



Thinking Outside the Tickboxes

A report of a programme of training in
person centred practice within
services for older people

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**Based on the work of
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It is only when we learn to care about every elder as a human being – with a unique set of strengths and values to rely on, and a unique life to live – that what we provide can begin to be real care and what we support can begin to be real life. Regardless of age or stage, we all deserve to be as alive as we can be, to share as much as we can with the outside world, to derive as much satisfaction as possible from everyday living.

Helen Kivnick

We are grateful for the support and input from the managers and staff of Granton Day Centre, Clermiston, Silverlea and the Tower homes for older people. Without their enthusiasm and insight this work would not have been possible. We would also like to thank senior management in the North West Sector of the City of Edinburgh Social Work Department, who supported this project from the outset.

We owe immense gratitude to John C. Blacklaws and William Henderson. Their desire to improve life for people living in residential care inspired us, and their willingness to be involved with the pilot project set much of this work in motion.

This report is dedicated to their memory.

Helen Wilson and Sylvia Crick

Introduction

On a lecturing tour of Scotland in 1999, John O'Brien paid a visit to Edinburgh. He spoke to a packed audience and among those who crowded to hear the talk was a manager of a residential home for older people. Among O'Brien's stories was a powerful and moving anecdote about dreaming, which so captivated this manager that she couldn't stop thinking about it afterwards. It reminded her of one of the residents in her home, a former shepherd, who constantly spoke of wanting to return to the hills. This manager had always thought that there was nothing she could do about this desire. Gradually, she started to question this assumption. Why not? Surely there was something that she could do to help his dream come true.

In April 2000, Edinburgh Development Group (EDG) began work on a pilot project to introduce person centred planning to Silverlea residential home for older people. Over the course of eighteen months, this project worked with individuals on person centred plans and also explored issues with a group of people interested in increasing community links and connections with the community outside of the residential home. This project is documented in the report, "What I want is a Double Bed" (Lewin, 2002).

In summary, the partnership between EDG and Silverlea highlighted that people living in the unit were happy with the support they received in terms of their personal and physical care needs. However, many people said that they would like more social contacts and activities both within and outwith the home. It also recognised that current staffing levels make it difficult for every individual's emotional and social needs to be met by staff alone and that this area is deserving of more emphasis.

One of the main recommendations following this pilot project was that all staff should be supported to develop their knowledge of person centred working and that person centred tools and techniques should be introduced to the care home setting. Clearly, systematic staff training would be crucial for person centred working to take root in this environment.

In July 2002, EDG were invited to submit a proposal to the City of Edinburgh Social Work Department to undertake a programme of training with staff in four units supporting older people in the North West

Sector. Three were residential units with day care units attached (Silverlea, Clermiston and the Tower) and one was solely a day care unit (Granton Day Centre).

The report is a narrative account of that training programme and the effects it had on the staff and the people who live in and use those units. Although the report has been compiled by one of the trainers, it draws mainly on participants' training evaluations, direct feedback during and after the course and individual interviews following the training programme.

Throughout this report the reader will find references to specific tools and approaches that come under the umbrella of person centred planning. For further information about these tools and approaches, a recommended reading list can be found at the end of the report.

Programme Overview

The overall aim of the training programme was:

“To Introduce person centred approaches and philosophy to social care and senior staff working in residential and day care settings with older people.”

In order to cover all members of social care and senior staff within four units, the training programme was repeated four times. The four units included in this training programme were three Social Work residential homes and one Social Work Day Centre for older people.

The course was designed specifically to suit the needs of this specific context and took place over an initial two day session, at the end of which each participant identified a goal that they would focus on and work towards following the training. The trainers supported participants to identify their individual tasks, with the aim that all participants would begin to implement what they had learnt.

The initial training was designed to cover:

- Philosophy and values underpinning person centred approaches
- Aspects of person centred planning tools – life stories, dreaming, giftedness
- Reviews and care planning
- Implications for practice
- Action planning to take things forward

The main focus of the training was to look at how to discover the core values of each individual service user and what these might tell us about how the person might like to live their life and the kind of support that would best assist this. The emphasis was on creative thinking about how to support each person to continue to use their skills and gifts to make a contribution to society and how staff can help them to pursue their hopes and dreams.

