

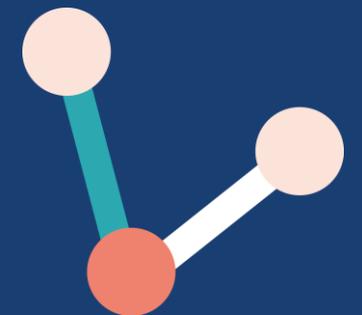
Quality of life care plans

Ann-Marie Towers, CHSS, University of Kent



Background

- Working in social care research (older people) since 2003
- Housing with care, care homes, domiciliary care
- Quality of Life: measurement, impact of services.
 - Adult Social Care Outcomes Toolkit (ASCOT): social care-related quality of life (www.Pssru.ac.uk/ascot/)
 - Designed as an **outcome tool**, sensitive to the impact of social care and preference-weighted for use in economic evaluations.
- But measurement alone does not change practice and many residents cannot 'self-report' using conventional methods.
 - How do we capture residents' QoL in a way that can inform direct care?



Working with care homes

1

Case Study 1 (2016-2019)

Whiddon Group in NSW, Australia

- Co-produced an approach to using ASCOT care planning conversations
- 'Circle of Care' approach (resident, family, care worker and RN/care planning lead).

2

Case Study 2 (2020-2021)

ARC project with care homes in England.

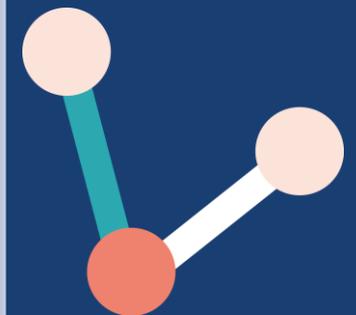
- Trained four homes from one chain, flexible approach to fit their systems.
- Winter and COVID-19 pressures stopped the pilot.

3

Case Study 3 (2021-2023)

Attendo in Sweden

- Pilot 3 NHs, 10 staff, 55 QoL care plans
- First implementation 2022: 12 NHs, 60 staff, 190 QoL care plans
- Wider roll-out 2023: 28 homes, 22 'trainers', just started

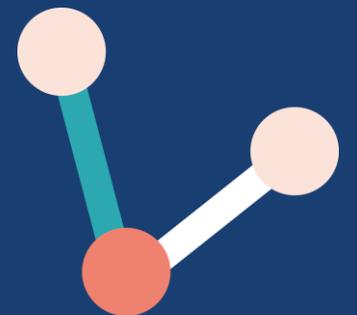


Impact

Feedback from Attendo:

- ✓ **Positive feedback from residents and families** who really appreciated the conversations
- ✓ **Tool** for resident-centred care – capturing every individual's needs and preferences
- ✓ **Complementing individual care planning:** clear goals & activities supporting quality of life in day-to-day care
- ✓ **Measurable** Quality of life (QoL) outcome for providers/organisations to use to demonstrate the impact of the service they are providing.
- ✓ <https://dreambroker.com/channel/tonr6e1c/1q47mlj2> (video with English subtitles)

Challenge: how to replicate in the UK? Cannot be research-led, has to be provider-led.



Contact details



Prof Ann-Marie Towers

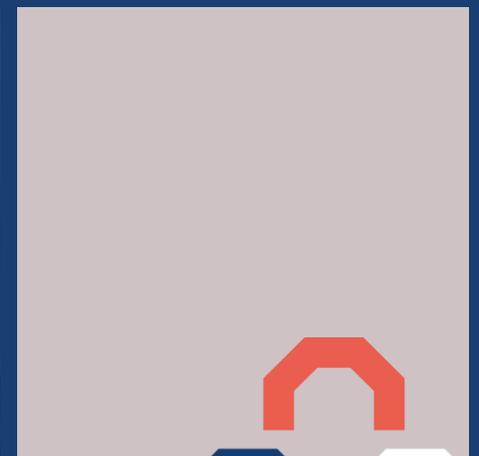
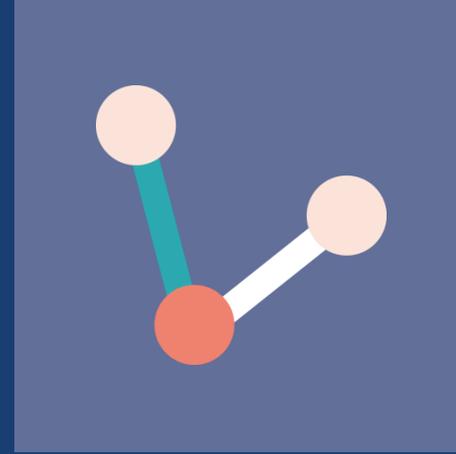
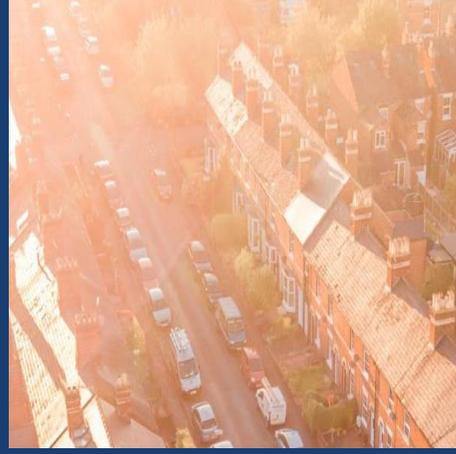


