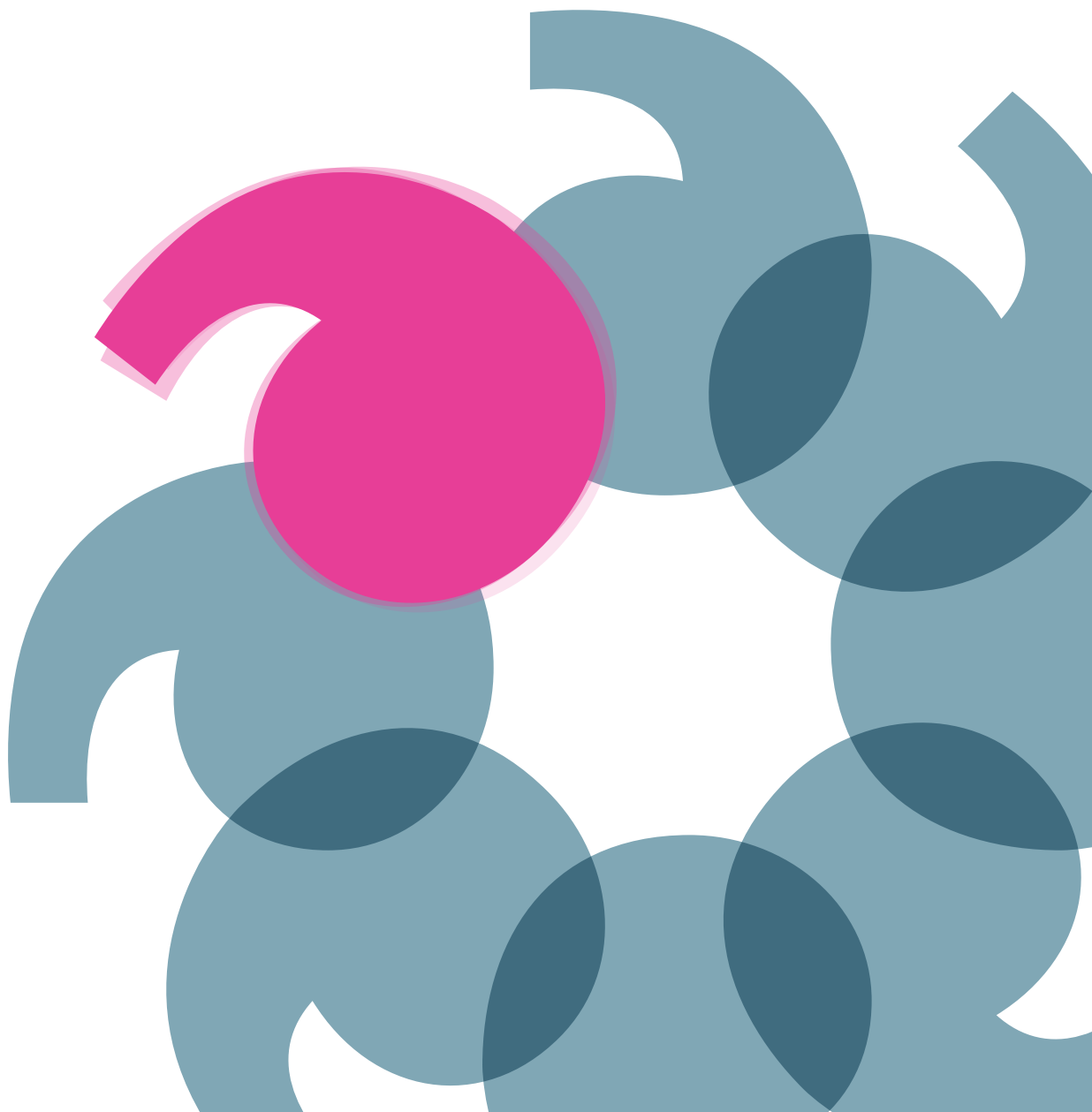


Meaningful activities in care homes and nursing homes in Islington Enter and View visits in 2019



Healthwatch Islington

Healthwatch Islington is an independent organisation led by volunteers from the local community. It is part of a national network of Healthwatch organisations that involve people of all ages and all sections of the community.