The two-day course ended with a structured action planning session, when each participant was given time and space to think through and identify a goal to work on. Senior staff within the units were then available to help and support individual staff to carry out their identified action points and goals.

There was then a follow-up session of half a day (approximately three months after the initial training) to feedback progress on the tasks. This was an opportunity to discuss implementation and address emerging issues.

The training was delivered by Sylvia Crick and Helen Wilson of EDG. Sylvia and Helen undertook the pilot project with Silverlea home. Both have a wealth of experience of using person centred planning processes with individuals, as well as facilitating staff to think about their values and practices and training staff in person centred approaches.

This was the first time to our knowledge that such a systematic approach to enhancing person centred practices had been pursued within services to older people. The participants who attended the course included Social Care Workers, Assistant Unit Managers, Unit Managers and Night Staff.

Training Content

The initial two-day training input began with a focus on values and attitudes. Through a combination of experiential exercises and large and small group discussion, participants were encouraged to examine their own values and to relate these to their work context.

Two exercises supported participants to think about discrimination in society, and particularly relating this to older people who rely on services. This issue of power in society as a whole was then narrowed down to focus more closely on power and disempowerment within service settings. There was an explicit emphasis on building on the good practice that was already evident.

Following this, participants were invited to examine their own life and to think about what they value in it. This was related to the Five Service Accomplishments and their relevance as a framework for evaluating service provision in a unit supporting older people.

An introduction to the values and principles of person centred working and planning rounded off the introductory morning and led into the afternoon, which then introduced three key components of a person centred approach: Life Stories, Giftedness and Dreaming. These three concepts were offered as useful tools for getting to know someone and participants were invited to practice using the tools on themselves and to think about how they might be applied within their services.

The second day of the course moved on to focus more directly on how to support someone on to a day-to-day basis in a person centred way. Participants were introduced to the basics of essential lifestyle planning and were given the opportunity to practice using various parts of the tool, thinking particularly about gathering and sorting information, learning to listen, rituals and routines and writing support plans.

The final afternoon of the course was given over to thinking beyond the service setting, to the community outside. Several tools for mapping relationships and community resources and for thinking about community connecting were offered during this session.

The final part of the course gave participants time and a framework to make a specific action plan for a piece of work that they would undertake before the follow-up session three months later. For one of the courses, we were fortunate in having a member of care staff from one of the units as a guest speaker. She had undertaken a focused piece of person centred work with one resident as part of her HNC course work. It was extremely useful for staff to hear of her real experiences within their own context.

Evaluations of Training

The training course was repeated four times between November 2002 and February 2003. In total, over sixty staff attended the training. At the end of the second day of training, participants were asked to complete a simple evaluation of the course. The results were overwhelmingly positive.

Staff had clearly appreciated the opportunity to take time out from the day-to-day care provision and to actually engage with discussion about values and philosophy, which is often impossible within the context of providing daily care.

“It jogged me into thinking about clients as individuals again because you can become quite stale.”

Many times, people mentioned that they had felt valued by the course and by being given the opportunity to come on the training.

The exercises, topics and discussions were consistently described as “informative”, “thought provoking” and “interesting” as well as “enjoyable” and “fun”.

“It made me do a lot of thinking about myself and the way I approach the residents.”

The discussions concerning power, empowerment and the potentially disempowering practice within care settings obviously resonated with participants and caused many people to reflect on their own practice and on the way their service was organised and provided.

“We need to be aware of being in power and how frightening that can be for our clients. I had never really thought about that aspect before.”

Every part would appear to have been relevant. Participants were asked to single out the most useful part and all sections were mentioned, particularly the focus on giftedness, dreaming, life stories, essential lifestyle planning and making action plans. There was a sense that all the tools that had been taught during the course would be useful at some point with different individuals.

“It’s about breaking down barriers and assumptions to find the real person, using the talents of all people available to achieve the end goal.”

When asked what was least useful, not one person could suggest anything.

