

The Voice of Excellence in Social Care

# care talk

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Issue 32

May 2014

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## Focus on dementia

**PLUS:** Up Close and Personal with Barchester's Trish Morris-Thompson •  
Why won't people believe that living well with dementia is possible? • A good life with dementia

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# Editor's Note

initiatives come together to create a national movement, celebrating and promoting excellence in social care. See page 18 for stories showing what our readers have been doing for Good Care Week.

resounding success. *Care Talk* was once again proud to support this prestigious event, which pays tribute to the dedicated and inspirational social care workforce. We look forward to the finals of the Home Care Awards on 6 June and this year's regional awards, which take place in October and November.

Welcome to the May issue of *Care Talk*.

May is a month packed full of awareness campaigns, including Dementia Awareness Week and Action on Stroke Month. Our article on page 8 tackles the issues of dementia and the reluctance of people to seek help. The message that stroke is a medical emergency will be familiar to anyone working in care services across the UK. The warning signs of a mini-stroke continue to go unnoticed, leaving thousands of patients at risk of stroke; see page 9 for how Stroke Awareness Month is aiming to highlight this issue.

Awareness of dementia – and the fact that it can happen to anyone – is growing. The figures are out there, and people recognise that many of us face the prospect of developing the condition. Our lead article on page 10 asks, 'Why won't people believe that living well with dementia is possible?'

The second Good Care Week began on 28 April. *Care Talk* is proud to be partners in this UK-wide annual awareness campaign, which sees local

Finally, we are delighted to report that the national finals of the Great British Care Home Awards, which took place at London's Grosvenor House on 26 April, were a

Enjoy this issue and please do keep your news and views coming in.

*Lisa*

## Circulation list

Has this month's *Care Talk* been read by all your staff?  
Use our easy circulation list to be sure!

| Job                | Read? |
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| Chief executive    | ✓     |
| Managing director  |       |
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| Ancillary staff    |       |
| Service users      |       |
| Families           |       |



▲ George McNamara, Alzheimer's Society's head of policy and public affairs

# Guest Editor



## Dementia – don't brush it under the carpet



**What would you do if you were concerned either you or a loved one might have memory problems? Would you speak to your doctor straight away or would you put it down to old age and hope it would go away?**

There are 800,000 people living with dementia in the UK and this number is set to increase to over 1m by 2021. Yet despite growing prevalence, diagnosis rates remain poor. One key issue is that many of those who have serious concerns about dementia are burying their heads in the sand and not seeking help. This is why this Dementia Awareness Week (18-24 May), Alzheimer's Society is telling people, 'Don't bottle it up – talk to us today'.

We know it can be difficult to talk about dementia. If somebody is concerned about the condition but is yet to seek help, they might be feeling scared, confused or even ashamed. Perhaps they are hoping the problem will just go away, but brushing the issue under the carpet is never the right answer.

If it is dementia, by getting diagnosed they will be receiving the information, advice and support they need. The sooner they know what they're dealing with, the sooner they

can get on with their life and feel in control again.

Jamie Anderson is a supporter of Alzheimer's Society and the son of Gerry Anderson, who created cult TV series *Thunderbirds*, *Stingray* and *Joe 90*, among others. Gerry was diagnosed with mixed dementia in early 2010 and passed away in December 2012, aged 83. Jamie regrets how he and his family bottled up their concerns about dementia to begin with.

He explains: "Although Dad was diagnosed in 2010, we started to notice symptoms two or three years before that. He was doing things like losing his way on familiar journeys, using strange ingredients in his cooking and struggling to dial numbers. Mum and I kept making excuses and told ourselves it was just a normal part of ageing, but if we hadn't brushed it under the carpet for so long, perhaps things would have been different."

Alzheimer's Society advises people to contact their GP if they are concerned about their memory but sometimes this can be a daunting prospect. For people in this position, or those who have concerns about a loved one and are looking for information and advice, Alzheimer's Society provides a National Dementia Helpline.

The helpline is manned by friendly, trained advisors who understand the needs of

people with dementia and their carers. It can be a good place to signpost people to in the first instance and it is also possible to email enquiries through.

This Dementia Awareness Week, if you come into contact with anyone who is concerned about dementia, encourage them to stop bottling it up and talk to Alzheimer's Society today.

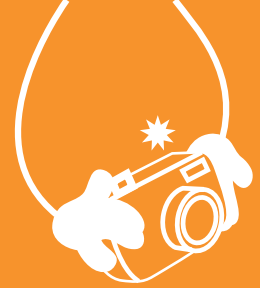
Dementia Awareness Week 2014 runs from 18-24 May. Find out more at [alzheimers.org.uk/daw2014](http://alzheimers.org.uk/daw2014).