Healthwatch Islington gathers local people's views on the health and social care services that they use. We make sure those views are taken into account when decisions are taken on how services will look in the future, and how they can be improved.

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Introduction

Enter and View is the statutory power granted to every local Healthwatch which allows authorised representatives to visit publicly funded health and social care services to observe how services are being delivered, and to gather feedback from service users, from their relatives and carers, and from staff. Enter and View visits can either be announced, meaning the service knows about them in advance and is prepared for the visit, or unannounced.

This year we undertook six announced visits to care homes and nursing homes in Islington. We wanted to explore how meaningful activities are provided for residents.

The Enter and View representatives are trained volunteers who have undergone a DBS (Disclosure and Barring Service) check. From their personal and professional experiences, they bring a wealth of experience and knowledge about the needs of older people receiving care.

We appreciate the constraints care services are currently under. We have included a Good Practice section towards the end of this report to share creative ways of overcoming potential barriers. We have also made several recommendations. These recommendations have been shared with the providers ahead of publication, giving them opportunity to comment and make suggestions. The providers have also had the opportunity to check the report for accuracy.

This report relates only to the service viewed on the date of the visit, and is representative of the views of the staff, visitors and residents who met members of the Enter and View team on that date.

Who we spoke to

We spoke to 37 residents and 20 members of staff across six homes during our visits. . A large number of residents had dementia or other needs that meant it was hard for them to participate in our visits.

Sex of residents

Female	Male	Prefer not to say	No answer	Total
16	8	1	12	37

Age of residents

65-79	80+	No answer	Total
10	13	14	37

Ethnicity of residents

Black/ Black British	4
White British	9
White Irish	8

Other	2
Prefer not to say	1
No answer	13
Total	37

Did resident identify as disabled?

Yes	No	Prefer not to say	No answer	Total
5	13	1	18	37

Staff members who completed equality monitoring forms (none identified as disabled)

Female	Male
13	2

16-24	25-44	45-64
1	5	10

Asian/ Asian British	2
Black/ Black British	2
White British	7
Other	2

What are meaningful activities?

‘Meaningful activity includes physical, social and leisure activities that are tailored to the person’s needs and preferences. Activity can range from activities of daily living 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.’

The National Institute for Health and Care Excellence

The definition of meaningful activity given by the National Institute for Health and Care Excellence (NICE) moves beyond a programme of structured and timetabled events to a more personalised approach, adapted to the needs of each resident. This definition helped us to shape the questions we put to managers, staff and residents in order to better understand how meaningful activities are provided to residents in the homes we visited.

<https://www.nice.org.uk/guidance/qs50/chapter/quality-statement-1-participation-in-meaningful-activity>

Homes Visited

- ▶ Bridgeside Lodge
- ▶ Highbury New Park Care Home
- ▶ Highgate Care Home
- ▶ Cheverton Lodge Care Home
- ▶ Lennox House Care Home
- ▶ Muriel Street Care Home

Feedback from residents

We spoke to 37 residents across the six homes during our visits. A large number of residents had dementia or other needs that meant it was hard for them to participate in our visits. In some cases we spoke to a relative, friend or staff member along with the resident to gain a better picture.

Those we spoke to had been residents of their home for between a couple of weeks to over four years. Some had quite high levels of dementia and others were in the home for physical nursing care. The range of responses during our conversations with residents were therefore variable.

Most of those we spoke to were able to tell us about ways in which they participate around the home, from organised activities such as quizzes, exercise classes, music groups and arts and crafts, to individual activities such as reading, colouring, watching TV, doing a puzzle or knitting. We were also told about events and trips such as music performances in the home, visits from animals, visits from children and visits to the seaside and visits to see Christmas lights. One resident who struggles to do anything told us that she likes having poetry read to her and staff take the time to do this. Another told us that they do not enjoy taking part in group activities but they do enjoy cleaning their room.