Staff had clearly learnt a lot from each other. It is rare for staff working within these environments to mix with staff from other units. There was evidently great benefit in this. Staff learnt a huge amount by sharing practice across units and were quickly able to identify changes that could be made to improve their own work setting. Their discussions with each other often pointed out ideas for what might be possible.

“It made me think and rethink practice”

Many people mentioned that they felt relaxed and had enjoyed the supportive environment, the accessible and fun training and the opportunity to meet with others.

There was a sense from the evaluations of people feeling energised and motivated and many said that they were looking forward to putting plans into action and then to coming back in three months time.

Follow-up Sessions

The idea of having a follow-up session three months after the training was so that participants would have a time to come back, to reflect on what they had learnt from the course and to feed back about what they had been able to achieve in working towards their action plan. This would be an opportunity both to celebrate positive stories and to flag up blocks and obstacles that might make this kind of work difficult in these specific work settings. This proved to be a crucial part of the training.

The follow-up sessions took place over a morning each. The format was generally the same for each, but varied slightly according to what issues were arising from each group.

The basic framework was:

- To think back to the content of the two-day course
- To reflect on the action plan that was made at the end of the course
- To discuss what had happened and to feed back what was working well and what was getting in the way of success
- To problem-solve around specific issues

The trainers offered several problem-solving tools to help people think around blocks and obstacles.

There was a lot of commonality between the feedback from each of the four training groups, both in terms of what had been achieved and also in what seemed to be getting in the way of success.

What Worked Well

Participants were invited to tell their groups about the work they had been involved in. The successful stories are summarised below:

Group Activities

Several course participants chose to focus on group activities for residents within the care home, such as organising video nights or

bingo nights. One home had planned for a falconer to visit with birds of prey and had invited people from other homes to join in.

Others had arranged excursions for groups of residents so that several people could benefit at the same time. Residents enjoyed visits to the Highland Show, to museums and one person organised a trip for residents on a barge. This was really successful, giving residents something to look forward to and then something to talk about afterwards. Being out of the home environment helped residents to remember things from their former lives and to interact more with each other.

The Activities Co-ordinator in one home organised inter-home carpet bowling matches, so that residents of different homes could socialise with each other. These events were thoroughly enjoyed by all involved and they included social time as well as the bowling. The unlooked for positive result of this was that residents were able to see how things are in other homes and could then make requests for things in their own home.

Connecting to Community Resources

Several people made links with local community resources. Linking to a local befriending project for older people helped one woman, who rarely left her house except to attend daycare, get out in the community. She now goes out shopping and to the Botanical Gardens. One course participant facilitated a link with a local church for another woman, who has been able to get to know people who share her love of walking and she has started going out for walks with them.

Workers in some of the units had capitalised on the DEMOS project, which aims to help support people to participate in the democratic process. Through this project older people in residential homes are linking into Council meetings via webcams.

Connecting with Family Members

Following the course, some participants decided that they would like to help the people who used their service to strengthen existing relationships within their family network. To do this, one worker accompanied a resident to a relative's wedding. Another was encouraging a resident's family to become more involved by going with the person on shopping trips to the local shopping centre. One unit decided to introduce communication books with families so that families could stay informed about how their relative was getting on in the care home. Writing up an individual's shift pattern on a resident's calendar helped the family to know when their relative's key-worker would be around in case they needed to talk to him.

Another participant left the course, returned to the workplace and supported a service user to look at her Circles of Friendship. In doing so, the service user decided that she would like help to trace a lost relative, so this became the focus on their work together.

Listening to People

The course emphasised the need to listen to people: to listen to people on their own terms, not just to what people might say with words but also to their body language and behaviour. One person, for example, had started using art to communicate and his worker was really pleased with how much this had helped him to open up about his life and feelings. Another participant talked about the need to find the right time to listen to a resident and how you can't just sit there and expect them to open up. For this resident, having a manicure provided the perfect ambience for a one-to-one chat.

Simply taking the time to be with people on a one-to-one basis had really shown results. One participant told her group how she had decided to focus on one individual resident who was very withdrawn and rarely spoke. As the staff member spent more time with her and went out with her one-to-one, she became more talkative. Together they went on more day trips to local sights and she became more and more chatty. This piece of work has really enabled this resident to join in more with other people and, as the worker phrased it, "she has life in her eyes again." The worker also had direct feedback from the resident that this had made a huge difference to her life.

