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Summary report of feedback from people using SCIE's action planning tool for care homes



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- identifying and sharing knowledge about what works and what's new
- supporting people who plan, commission, deliver and use services to put that knowledge into practice
- informing, influencing and inspiring the direction of future practice and policy.

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Written by Simon Stockton

Social Care Institute for Excellence
54 Baker Street
London W1U 7EX
tel 020 7766 7400
www.scie.org.uk



Background

In June 2017, SCIE launched a new online suite of resources designed to help care homes better engage with the personalisation agenda. The launch was timed to coincide with National Care Homes Open Day.

The resource included a new self-assessment and planning tool for care home managers to help them reflect on their own or together with colleagues and residents on what simple improvements would make the most positive difference to the lives of residents in the homes they manage. <https://www.scie.org.uk/person-centred-care/improving-personalisation-in-care-homes>

People were required to register on the SCIE website with basic contact details to use the resource.

In November 2017 the data from all those who had registered to use the resource was gathered and a second wave of work commenced to review and improve the reflection and planning tool and associated resources.

The review process, commissioned by SCIE was planned to take place in a number of discrete stages starting in late November/ December. SCIE commissioned the external consultant who designed the original planning tool and nicetree films who filmed material used in the tool itself to undertake the work.

The process was envisaged to take place in four stages to include:

- Follow up contact with all end users of the resource using a combination of 'remote' methods including email and phone interviews
- Face-to-face meetings with a shortlist of potential end users who may be willing to work with us in more depth including some on-site filming which would be used to enhance the resource
- Filming at up to three sites – using the tool live and capturing relevant film content to be used in the next iteration
- Reviewing the existing tool based on recommendations from care homes who have been using the tool.

This brief report summarises the learning from phase 1 (& part of 2) of the review

What we did

- Just over 50 people who had registered to use the resource were contacted by email and sent a follow-up questionnaire. People were offered the chance to contact by phone to which one person responded in this way. (The remaining numbers of those registered were not useful to the research e.g. SCIE personnel, CQC etc.).
- By mid-December, only two emails were received, one suggesting a willingness to talk to the consultant undertaking the review along with one completed questionnaire.
- A decision was made to extend the period for contacting people and concentrate on gaining phone interviews which would be likely to yield more valuable information.
- Follow-up calls were then made to approximately 35 of those respondents (focusing on those people whose phone details were retrievable and who appeared to be working in a care home as opposed to a commissioner or other generally interested party). Calls were made from mid-December to mid-January with a number of repeated call-backs to secure interviews.
- By 12 January a total of seven phone interviews had been conducted with care home managers plus one interview with a local authority commissioner.

Who responded?

The following care homes responded:

Contact name and home	Care home and key client group	Parent organisation?	Location	CQC rating	Open to filming?
Alison Hardy Athol House allison.hardy@leonardcheshire.org 020 8670 3740	Adults with physical disabilities and sensory impairments	Leonard Cheshire Disability	138 College Road London SE19 1XE	Good	Yes
Charles Jones Anbridge House Contact details anbridgecarehome@tiscali.co.uk 0161 665 2232	Older people		1 Herbert Street Watersheddings Oldham Lancs OL4 2QU	Good	Yes
Ruth Morgan Ashdale Care Home admin@ashdalecare.co.uk 01646 681 037	Older people		Ashdale Care Home, Golden Lane Pembroke, SA71 4PF	Wales based CSSIW Good	Probably but best after march
Margot McLauhlin Cambus Lodge Contact details info@cambuslodge.co.uk 020 7731 5814	Adults with learning disabilities		151 Wandsworth Bridge Road SW6 2TT - London	Good	Possibly

<p>Laura Jacob Lowenva Care Home Contact details laura.lowenvamanager@gmail.com 01726 850823</p>	<p>Adults 50+ inc. Dementia, LD, MH, PD</p>		<p>Rescoria, St Austell Cornwall PL26 8YT</p>	<p>Good</p>	<p>Yes</p>
<p>Lisa Cristina Panteg Nursing Home Contact details gadget4lisa@aol.com 08714232604</p>	<p>Older people</p>	<p>The Summerhill Group</p>	<p>Wern Road Sebastopol Pontypool NP4 5DT</p>	<p>Wales based CSSIW Some improvements required</p>	<p>Possibly</p>
<p>Jayne Wyatt Morning Stars Contact details jayne.wyatt@morningstars.org.uk 0121 551 0202</p>	<p>Mental Health</p>		<p>40 Somerset Road, Handsworth, Birmingham B20 2JD</p>	<p>Requires improvement (all areas)</p>	<p>No response</p>
<p>Dave Pruden Market Development Officer Leicestershire Council Contact details dave.pruden@leics.gov.uk 0116 3058123</p>	<p>Commissioner responsible for residential care in Leicestershire</p>				

What was difficult from the process and what can we learn from that?