We asked residents about what they enjoy doing and whether they can have a say about what happens in the home. Some residents found this question harder to answer but others mentioned that there are regular meetings they can attend, or they can tell staff on a one-to-one basis.

Residents told us that they know what activities happen and when they take place because there are generally timetables available, and staff will often come and let them know and ask whether they would like to join in.

We asked residents whether they thought anything could be improved around activities in the home. Most were happy with the way things were, however, one resident suggested more one-to-one time with staff and another suggested evening activities.

One relative mentioned that activities in the home are always varied and adapted to individual needs, which they felt was important.

Feedback from managers

During each visit we asked to have time with the manager of the home. In one case where the manager was unavailable during our visit, they answered our questions via email.

We asked managers about their attitude to meaningful activities in their home, as we felt this would show us their intentions even though there may still be barriers to these being realised. Most managers spoke not only about the importance of personalised structured activities, but also about making residents' day to day experiences meaningful for them. We were told about the importance of ensuring that structured activities are individualised and how activities are as important as the care a resident receives.

Two managers highlighted that it is about 'making someone's day every day' [Bridgeside Lodge] and thinking 'what's your small pleasure for today for each resident' [Lennox House]. Other managers spoke about knowing their residents and aiming to make them 'feel alive and at home' [Highgate], with a 'mix of planned activities and spontaneous activities' [Muriel Street].

Role of staff and residents

Managers spoke about how meaningful activities are an integral part of the work of all staff. This attitude is communicated to staff in a variety of ways, we were told about the importance of meetings, and of modelling this attitude to staff. Two managers spoke particularly about training for staff, whereas another spoke about staff and residents working together to deliver activities. At one home a staff member is designated as a resident 'champion' on each floor to get to know the residents particularly well and feed their views into activity planning. At another home a similar role was taken on by a resident who acts as an 'ambassador', representing the resident's voice and feedback back to staff.

All the homes we visited have regular residents' forums which provide a space at which residents can express their feelings around activities. But most managers also stressed the importance of personal relationships between staff and residents for this kind of feedback.

Connections to the local community

Managers told us about the range of ways that they make connections between the home and the local community. This is often through partnerships with local organisations and institutions. All the managers we spoke to told us about relationships they have with local schools, where young people visit the home and engage in either a reminiscence or musical project. Managers also told us about relationships with local churches, and volunteers from the local community. At some homes they have visits from pets (e.g. 'Pat the Dog' sessions) which residents find therapeutic.

Managers also spoke about connections they have with local organisations such as Cocktails in Care Homes. One manager told us about the relationship they have with a local charity, the Spitz, where the organisation provides musical activities and performances in the home and in return the home provides them with a free desk space.

Documenting activities and events

All managers told us about ways in which they record past activities and events, from the use of electronic screens and wall displays, to centralised folders, to individual resident 'life story' books. These included photos but also information about who attended and what went well. It was highlighted that this is a good way to remind residents about what they've been doing and share that with friends and relatives.

Barriers and support

We understand that at this time there are significant limitations on funding in the health and care sector and that this is likely to prove a barrier for some of the homes that we visited. However, we were interested in whether the managers felt there were other things that acted as barriers in terms of implementing meaningful activities across the home. The subject of staffing was raised by a number of managers, especially in terms of buy-in and the difficulties of recruiting and retaining staff. We are aware that changing the culture of any care home or nursing home can take time, and this seemed to be one of the biggest barriers managers felt they faced.

Another barrier that was mentioned by several managers was the increasing frailty and needs of residents, including dementia. Many residents are limited to their beds and/or a chair and this puts a strain on staff time as group activities become less feasible.

At one home the manager mentioned that support from the Lead Nurse for Clinical Standards, Quality and Assurance was very helpful. This is a post that sits in the Older Adults Commissioning Team at Islington Council, and works to improve the quality of care and clinical competency within care homes. The manager told us that they found great value in the regular care home managers' meetings that were offered by the Lead Nurse.