Felix's Story

Felix has always been a witty man with a great sense of humour. He was a keen golfer and used to love going out for rides in taxis or on the bus. Since his wife became unable to take him out, these trips had stopped. Felix now has severe dementia and over time, as his dementia has increased, his ability to communicate has decreased. Most of the time his conversation seemed not to make much sense to anyone.

One morning a resident's wife was visiting and she and the keyworker were chatting about how things had been going, the lovely weather and her bus journey that morning down to the home. They talked about the things Felix used to enjoy doing, his love of music and how he used to like getting out and about. The conversation moved on to other things and a few minutes later, Felix, whom they had thought to be asleep, sat up and said that he missed going out on the bus.

The two women were astounded as usually they got little back from Felix in conversation. However, once Felix had said this, the key-worker thought she should act on it straight away. It seemed like quite a simple thing to arrange. Indeed, she organised for Felix to go out with the Day Care bus that very afternoon. She told Felix that he could go on the three o'clock bus and, astonishingly, he got himself ready with his jacket on to be downstairs at a quarter to three.

Felix thoroughly enjoyed his outing and even though he appeared to forget it immediately afterwards, it was fantastic to see him take pleasure in something. He has been out a few more times since. He has also started to articulate more. For example, he has been able to express his anxiety about sometimes not recognising his visitors. His key-worker is now able to support him by explaining them to him. By listening really carefully to Felix and giving him the time and space to go at his own pace, his life has become richer and his communication more meaningful.

Over and again, the crucial ingredients seem to be to listen carefully and then to act upon what has been said.

Life Story Work

Several participants had chosen to focus on the life story component of the course. Collating story books using photographs and pictures had been very successful for several people. One person really enjoyed telling her story and having a folder with photographs and stories, which she could then show to other people.

Finding out about someone's life story often offered possible ways forward for things to try in the future, such as reconnecting with old friends or activities that had been enjoyed in the past.

Dreaming

During the course some participants were quite challenged by the idea of dreaming, as it is often assumed that dreams and aspirations have little relevance for someone in the last years of their life.

However, several people returned to the workplace with the aim of encouraging residents and day care members to explore their dreams. Through doing this, one woman in her 90's revealed that she had always wanted to learn to play the piano and this was being organised.

Participants were perhaps surprised that, when asked, people did indeed have dreams and ambitions and several people said that there

were new things that they still wanted to learn, such as how to use a computer.

Exploring Gifts

Looking at people's gifts (their strengths, passions, hobbies and talents) proved to be very fruitful for many participants. They returned with a number of stories of helping people pursue their interests, be they in fishing, singing, wildlife or photography.

The following story illustrates very well how starting small with looking at one person's gifts can have remarkable results.

The Silverlea Gardening Project

One participant on the course returned to Silverlea with the idea of using photographs to stimulate conversation with one key resident. The photographs sparked off memories and allowed him to talk and through this, the key-worker found out lots more about his interests, one of which is his passion for gardening.

These chats carried on every week and gradually the resident began to come out of himself and become more talkative. He began to play the welcoming host to his key-worker for these chats, making him a cup of tea when he arrived.

This resident loved gardening and loved to watch the birds outside, so together they started feeding the birds left-over bread. Other residents followed suit and they began to chat together and many of them talked about their own love of gardens.

Some of the staff decided to do something to help residents take this forward. Initially, it started small. One resident decided to take on the job of watering the plants inside the home, using his calendar to remind him when this needs doing. A putting green was created on one area of the lawn.

The idea arose of trying to create a real garden for the residents of the home; a garden where residents would be safe to wander unsupervised, a garden which would be designed, planned and maintained by residents, staff and other interested people together. Currently, the garden is mainly grass and the paths are unsafe for residents to use unsupervised.

A survey was carried out in the home with residents to see what they would want from a garden. People generally said that they wanted to grow flowers and vegetables and to be able to see wildlife in the garden.

