My Home Life: improving relationship-centred care

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Open up dialogue for the integration of Long term conditions and Long term care

**Long term conditions**
Generally working in NHS, tend to care for single conditions, need to learn more about long term care from independent sector, as patients growing older and more frail with greater social care needs.

**Long term care**
Generally working in private sector, tend to care for multiple conditions, need to learn more about long term conditions from NHS, as residents coming in older and more frail with greater health care needs.
Building the House of Care: Case in point for more dialogue

Welcome addition, but …

- Watch the language (older people, not patients)
- Voice of older people & their relatives missing, should be central
- Independent sector not involved enough
- Need a shared vision for frail older people that is evidence-based and relationship-centred
- See My Home Life vision (House of Relationship-Centred Care)
Promoting Quality of Life in Care Homes

So...what do we think about care homes?

• Scandals?
• Poor quality?
• Money-grabbing?
• Undesirable?
• Less relevant?
• In decline?
Understand context, Value & respect

• >3x number of care home beds, compared with NHS beds
• Caring for some of the most vulnerable citizens in society
• Making a significant contribution to care of frail older people in our society. Projected to increase, not decrease.
• Care homes not paid the fair rate for care by LAs and most care home staff on minimum wage (undervalued)
• <25% registered for nursing (mainly social care workforce)
• Residents going in later with more health problems
• Workforce needs healthcare training and/or better access to health expertise
MHL Mission

Promoting quality of life for those living, dying, visiting and working in care homes for older people.
MHL Support
Age UK, City University, & Dementia UK

Relatives & Residents Association
National Care Forum (Co-Founder)
English Community Care Association
National Care Association
Registered Nursing Home Association
Care Forum Wales
Scottish Care
Independent Health & Care Providers
National Care Home R&D Forum
MHL Endorsed in White Paper

The Government will support the work being led by My Home Life and national care provider organisations to work with their members to connect care homes to their local community.
MHL Endorsed in Delivering Dignity

Recommendation 10
Care home providers should invest in support and regular training for their managers. As commissioners of care, local authorities have an important role to play in facilitating this.
Began small, now social movement

Initiatives in England (25 LAs), Wales, Scotland (9 regions) & Northern Ireland

Secret of success?

– Evidence-based
– Relationship-centred
– Appreciative
– Making a difference
Phases of My Home Life

Phase One: Vision
• (2005-7 – HtA)

Phase 2: Dissemination
• (2007-9 – BUPA)

Phase 3: Implementation
• (2009-12 – JRF, DH, LA, City Bridge etc.)

Phase 4: Sustainability
• Research & Development
• Enterprise Activities - Leadership Support and Community Development programme
• Social action to support quality improvement
What we know residents, relatives and staff ‘want’ and ‘what works’ in LTC

Need shared evidence-based and relationship-centred vision that cuts across:

- health & social care
- policy & practice
- regulation & commissioning
- public & private

*NCHR&D (2007)*
MHL Vision for Long Term Care

**Personalisation**
1. Maintaining identity
2. Sharing decision-making
3. Creating community

**Navigation**
4. Managing transitions
5. Improving health & healthcare
6. Supporting good end-of-life

**Transformation**
7. Keeping workforce fit for purpose
8. Promoting a positive culture
In hospital, personalisation themes missing – why we have problems with Dignity

See who I am!
(Maintaining identity)

Involve me!
(Sharing decision-making)

Connect with me!
(Creating community)

Bridges et al (2010)

http://www.city.ac.uk/bpop/
The Senses Framework: improving care for older people through a relationship-centred approach

Security: to feel safe
Belonging: to feel part of things
Continuity: to experience links and connections
Purpose: to have a goal(s) to aspire to
Achievement: to make progress towards these goals
Significance: to feel that you matter as a person


Positive relationships between residents, relatives and staff and between care homes and their local community and wider health and social care system
MHL Activities

• Synthesising evidence
• Developing resources
• Creating networks
• Empowering leaders
• Supporting change
• Maintain momentum
MHL Leadership Support & Community Development (LSCD) programme

Leadership and Support for care home managers to take forward quality improvement (4 day workshop, supported by action learning for one year)

Community Development for LAs/NHS to work in better partnership with care homes (understand context, value & respect, resolve local issue)

Supportive network for care homes to share best practice and learn from each other (reduce ‘islands of the old’)
Examples of best practice?

JRF report (examples from LSCD programme)

MHL Essex (example of better partnership working between care homes and LA/NHS)

www.myhomelifeessex.org.uk
Other MHL initiatives?

- Big Care Home Conversation across UK
- MHL Admiral Nurses at Orders of St John’s Care Trust
- Research and development in care homes
  - JRF: Leadership, voice, choice and control
  - EU: Quality of life indicators
  - SCIE: Managing risk and minimising restraint
  - BGS: Quest for Quality
  - NIHR: Methods Review in Care Homes
Big Care Home Conversation

“What makes life good in care homes now, what could make them better – and how might we get there?”
Promoting Quality of Life in Care Homes

My Home Life Admiral Nurses

- Dementia UK and My Home Life have been working with Orders of St John’s Care Trust to promote positive culture
- Several My Home Life Admiral Nurses to take forward quality improvement and enhance care for people with dementia, through evidence-based, relationship-centred care
  - Community integration
  - Reducing Antipsychotics
Quality of Life Indicators

Domains

1. Quality of care
2. Quality of life
3. Leadership
4. Economic Performance
5. Context

All QoL indicators for MHL were accepted through the Delphi, except:

- "% of staff who feel positive about changing practice" (Promoting positive culture)

All QoL indicators for SF were accepted except (staff):

- security, continuity, belonging, purpose and significance
Managing risk & Minimising restraint

- Perceived overlap between ‘restraint’ and ‘abuse’
- Previous poor practice in the use of restraint
- Forms of restraint
  - Manual restraint
  - Other forms of manual restraint
  - (Arrangement of furniture; Lap belts, wrist and vest restraints; Bedrails; Deprivation of walking aids or means to summon assistance; Locked doors; Over-medication)
  - Staff instructions, or institutional rules or practices
  - Other forms of restraint mentioned in the study (Alcohol, cigarettes, sex, Environmental restraints)
- Negotiating and managing positive risk taking
- Risk assessment tools and restraint policies
- Training and practice development
Quest for Quality

An inquiry into the quality of healthcare support for older people in care homes: A call for leadership, partnership and improvement

BGS (2011)
Methods Review

- Research in care homes is complex
- Research partners: residents, relatives and staff as
- Impact the of cognitive and physical frailty, staffing pressures and the unique environments of care homes
- Well-being of participants and associated stakeholders in research design.
The future...

- Vital part of care spectrum (frail citizens)
- Projected increase in demand for care home provision
- Despite negative press & financial restraints (steady improvements in quality)
- Part of the solution (potential to ↓ pressure on NHS)
- Better partnership working
My Home Life Spirit

• Building upon energy, enthusiasm and best practice out there

• Collaborating, sharing, realising a vision for change
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