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Did the trial kill the intervention?

Guy Peryer, University of East Anglia, ARC EoE]



Background

- Care Homes are complex settings to implement randomised controlled trial research designs
- Between 2007-14 NIHR awarded over **£8.5m** for five Care Home randomised controlled trials
 - All reported **neutral findings**
- Are there alternative explanations for these results?
- What if we were to look at the Process Evaluations of the trials?

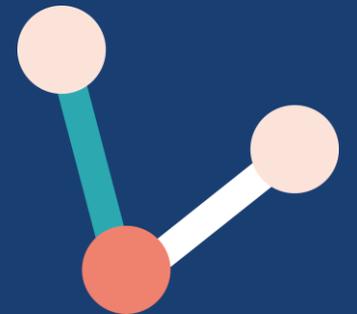
Paper



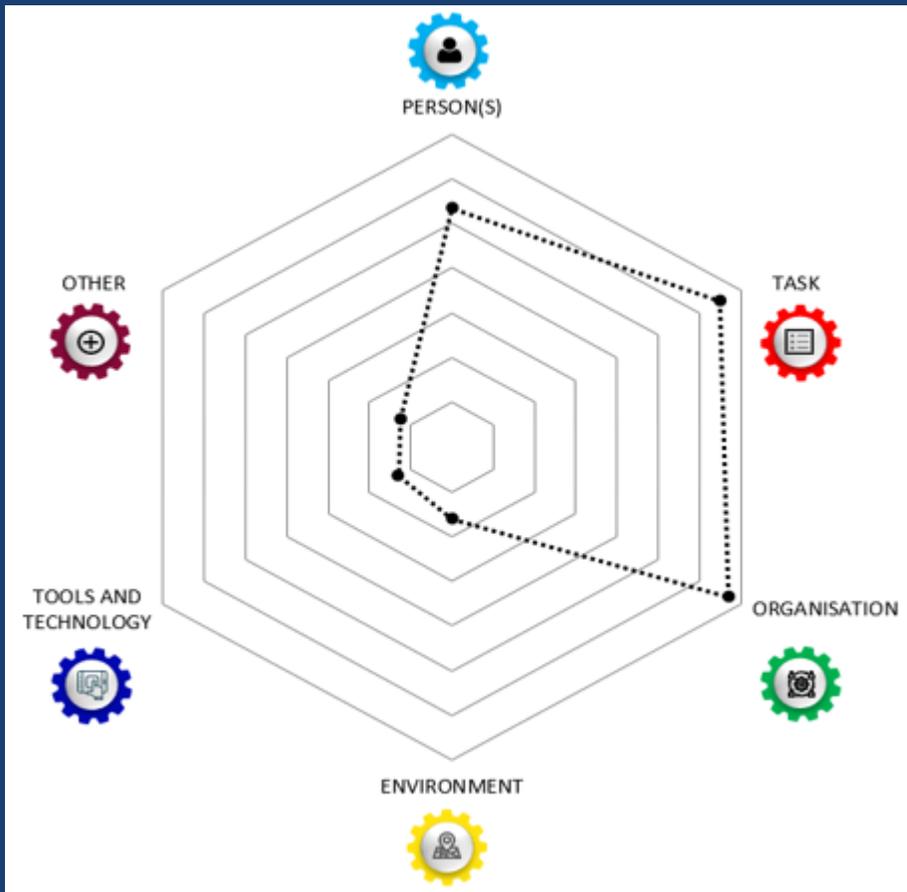
System factors



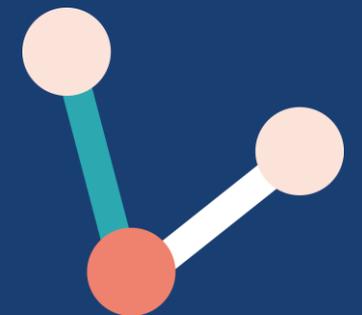
Quotes



Working with care homes



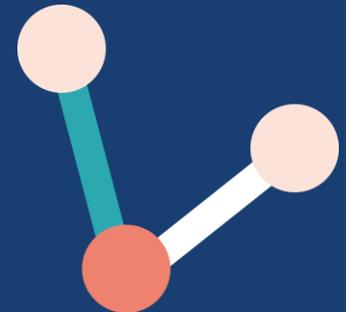
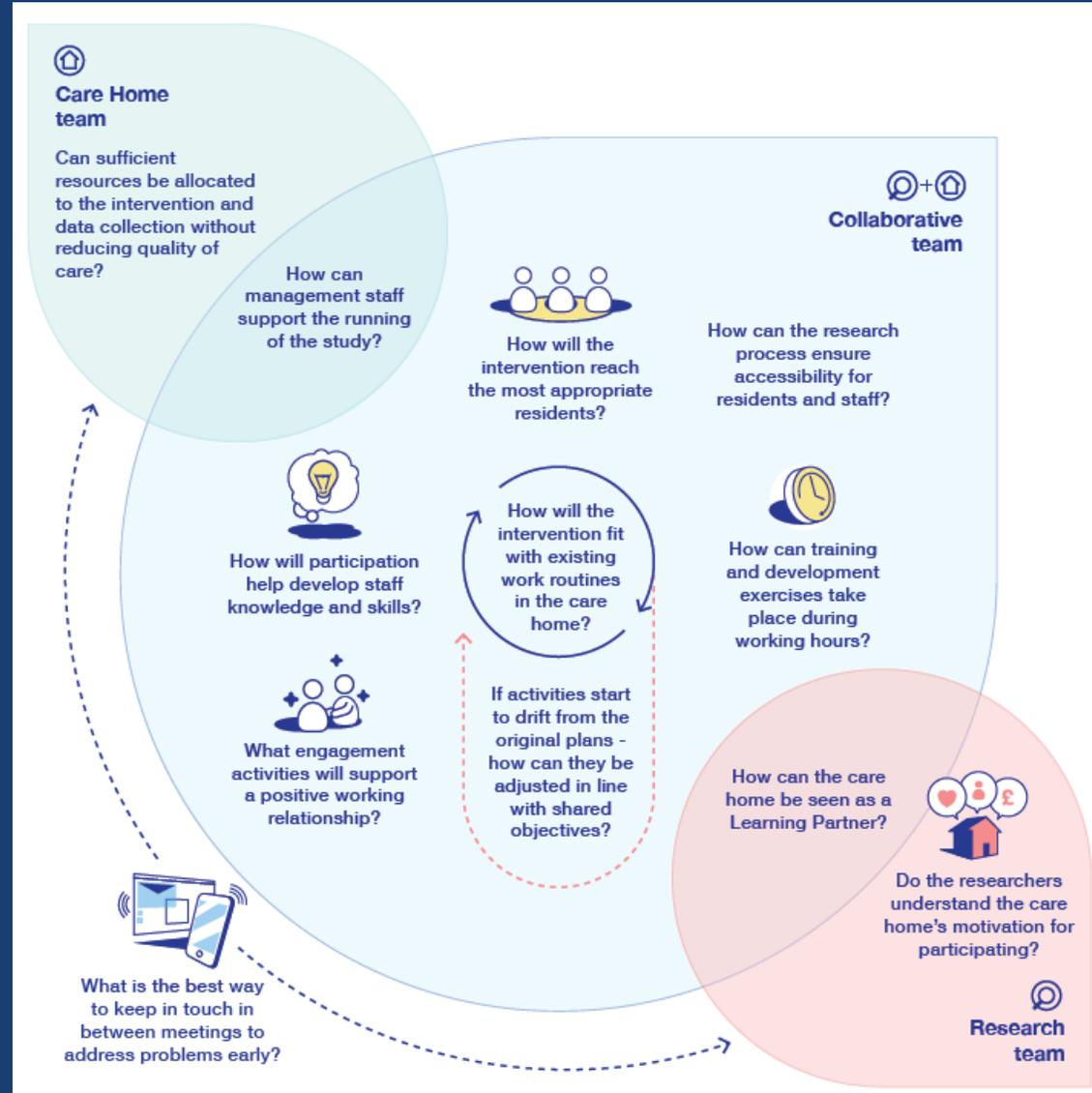
- **Research Load** – Primary Barrier
- *“The new routines were seldom accompanied by suggestions as to what routines should be replaced”*
- *“There was a lot of negative feedback from the staff; they thought it was a stupid project”*