Some of this was very easy to achieve. The home acquired a couple of bird tables so that people could feed the birds and watch out for birds visiting. The paths are being fixed by the maintenance department and the local Councillor has committed her support to the project and is making sure that the fences around the garden are mended. The Council Parks Department have been to visit to advise on planting bulbs in the garden.

The project soon became so big that a committee was formed, including residents, three members of support staff, some relatives of residents and one member of the administrative staff who loves gardening too. This committee is setting itself up as a separate charity so that they can receive donations, which have mostly been given by residents themselves and their families. One resident felt so passionate about the garden that she left money for bulbs in her will. The Committee has also organised a few fund-raisers of its own, such as a sponsored walk and a car boot sale. It has been surprising how active some residents have been on the Committee and in speaking up at meetings. Gradually, the residents speak more and the staff speak less. Some residents love the gardening aspect but are not interested in coming to meetings, but everyone can get involved in their own way.

The project bought over a thousand spring bulbs for the garden and organised a bulb-planting day, when children from a local school went to the home and had a great day planting bulbs (in the rain!). One staff member approached his own former primary school to help with this and this has had several other spin-offs. These school children have also been involved in helping to design a wildlife garden, coming in to the home to talk to residents about what they would like and then drawing it. They also went to the home at Christmas to sing Carols with the residents.

Plans for the new garden are well under way. There is to be a completely new layout, with accessible paths, raised flower beds, a sensory garden and places to socialise. This will be a long piece of work, but there is a focus within that on smaller goals so that people remain enthused. Even in the winter, for

instance, residents can work on indoor gardening and growing cuttings.

There is a feeling that having common purpose to work towards has improved communication generally in the home. Seeing the residents enjoying themselves has been hugely satisfying for staff. For some staff, this project is helping to increase their interest in the job and their motivation. One staff member observed that it enables him to develop different relationship with residents when he is working alongside them as a fellow gardener.

Gardening is something that seems to give residents a more positive focus. Staff have been surprised by how many residents have wanted to get involved, even if they are just watching or giving advice: everyone wants to do his or her part.

This project all came about as a result of a couple of staff going on the course and returning to the home with the feeling that they wanted to help residents explore their gifts and realising that they could achieve more by gathering help and support from others.

Essential Lifestyle Planning

Several participants used the essential lifestyle planning framework to gather information about how a particular resident would like to be supported. One night shift worker had found this an extremely useful tool for getting to know one of the residents with whom he worked most closely. He was using this as the basis for creative action planning for future activities, such as visiting the Botanical gardens and exploring his interest in exotic countries by gathering travel books.

Using the essential lifestyle planning tool had encouraged people to be more critical of the current care planning formats, which people reflected were often worded in negative terms and were full of jargon. People were beginning to make changes to the care planning format to accommodate a more person centred approach.

One key-worker had used the Morning Routines section of essential lifestyle planning to help make sure one resident had a consistency of support around getting up in the morning.

Other Comments

Other things people mentioned which had contributed to success were determination and team work. Getting more staff cover to allow

for one-to-one work was crucial. One unit reorganised the rota patterns to enable more staff to be around to work with individual residents and introduced paid overtime for one-to-one work.

In more than one unit, shifts had been reorganised to free up time for specific work with individual residents. Working in small teams, staff could plan ahead to support each other to free up time to work towards specific goals with individuals. Staff were learning to be creative in making the most of the quieter times, such as when some residents are resting.

The general emphasis on values was something that most people said they had been able to hold on to back in the workplace. Even if achieving specific goals or tasks might have been difficult within the time and resource constraints, many participants stressed that they were consciously striving to work in a more person centred way on a daily basis.

The positive effects were obvious for staff and residents alike. Participants said that they felt motivated by what they had been able to achieve, and especially by the benefits they had seen for residents and service users.

What Gets in the Way

The most common problem that participants reported was that of staff shortages. They reported back that when staffing is short, the first thing to go is the individual work with residents. Additionally, it has already been acknowledged that the staff to service user ratios in care settings for older people are deplorably low. For some people, it seemed almost impossible to free up time to spend time outside of the unit with residents.