- Home managers are very busy and finding times to talk to care home staff is hard.
- Getting the attention of care home managers is difficult – the commissioner who responded suggested that even getting responses from the sector about funding settlements was hard and he estimated they regularly get only 20 per cent of providers to engage in these discussions
- Most people who used the tool had a Good or outstanding CQC rating (only a few required improvement including one out of the seven completed questionnaires – however the home requiring improvement which did respond commented that their use of the tool was helpful and was mentioned in their recent inspection.
- Finding other ways to gather ongoing feedback (e.g. a pop-up feedback box on the site and/or incentives for people to share their suggestions) may help gather feedback in the future.
- Exploring how the resource could be used by commissioners or other bodies and providing some guidance or material to support this could be worth exploring.
- Endorsement or implicit support from other strategic bodies such as the **NHSE Care Homes Vanguard programme** , CQC or umbrella bodies like **CPA**) may provide other ways of improving take-up.
- Some virtual or/ low-level direct support for using the tool may be helpful in encouraging usage.

What were the key themes emerging from those who responded?

What people said they liked most

- Provided an overall picture of where the service is and where it needed to develop.
- Quite simple and clear to use and quite relevant.
- Feedback was quite fair – made me think of some of the things we don't do as well as we should do.
- Really easy to use actually. Wasn't too mindboggling.
- Very easy to use. I particularly liked being able to click on a statement that was relevant to our service. I also liked the visual representation of the results as this showed very clearly where improvements need to be made.
- Clicking on the statements was really easy. If I met most of the criteria, then I would click it.
- I think that overall, this is a good way of being able to see an overview of how the service is performing as a whole.
- Liked the options that were given – when it asked what are you planning to do with it. I am going to in the next staff meeting discuss it with staff – not all at once but next the person-centred approach – will ask them. This helps a lot with that actually.
- It's very detailed so you get a good understanding of how to use it. I like the fact you can print it off, write your bits in and go back to the computer and put it in there. And go back and review it as you've got the visual. In general, it's helpful as when it comes to CQC inspections and they're wanting evidence we can say we can show you the evidence as they've discussed it and it's alive in their thinking.
- Easy to use – got you talking and debating.
- It is really good I just really wish we had more time.
- It fits in with what should be the managers thinking in the way they see things and helps managers think a bit more strategically.
- The fact that I saw it through worked through it printed it out stuck with it to me says everything – it's quite straightforward to use. Anything which encourages personalisation is a good thing. Some managers think well I call her Beryl then I must be personal.
- I liked it. I thought it was good. The way you'd broken it down was interesting and the way you described each of the stages of each area was good.
- There is a lot of overlap but I didn't think that was a bad thing. I thought the closeness was good. I liked what you'd broken it down into. Most care home managers – asked what's your action plan would be well I'm going to fill my

beds. I think when you're dealing with 500,000 homes across Britain it can't be too complicated. It's got to be easy to break down and looks like a positive outcome no matter what you do.

- No matter where you are it kind of like makes you own the process. If you're at strategic level or the person talking to a person in a crisis or at their best moments it outlines where you are taking part in the process. Normally I'm reading policy documents. This felt different.
- I really loved the idea of the shwartz around it reminded me of when I worked in mental health. Dealing with how people feel emotionally about something.
- Not gimmicky. Its written and presented in a very clear way I think. I think the examples are really, really good. Especially areas that makes you think about different things. The variety of them makes it apparent that it's not work specific. It could happen to you at any time.

How people said it helped

- Provided information to form an action plan for improving the quality of the service and support to service users.
- CQC commented on the use of this tool in our recent inspection.
- I can use this tool during a staff meeting and encourage the staff to brainstorm different ideas on how we can make continuous improvements to our service. From this we will then be able to develop different ideas and move forward. The staff will (hopefully!) want to work towards improvements as they will have been actively involved within the process.
- To actually see what we offer within the home. We do a lot of it to be honest but it was to help with our next steps and planning. We're putting it into our goals for 2018 and we're then going to share with the residents to get their input.
- Filled it all in, sent it back, got a response – total score 26 that means I'm up to middle level so from there you look to see what you can do next.
- It helped me having these things broken down into the eight area because it puts things into words what you're thinking about. People don't always think of these words but they are aware when they're broken down. It makes it sound encouraging so it actually encourages you to think further.
- It's all there in front of you and put in a way which is easy to read and encourages you without the person realising they're being encouraged if they read through it all.
- It's made me more mindful... You're looking at the task rather than the impact of it. Sometimes as a manager it's not at the forefront of your mind...you can pick up on conversations So that you can start to model the behaviour. For quite a lot of my team English is a second language so the way they may say

something is maybe not so refined I suppose – words trigger emotions whereas sometimes in another language it might be said more bluntly.