Impact



Ensuring trial interventions in Care Homes have their best chance of success



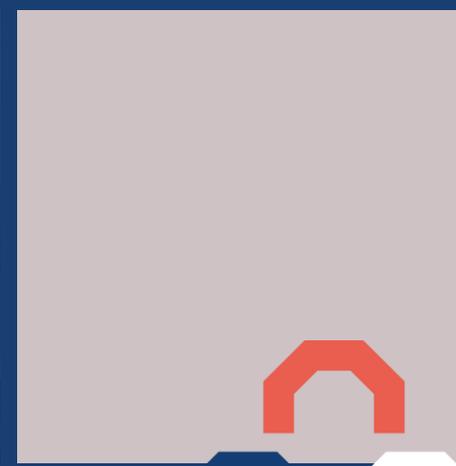
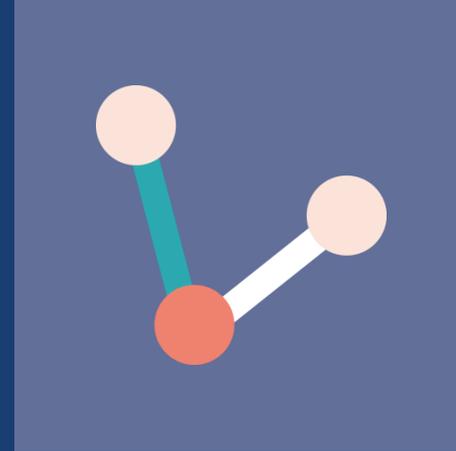
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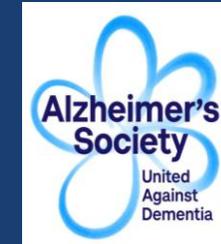
ExCHANGE Collaboration

Jo Day NIHR ARC South West Peninsula



Background

- There are many **gaps** between the activities of university **researchers** and the **needs** of people who work, live in, and care for others in **care homes**.
- We established the **ExCHANGE (the University of Exeter and Care Homes Knowledge) Collaboration** as a pilot innovative model of bringing together researchers and care home stakeholders.
- We aim to **improve mutual understanding of research and evidence-use in care homes** and to **generate applied research** that directly addresses care home practice-needs.
- Our collaboration is made up of **care home owners, family members of care home residents and university researchers**.



University
of Exeter



Working with care homes

...involving people from
all walks of care
home life

...maintaining **equality**
between collaborators

...co-designing
project activities

...shared
interests

...being
flexible

...regular
communication

...**incentives**
for all
collaborators

...using
accessible
language

..our shared **passion &**
enthusiasm to improve care
home life

..strong
facilitation

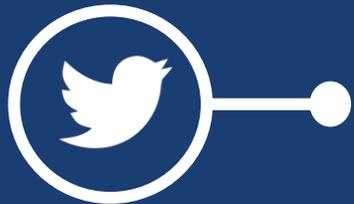
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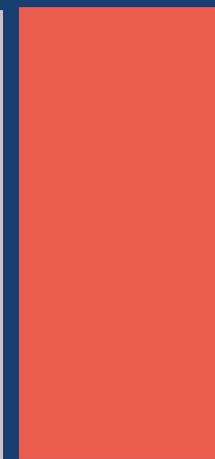
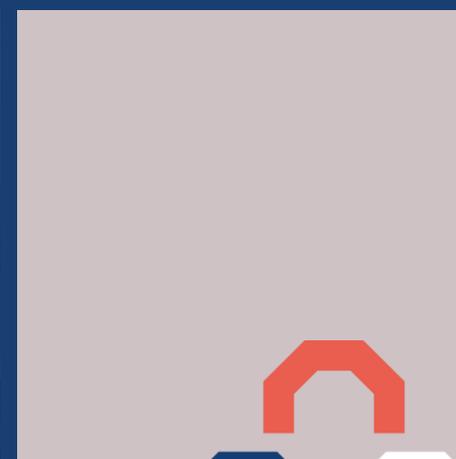
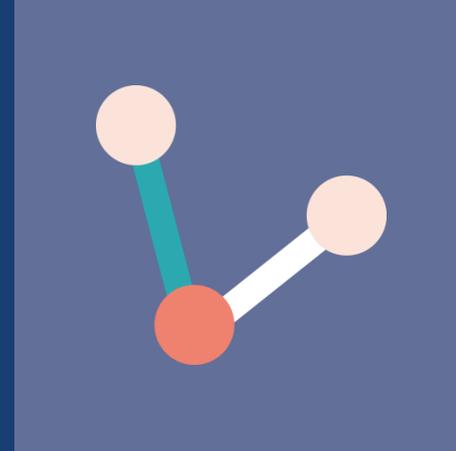
@Peninsula_ARC

