

# STORY

OF

## Shaking up Lifestyles team at Castleford House Nursing Home





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## AUTHOR BIO

Ben has been manager of Castleford House Nursing Home since June 2016. In June 2019 Castleford House was rated overall "Outstanding" by CQC. He is a Registered Mental Health Nurse and has been qualified since September 2012. He has worked in health and social care since October 2006, starting out as a care assistant at Castleford House.

## Shock

It was October 2018, and we were shocked to see the less favourable customer care survey results for lifestyle coordinator team. 'Activities' was an area that had been so strong for us – a fantastic selling point for Castleford House Nursing Home. Perhaps that was why the results had been so poor – maybe we had become lackadaisical in our approaches and methods because we always expected that this area would maintain its high standards. For years it had been the same three-person team, with one full-time member and two members who worked part-time as lifestyles coordinators.

## Exasperation

The response from the team was not very accepting of the results. "If they think they can do a better job, why don't they come and work here and try to do activities?" one of them said to me when I broached the results. "You try your hardest, and then people who visit once in a blue moon and don't see what we put into this place get to say negative things about us – how is that fair?" another added.

It's easy to understand their anger because here we have three people who work so hard and, understandably, feel like they are getting very little recognition for that. But we also have residents and relatives who think that they aren't receiving meaningful activities. Letters were sent to people who left negative feedback, inviting them to a meeting to discuss their concerns, but nobody responded.

I was very involved in the Lifestyles team – for me, providing people we care for with appropriate stimulation and meaningful occupation is extremely important and I am frequently action-planning and investigating and innovating to try to ensure that everyone can have this. But I was missing something because all that hard work was not being demonstrated appropriately to residents and their families.

## Change

The conversations and meetings that we needed to have to reach a solution that solved our problems are a story in themselves. We collectively decided that the team needed an injection of fresh blood and ideas into it – it needed to evolve to meet the requirements of today's resident and relative. With that in mind:

- One of the coordinators left the lifestyles team and became a senior care assistant.
- Another coordinator left the lifestyles team and became a full-time cook.
- A senior care assistant became a member of the lifestyles team.
- A laundry assistant became a member of the lifestyles team.
- A former care assistant who had recently moved back into the area became a "bank" member of the lifestyles team.
- The home reminiscence therapist integrated into the lifestyles team and became a part of it rather than a separate entity.

The changes instigated a shift in thinking and attitudes in the lifestyles team not just in the way the activities, entertainment and lifestyles were conducted but also how it was communicated to the residents and relatives.

## Evolution

Families and residents were given their "lifestyles record" (a log of all the events, activities, entertainment and lifestyles that they had participated in and been offered to join in) over the last three months. Summarising the lifestyle record helped the residents and relatives to comment on how activities could be improved on a frequent basis.

Social media became something that was once used primarily to advertise events to something that told stories. It told everyone that a resident had helped make a cheesecake this morning and everyone was going to try some this afternoon or that two residents had gone to the local café for a hot drink in the cold winter weather. It helped families feel reassured that there was a lot more going on than they might see when they visit. Social media involved a lot of jumping through hoops and gaining consent took at least a month to implement correctly, but it was worth investing the time. We also used WhatsApp.

Activities became a lot more subtle and relevant. Instead of more "in-house entertainment" such as singers and musicians (which can sometimes be overused), they became a lot person-centred. The team created a new salon and, with the help of the residents, named it "Beautician on a Mission", enabling people to have beauty treatments and hand massages. The lifestyles staff purchased an oven and residents made cakes and cookies and puddings for people to snack on in the afternoons, giving them a sense of purpose and achievement as well as assisting in nourishment for people.

The team implemented a fantastic initiative – "the wishing tree". The residents and families were encouraged to make wishes and hang them on the tree branches, and the lifestyles team would grant them.

Wishing tree led to two magical stories of a lady being supported to go on a cruise and two gentlemen (one of whom was extremely poorly) able to attend a musical with their wives for a "date". Other fantastic examples included a gentleman visiting a farm that he lived by in his youth, a gentleman visiting his hometown for the first time in years and an immobile lady able to go on a shopping spree.

## "people dont come here to die."

One of my Lifestyles Coordinators said to me "people don't come here to die – they come here to continue to live". There is so much that I could write in this about the changes to the Lifestyles team – it would fill five or six blogs. But none of it would have been possible if we had not recognised that there was a problem. The team had become complacent and needed shaking up. We acted on it quickly.

The benefits are there for all to see – people that we care for have a much improved, varied, fulfilling and person-centred lifestyles program. The results were there for everyone to see in April 2019 when the next surveys were sent out – a significant improvement in the results (and also for the care and kitchen departments) that vindicated the decision to swap people across departments.

## Embrace the negatives

It's important to accept criticism. Nothing will ever be perfect. If someone comes to you with a problem, then it should be accepted as a problem and considered rather than making excuses or brushing it under the carpet. It's part of being Outstanding – identifying where there are problems or concerns and dealing with them appropriately and promptly. The benefits that this has to the people you care for will be there for all to see.

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