Good Practice

Some of the ideas shared by managers were creative, such as offering bus trips to go and see the Christmas lights; others were collaborative, residents who co-run activities; and others were innovative, using technology (such as Alexa and iPads) to support residents with specific needs.

Feedback from staff

We spoke to 20 staff from the six care homes during our visits. Of these, nine were care staff members, eight were activities coordinators (or lifestyle coordinators or resident engagement coordinators), and three were nursing or housekeeping staff.

We asked staff about the attitude towards meaningful activities in the home to see how the vision of the manager chimed with the rest of the staff team. Staff explained that the overall aims for activities were as follows:

- ▶ To get residents involved
- ▶ To get people out of their rooms, to keep them occupied and active
- ▶ To stimulate and engage residents
- ▶ For residents to enjoy themselves
- ▶ To make it more like a home

Care staff were particularly articulate in explaining the importance of varied activities for those they care for, underlining how it can improve wellbeing and health. While these responses did not directly reflect the language managers had used, they strongly reflected the same attitude towards meaningful activities.

We asked staff about residents' preferences – how staff know about and meet their needs. Staff told us that getting to know individuals is important and that they do this by talking one on one, listening, and speaking to friends and relatives. Other staff members mentioned the individual's care plan or a Life History book which outlines an individual's preferences. Staff mentioned that this can be much harder with residents with dementia, and highlighted that it is important to be adaptable and responsive.

If residents are reluctant to join in, staff said that they might have a one to one conversation with them to understand why, but ultimately it's up to the resident whether they get involved or not. Some staff members suggested that if this happens they may take the time or bring some resources to the individual's room for some one to one time instead.

We asked staff about the kind of resources that are available in the home to support them to provide meaningful activities. Some mentioned staff meetings, or support from management. Others mentioned physical resources, such as games and puzzles. Others mentioned a budget and training courses, although this was only at two homes.

When we asked about barriers that staff experience in engaging residents in meaningful activities, they highlighted similar themes as their managers, especially residents' frailty and increased numbers of residents with dementia. However, time constraints and budgets were also mentioned. At one home it was emphasised that there can be a barrier when residents do not have English as a first language – although the home is sourcing an interpreter for such instances.

Activity, Lifestyle and Resident Engagement Coordinators

These coordinators shared with us the vast array of activities they had scheduled for the week or month ahead, as well as specific things that have been particularly successful.

At one home the activities coordinator mentioned that they have a room with craft and games equipment that care staff can use with residents. At another home a number of staff have been trained to offer seated exercises. Making activities more accessible to the wider staff body will likely increase individuals' confidence to interact with residents in a meaningful way.

A number of coordinators also spoke about working with volunteers, friends and relatives which seemed an effective way of embedding the culture of meaningful activities into the life of the home.

Observations

During our visits we saw only a snapshot of daily life in these homes. However, all homes appeared to be welcoming and comfortable despite the designs of the buildings being so different. In most of the homes our authorised representatives observed refreshments in the communal spaces such as water, juice and milk along with cups, so residents and visitors could help themselves. Other homes also had hot drink making facilities. The seating in communal areas appeared comfortable and appropriate, although we did notice that in some homes the seating in these spaces was around the walls which made it hard for anyone to have a conversation when seated.

In most of the homes there were also smaller rooms for private or group use such as a chapel, a sensory room, a memory room and so forth. In one home they had a tea room which can be booked by relatives for lunch or tea with their loved one during a visit. These smaller communal rooms provide other quieter spaces in which residents can spend their time when not participating in activities or remaining in their rooms.

There was clear information displayed in all the homes regarding activities during the coming week or month. There were also displays, either on notice boards or TV screens showing photos of previous activities, events and trips, which helped to liven up corridors and entrance spaces.

All our visits took place between 10am and 5pm, Monday to Friday. We observed that in some homes there were many friends and relatives visiting during these times, whereas at others there were very few, if any. This affected the atmosphere of the homes and made it very clear what a large role friends and relatives play in the life of these homes.

Good practice

After visiting six residential care and nursing homes in Islington we thought it would be useful to share some examples of the good practice our representatives observed along with some national good practice from the wider Healthwatch network.