Not having enough protected time for individual work with residents is disheartening for staff if they start something and then don't have the time to see it through, as well as disappointing for residents. People reported that it is often hard enough to get through the basics of attending to care needs. Activities are often rushed because of the lack of time to dedicate to them.

Other people mentioned that the amount of paperwork that is required takes valuable time away from residents themselves. Nevertheless, information still seems to get lost. A lot still relies on the informal exchange of information amongst workers, but there are few records of the detail of how individuals like to be supported.

For some participants, the lack of knowledge of community resources seemed to be a hindrance to success. The lack of accessible transport was also mentioned.

Several people spoke of the institutionalised work practices which have become rooted in many care settings and which are hard to break. Not all staff in the units are positive about changing these practices and some participants reported resistance from other workers back in the units.

Feedback from Managers

Within three months of the final follow-up training session, individual interviews were conducted with managers of the services involved in the training.

Expectations of the Training

All the unit managers hoped that the training course would confirm good practice, stimulate thinking, challenge practice and would enable staff to take things forward as a team with a common vision, common understanding and common language.

Managers were also hoping that it would “broaden the approach to the job”, with an increased focus on individuals and looking beyond the care needs to the whole person. It was hoped that this would engender a more imaginative approach to care planning.

With the emphasis on action planning, managers were looking forward to staff returning with a specific idea of something they would try to pursue with an individual resident.

For some managers, there was a desire to see changes in the culture of the service as a whole, with staff feeling inspired and motivated to move forward in a positive way.

Were Expectations Met?

Unanimously, the managers said that their expectations of the course had been met.

“All staff, including night staff, said it was the best course they’d ever been on.”

One manager alluded to the fact that there is now more of a shared language in the unit, with people challenging the person centredness of the unit on a daily basis. All the managers reported that there is definitely a better understanding of the principles.

The managers felt that the course had boosted staff morale and some people had returned to work “truly inspired”. For some staff, the training had tapped into existing skills and values and helped give people practical ways of taking these forward.

However, some staff needed a lot of support in translating their learning into practice in the work setting. Supervision, coaching and mentoring are crucial to follow up the training, to help people develop ideas and be creative in thinking of new ideas. Some staff have done nothing with the training. Others have stopped after the first piece of work that was part of the action plan, suggesting that for some people the enthusiasm was hard to sustain on a day-to-day basis.

The course seemed to have the greatest impact where more staff within a team were able to attend. In units where a smaller proportion of staff attended, the training seemed to have less of an impact, particularly on the overall culture of the workplace. However, even in the units where fewer staff attended, there was seen to be a knock-on effect on other staff who did not attend the course.

What Helped?

There was a general feeling that the initial training was pitched at the right level: “it started where people were at”, by affirming and developing what people were doing already. The goal of being person centred felt achievable and relevant.

One manager spoke of the need to recognise individual skills and not expect all staff to excel at every aspect. Not all social care workers, for example, would naturally make good community connectors, so it is necessary to build on individual strengths.

All the managers said that the key factor in ensuring continuity of success in these approaches is to find opportunities to reflect on and develop the learning. In some settings, that is about using staff meetings to keep the discussions alive, affirming and encouraging good practice. Supervision, mentoring and coaching all play a crucial role.

As has already been mentioned by staff, allowing for flexibility within the rota and shift system pays dividends in freeing up protected time for staff to work one-to-one with residents.

It made a difference that so many people went on the training and could come back and talk about it to others who had been on the training.

“People who'd been on the first course were so motivated that it spread through the unit and the next lot were even more keen.”

The individual motivation of members of staff was obviously instrumental in much of the success of this project. Managers reported increased co-operation and team working, with staff members making compromises to support each other to make time for one-to-one projects. One manager reflected that some staff were feeling so motivated by individual pieces of work that they had been coming in to the unit in their own time. This was not an expectation, but people had done this voluntarily.

Managers felt that the follow-up day was a good idea because people came back from the training with a goal and then had to get started. At the follow-up day, they got more support and inspiration from the group to keep working towards the goal, as well as ideas for handling problems.

What Got in the Way?

Although the managers, like the course participants, mentioned that there are issues with lack of time, they also recognised that often it is about other things too.

For some units, there were clearly issues with low staff morale.

