Comment

“Staff and resident storytelling can help improve care homes”

People’s experiences of care homes are being used by the NHS Institute for Innovation and Improvement to help homes improve. The experience approach focuses on capturing and understanding people’s views, not just their perspectives of systems and processes. It draws out subjective feelings of residents or staff at crucial points in care.

Much can be learnt from capturing experiences about both the negative and positive aspects of care homes. Understanding experiences can build ongoing and open communication. This can lead to closer relationships between residents and care home staff, care home staff and general practices, and care home providers and hospitals, resulting in mutual benefits.

Care home managers have found using experiences has prompted profound and insightful comments from residents. For example, one manager told us a 74-year-old resident – who they thought didn’t like being in the home at all – made staff cry after saying: “This is the only place I have felt safe and secure in my whole life.”

The manager found from this approach that relationships with staff were key, rather than quality of food and decor, and hearing residents’ views as “feelings” rather than complaints made staff more amenable to sorting issues out.

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The programme focuses on empowering staff to make improvements that residents and their families want. This approach uses the experiences of residents and staff to help design better services, which we believe will lead to happier and more valued residents, and more positive, rewarded and empowered staff. We hope this will result in closer relationships between relatives and staff.

There are some fundamental barriers to communication across the different disciplines and levels of staff. These include hierarchy, gender, ethnic background and differences in communication styles. Poor communication is the most common root cause of serious errors, contributing to over half of all incidents of harm. Standard structures should help to improve this.

In any care environment, completing tasks can take priority. Improving efficiency in daily work, such as handovers, can free staff to spend more time on caring.

Effective relationships require time, conscious effort and nurturing. Staff, residents and carers will feel valued through capturing, understanding and using experience to connect at an emotional level.

Most importantly, being listened to and understood, and knowing their contributions can lead to improvements, will give residents – especially those with dementia – a real sense of self-worth. NT

The Care Homes Programme results will be available later this year. See www.institute.nhs.uk/carehomes

Liz Ward and Sophie Cowley are programme leads for the NHS Institute for Innovation and Improvement

HIGHLIGHTS

Standard data can improve nursing handovers p20

Best practice in colorectal cancer care p22

Protocols can cut falls incidence p16

Spotlight

Care that boosts autonomy in older people

The frailty of an older person means it can sometimes be easier just to do something for them instead of spending time in supporting them to take part in the action themselves.

This can lead to a dependent relationship between patient and nurse which, although well intentioned, may not lead to optimum care and quality of life.

We are proud to profile a model of care that explores the nature of the caring relationship in this group of patients. Caring For and Caring About aims to protect the autonomy of the older person.

The model encourages caregivers to move from a position of protecting and looking after towards one of encouraging and empowering as far as appropriate. Turn to page 12 to read the first part in our three-part series.

Kathryn Godfrey is practice and learning editor of Nursing Times.

kathryn.godfrey@emap.com

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