- ...giving us a way to understand and deal with these issues.

What improvements people said would be most useful

- I'm looking at review progress and forward planning; it's obviously looking at once we've done it what can we do better.
- Maybe thinking it would be an idea to have pointers for people doing the audit of how you could change things.
- In the feedback why don't you try this or have you thought of this?
- Completing the evidence section did take quite a lot of time. If there was a way of making it less time consuming, maybe by using statements to click on? (although difficult as every service is different). Having a visual representation of improvements for each section? for example, bar charts or graphs?
- I think that the time it could potentially take, may discourage people from updating it regularly.
- I'm a very visual person. I loved the diagram when you fill out the pie pieces and I wondered if there could be something visual for each section so you could see your progress bit by bit.
- When I had to log the evidence that took some time. I've only got six service users. For a home with 40 people it might be too much.
- I couldn't say cause like I say I've only done one subject on it and it seemed to be fine.
- More feedback on what we could do. More suggestions – videos are great but you watch it but you forget then either video or next steps send an email to you or documents as well.
- Nursing homes are really busy places somebody can pass away and everything goes up in the air. Or if someone's ill. Something that's simple to come back to – we're really passionate about offering the highest quality of care so this is important but in the scale of things the simpler the better.
- Possible coaching offer to compliment would be good (author's note – this was in answer to a prompted question).
- I thought I'd fill the plan in but it wouldn't save it – forward planning – I filled it all in and asked it to review progress. I put the forward plan in and pressed save and it wouldn't let me do it. I wasn't sure why – I could type in but it wouldn't save it.
- A lot of our e-learning has video clips. There's lots and lots of videos that people can watch if that was referenced on the relevant page. Sitting in with staff and looking at a couple of videos with staff is the way that I want to go with evidence of them developing.

Who used the tool

- **Registered manager**
- Just me (registered manager) at home one afternoon to see what it was like and if it was going to be of any relevance. Looking at it now I think I want to go to the team and say this is what's come out with and talk to them about how are we going to deal with it and look for champions to pick up on particular areas.
- At this point, just myself, (registered manager) but I plan to share it with the whole staff team, to give them a better overview on what we are good at, and the areas in which we need to improve.
- Just me. Encouraged staff to go on the SCIE website as there is free learning but it's just me at the moment.
- Just me...
- A few of us (staff) were using it. Not yet tried it with residents – it was done with the management team. Did it away from the premises. We'd come back from the Care Show and we all happened to be together.

What does that suggest so far about how we might best improve the tool?

- Do more to encourage managers to use it with staff and (at least later on) with residents. Perhaps this needs to be a staged process which we may need to describe and/or demonstrate.
- Make the tool more colourful and attractive to use (e.g. use of infographics, more input on design).
- Improved functionality for planning – people should be able to make multiple plans and use it iteratively.
- Find a motif to get over people's reluctance due to overload and time pressure – e.g. What's the one thing you can do.... Today...this week...this month?
- Keep the balance positive in any changes so people feel that they are not being judged and feel encouraged to keep working to improve.
- Make it easy to put in different amounts of data depending on how much time people have got and how much they want to invest in using it – (e.g. if you've only got five mins try this, if you've got half an hour try this).
- Provide something to hook commissioners and encourage them to promote the resource.

What does that tell us about what film content would be most valuable?

- Footage of people using the tool in staff groups / mixed groups.
- Themed short pieces embedded each section of the tool which could be used to promote discussion.
- Find a way of giving a voice to people who are living in residential care to show them participating in the process of reflection and planning improvements.
- Perhaps use a film prompt – *do one thing* to embed a motif making it as easy as possible for people to use.

Additional reflections

- One person mentioned they also liked the relationship care model implying we may benefit from ensuring the tool is conversant with this as well *'the person comes with history, a past, family relatives and they may be here but they who they are reflects those people as well so how those people feel is important and care staff whether they like it or not will also be part of this set of interactions'*.
- The one commissioning manager who I talked to said he would be happy to use the introductory video (on the front page of the tool) to showcase to his quarterly provider forum and encourage them to use it (probably because it aligned with the type of improvements he was keen to see care homes adopt). Perhaps we could aim a part of the tool at commissioners.
- Visually this site may offer a design cue and or could offer software support? <https://stryv.io>
- Could we create film content with a commissioner?
- Could we film one who wasn't good and thought it was helpful for their CQC standing?
- How can we create some film content which you can use more than once?
- Needs to be neutral but useful.
- One thing I've done today – I moved the chair, I made a cup of tea, square video.
- Build in feedback pop up? '#' may not resonate with a tech-resistant workforce universal positive and insightful doesn't have to be big doesn't have to come from manager.
- Different ways in – leadership comes from anywhere come back to a motif.