“Some staff members were already very jaded. For them it is often easier to carry on in the same old routine than to make changes.”

People are not sure about the new demands of the Care Commission and what impact that will have on practice, particularly in the area of care planning and keeping information.

Some staff are unwilling to make connections outside of the unit. Some of these new ways of working are outside the comfort zone of some staff. Further training and a lot of support would be necessary for many staff.

Benefits to Residents and Service Users

Managers were generally aware of the good stories that had been reported back at the follow-up sessions (see above) and mentioned other additional examples, particularly of using dreams, gifts and life stories to help support people in a more person centred way.

“There is more of a buzz about the place. We have been focusing on working in more person centred ways from the time a new resident moves into the home.”

One manager also referred to a much more sensitive approach to supporting residents to make choices.

Managers' Recommendations

In order to sustain this kind of work, all the managers said that they would require additional staff, particularly to support the work on making links with the community. Some managers mentioned that a dedicated Community Connector post would be advantageous. One residential home had the benefit of a student on placement whose main focus was to look at helping residents make connections and pursue interests, using the framework of the Five Service Accomplishments. This proved invaluable, with several connections being progressed on behalf of individual residents and small groups of residents.

All the managers also suggested that training in person centred practice should be ongoing for all staff and should be built into induction training at all levels.

Since supervision was felt to be so vital, some managers stressed the need for protected time for support and supervision. In addition, team time for ongoing learning would be required in the longer term. Managers felt there was a great benefit in staff having the chance to meet with staff from other units and settings to talk about the work and would like to see more of this in the future.

There was also a feeling that person centred approaches should be supported by policy and procedure at all levels to ensure success and continuity of service:

“These approaches need to be embedded in the policy for all units of this type and then resources put in to support the policy.”

Conclusions and Recommendations

The following are recommendations which the trainers offer as suggested ways forward with the implementation of person centred practice in services for older people in Edinburgh.

1. It is essential to find imaginative ways to involve and include residents in the design and delivery of their own services. People who live in and use these services should be informed of what they should be able to expect from a person centred staff team, so that they are empowered to make demands of the service for themselves.
2. There needs to be a greater emphasis on self-advocacy for older people living in residential care and living in the community. One thing that would help in this is more funding for groups such as SAGE.
3. Services should continue to strive to involve relatives in understanding how services work and particularly in understanding the shift towards, and their own potential contribution to, person centred working.
4. Over time, mechanisms should be created to facilitate the evaluation of the impact of person centred working on residents in terms of the improvement to their quality of life.
5. Training in person centred approaches should be available on an ongoing basis for staff working at all levels. It would be beneficial to include domestic and administrative staff in the training as well.
6. Time for ongoing learning and support for practice development should be protected within individual units. Opportunities for staff to have contact with other staff working in different units and settings should also be sought.
7. There should be a continued emphasis on community connections work, either through a dedicated staff post, through student placements or through prioritised staff time.

So, did the shepherd return to the hills?

In talking with him to explore his dreams, we discovered many more interests and passions. Although he never returned to the hills of his shepherding days, he did go out into the hills nearer to his home. There he met a sheepdog like his own and talked with people about his life as a shepherd. Through making a contact with someone from a farming background, he was able to visit the Royal Highland Show and reminisced about his shepherding career. We also found a local crook-making class, which he was able to attend and where he took great pleasure in sharing his expertise and knowledge of the Highland craft.

Helen Wilson
Edinburgh, 2004

Recommended Reading

People, Plans and Possibilities

Helen Sanderson, Jo Kennedy, Pete Ritchie and Gill Goodwin
SHS, 1997

Essential Lifestyle Planning – A Handbook for Facilitators

Michael Smull and Helen Sanderson, North West Training and
Development Team, 2001

Friendship and Community

Jo Kennedy, Helen Sanderson and Helen Wilson, North West Training
and Development Team, 2002

What I Want is a Double Bed

Melanie Lewin, City of Edinburgh Social Work Department, 2002

Living with Care, Caring for Life: Inventory of Life Strengths

Helen Q Kivnick 1991, University of Minnesota Long-Term Care
DECISIONS Resource Center

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