Websites

<https://www.arc-swp.nihr.ac.uk/research/the-exeter-care-homes-and-knowledge-exchange-collaboration>

<https://exchangecollaboration.wordpress.com>





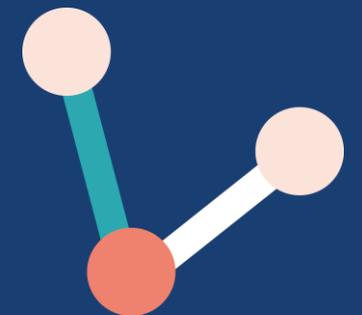
Care Home Activity Providers facilitating Public Involvement (CHAPPI)

Anne Killet, University of East Anglia, East of England, ARC



Background

- Associate professor occupational therapy, researching long term care for 15 years
- Began with care home research on **sensitive topic** of abuse, in which **participatory approach** important for empowerment
- Care home research typically **hasn't involved older people** living in care homes in '**public involvement**' roles
- CLAHRC East of England study found residents wanted to be involved – but research coming to them
- DACHA study planned to facilitate 2 resident involvement groups in residents' homes – COVID intervened
- DACHA collaborated with National Activity Provider Association (NAPA) – with activity providers facilitating research involvement activities



Working with care homes

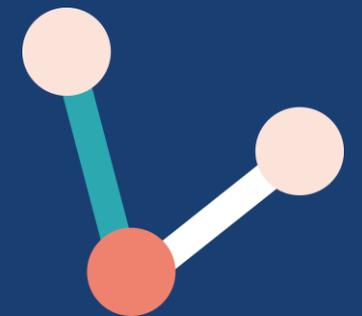
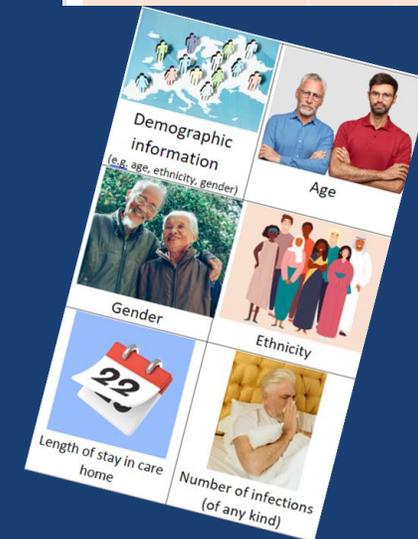
- The voice, priorities and perspectives of care home residents are key
- Residents likely to have limited energy, range of needs for support to engage
- Activity providers know residents' needs
- Activity providers have a relationship of trust with residents
- Researchers and activity providers develop involvement activities together
- Series of involvement activities – regular input of residents' voices to the research project
- CAHPPI will research this approach to residents' involvement

Care plan survey - (Page 2)

	Very Important	Important	Not important	Wh
Maintaining safe/environment (Keeping safe)				
Medical				
Mental capacity (Able to make your own decision)				
Mobility (Walking and moving)				
Finance				

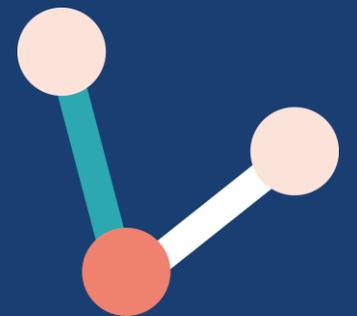
Care Plan : Questions for Discussion

- Question:1 How important is this to you?
- Question:2 Who is the best person for the care home to ask for this information?
- Question:2 How sensitive is this to you?
- Question:3 Are there anything should be there but is not (missing)?



Impact

- People living in care homes active as **citizens**
- Research that keeps the **priorities and perspectives of care home residents** at the centre
- A **meaningful activity** for residents
- **Activity providers recognised** for their skills, with professional development opportunities





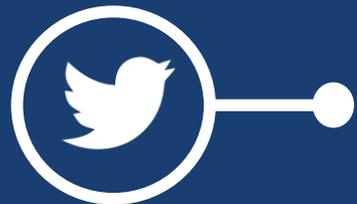
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@LisIrv for CHAPPI

