The way we were….. NOW!
Engagement of residents and meaningful activity to increase mental wellbeing of residential care home residents

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Background
Lancashire County Council (LCC), East Lancashire Hospitals NHS Trust (ELHT) and Marsden Grange Residential Care Home for Older People are working as a team with NIHR CLAHRC NWC to improve the mental wellbeing of older people. The research project supports wider work with East Lancashire Clinical Commissioning Group, care providers and other partners to improve quality of care and reduce avoidable harm. The project has been guided by current NICE guidance, in particular: Quality Statement 1 Reference 1
“Older people in care homes are offered opportunities during their day to participate in meaningful activity that promotes their health and mental wellbeing.”
This includes activities of daily living and older people taking an active role in choosing and defining activities that mean something and help to develop and maintain relationships.

Intended Outcomes
To contribute to the evidence base of interventions in residential care homes for older people that improve, encourage and protect opportunities to engage in activity.
To understand better how socio-demographic backgrounds, including previous profession, can influence what is a meaningful activity for individual residents.
To design a boundary object or “talking point” that could be used to test the extent to which boundary objects are effective as engagement tools.
To identify barriers to taking part in activity and work to find solutions e.g. facilitating positive risk taking and use of technology to involve residents with greater limitations.

Methodology
A quantitative and qualitative investigation following a PDSA cycle – Plan, Do, Study, Act is being used. Reference 2
A literature search and review was carried out regarding engagement.
Two resident meetings were conducted to give information, gain consent and to enable residents to shape the approach.
Baseline resident profile data was collated at the residential care home.
A short version of the Warwick and Edinburgh Mental Wellbeing Scale was used to score resident mental wellbeing. Reference 3
A resident representative helped to design the boundary object – “A glimpse into my life” and led on engagement with other residents.

Key Learning, Patient and Public Involvement and Next Steps
Engagement at every stage proved to be a meaningful activity in itself and this resulted in wellbeing improvements for those residents involved.
Continual learning led to a need to conduct further literature searches and reviews to support a progressive approach e.g. on use of technology.
All the team had other demands on their time but progress still occurred. Clearly defined baseline measurements of mental wellbeing and further engagement with residents with more complex needs is being planned.
Good practice in engaging residents is being shared and it is hoped other care homes can repeat the approach and strengthen the evidence base.

References:
1 Nice Quality Standard QSS0 2013 www.nice.org.uk; 2 PDSA www.institute.nhs.uk/qualityandserviceimprovement and 3 Warwick Edinburgh Mental Wellbeing Scale www.nhsscotland.com

This poster represents research undertaken as part of the Evidence for Change – 2015 Pilot, funded by National Institute for Health Research, Collaboration in Applied Health Research and Care (NIHR CLAHRC) North West Coast. The views expressed are those of the authors and not necessarily those of the NHS, NIHR or the Department of Health.