▶ **The importance of shared culture and interests**

Many homes highlighted the importance of knowing and understanding individuals' preferences. They try and connect staff and residents who have a shared interest in a bid to develop relationships.

▶ **Providing support to staff delivering activities**

The manager at one home spoke to us about meetings with the Council where home managers from across the borough come together and can problem solve and share good practice. This sounded like a supportive space and perhaps this format could be expanded to create an Activity, Lifestyle and Resident Engagement Coordinator network for colleagues to support each other and share good practice.

▶ **Accessible Resources**

Healthwatch Worcestershire visited one care home where information cards were produced with pictures representing the activity or resource on one side and short instructions on the other so that any member of staff could use the resource or carry out the activity with a resident.

▶ **Personalised Activities**

A number of homes had reminiscence areas or activities along with sensory areas which often included resources that residents could easily access on their own, or with others. In a couple of homes it was mentioned that technology can be a great resource, especially for those with access needs or significant disability. In one of the homes we visited they were using Alexa to assist residents with sensory impairments.

In Bristol an organisation called Alive! uses a range of Apps on iPads to help residents to engage in reminiscence activities they may have struggled to engage with otherwise. <https://aliveactivities.org/impact/our-impact/>

▶ **Partnerships**

We were encouraged to hear that all the homes we visited were working in partnership with local communities. Working with such organisations and individuals can really help to increase the capacity of the activities offer in the homes.

All homes we visited had partnerships with a local schools and most mentioned one with local faith communities. Such relationships ensure that residents in the home are still involved in a local community and it gives them the opportunity to integrate with local residents from different backgrounds and generations.

Partnering with local befriending organisations was mentioned as a way to ensure that residents who wanted it could have meaningful one-to-one time when staff were otherwise engaged. A number of homes mentioned that they have regular visits from animals. Residents find this therapeutic and it is often cited as being a particularly effective way of engaging those with dementia.



At Lennox House, all staff are encouraged to assist residents at meal times. One of the maintenance team chooses to eat his lunch with one of the residents. They share the same background and like to keep each other company.

Eighteen staff at Muriel Street have been trained to offer residents Revitalize, a seated movement activity. Equipping staff with the skills to lead activities in groups or one to one is likely to increase staff confidence and buy-in.

Bridgeside Lodge provides a free office space for the Spitz, a charity that provides live music to promote wellbeing. In return the charity provides a programme of musical activities in the home.

At Cheverton Lodge once a year they send out invitations to their neighbours to come to the home and share a meal with residents. At Highgate Care Home they invite their neighbours to share a Christmas meal.

Highbury New Park is involving residents in a pilot project. Brain exercises are being run by a memory clinic, which Highbury New Park's own psychologist can deliver post-pilot.

► Recording activities and events

We were aware that all the homes we visited displayed photos and sometimes videos of activities, events and trips around the home and these not only livened up the areas but served as a reminder of what residents had been involved in.

We also heard about individual record books for residents that documented what they had been involved in. In a number of homes we visited these were kept in individuals' rooms for them to look at and share with friends and relatives.

Summary

We found it encouraging that all the homes we visited seemed to recognise the importance of a culture of meaningful activities. Increasingly, the emphasis of activities seems to be moving towards ensuring that residents feel safe and at home and that their health and wellbeing is improved.

We recognise that for Activity, Lifestyle and Resident Engagement Coordinators, the move away from running a highly structured activity programme to one which is flexible and person centred could be both highly rewarding and a much more demanding task.

Recommendations

1	Islington Council to facilitate a meeting for Activity, Lifestyle, and Resident Engagement Coordinators to gather together to support each other around challenges faced, and to share good practice.
2	More homes might want to look into partnering with local organisations/ charities in ways that replicate the model between Bridgeside Lodge and the Spitz.
3	Homes might consider allocating the role of activity champion or ambassador to non-activity staff. This will help to create deeper connections with residents and encourage buy-in from all staff.
4	More homes could develop activity resource packs that all staff can use one to one with residents to increase staff confidence and participation.

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