### Be dementia aware

Dementia affects everyone differently, but here are some key things to look out for:

- Struggling to remember recent events or people's names
- Finding it hard to follow conversations or programmes on TV
- Repeating yourself or losing the thread of what you're saying
- Experiencing difficulty concentrating, thinking things through or following instructions
- Feeling confused even when in a well-known place
- Becoming unusually anxious, depressed or agitated.

# Sport Relief, 21 March, BBC1



CAUGHT ON  
CAMERA



**Amid all the celebrity cameos and humour of this year's *Sport Relief* telethon, there was a short film that tugged at the heartstrings of eight million viewers, not least because, as the voiceover pointed out, it was about something that "could happen to each and every one of us".**

Bob, now 92, told how he first met his wife Cath in 1937, and proposed in a letter to her while serving during the Second World War. Against a backdrop of family photos and home videos, he talked about their happy life together – and how "the bottom fell out of my world" when Cath turned to him one evening and asked 'Where's Bob?'

She was diagnosed with the early stages of Alzheimer's, and he managed to nurse her at home as the condition progressed until she passed away, with

Bob at her side, three years ago. Still visibly upset by the loss of his beloved wife, Bob explained how Silver Line, a 24-hour helpline set up with *Sport Relief* cash in 2013, had offered him "a lifeline", providing a friendly voice when he woke up in the middle of the night and needed someone to talk to.

Since the broadcast, the YouTube film of Bob's story has already been viewed by another 20,000 people, with a number leaving online comments to express how moved they were and talking about their own experiences of dementia affecting loved ones. As one person said: "It is literally my worst nightmare losing someone in such a horrible way as that." Another commented: "People need to be more aware of this."

It isn't often you can see how a TV audience responds in real time, but *Sport Relief* was one of the programmes featured in Channel 4's *Gogglebox* the following week, and Bob's story had a massive impact on the families and couples who are regularly filmed airing their views.

Whatever their age or gender,

*Gogglebox* participants were openly moved, with several in tears at the end after smiling through the tale of Bob and Cath's romance. It prompted memories of aunts and grandparents they had lost to the disease, a discussion about the difference between Alzheimer's and dementia, heartfelt announcements to partners – "I couldn't cope without you" – and at least one immediate phone donation to help fund initiatives like Silver Line.

Real stories about real people, particularly in such high-profile programmes that attract wide audiences, can definitely make a difference in increasing both awareness and understanding of dementia.

What *Gogglebox* showed was that it is already in people's consciousness – hopefully Bob's story, and his appreciation of the support offered by Silver Line, also got the message across that funding in the right places can help those with dementia and their carers and families to deal with the disease and its aftermath.

**Vicky Burman**

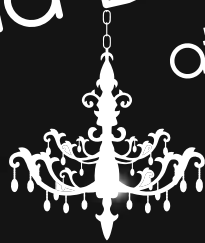


Great British Home  
Care Awards

2014



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# Dementia Awareness Week

## 18-24 May

If you're worried that you, or someone close to you, may have dementia, it can be difficult to talk about. You may feel scared, confused or even ashamed. You may also be hoping that the problem will go away so you don't have to deal with it.

We all bury our heads in the sand from time to time. But if you're seriously concerned, and the problem continues, it's important to talk to someone about it. The sooner you know what you're dealing with, the sooner you can get on with your

life and feel in control again. That's why this year's Dementia Awareness Week on 18-24 May is all about opening up. We want anyone who's concerned about dementia to stop bottling it up and to talk to Alzheimer's Society.

Throughout the week there will be national and regional press coverage, awareness-raising and fundraising events across England, Wales and Northern Ireland, and a national advertising campaign.



### Top businesses train staff to be dementia-friendly

More than 40% of us know someone, or have known someone, living with dementia, yet public understanding of dementia is still surprisingly low. According to research, dementia is the most feared condition of those over 55, and this fear coupled with lack of understanding can mean that many people feel they don't know how to talk to people with symptoms of dementia.

**“Dementia Friends should enable people with dementia to feel more independent when they go out.”**

We know that for some people with dementia, things that many of us take for granted, such as day-to-day errands like shopping, can become daunting and more complicated. Increased understanding of dementia is important and this is where Alzheimer's Society's Dementia Friends can help. Dementia Friends is an Alzheimer's Society initiative that aims to give people an understanding of dementia and the small things that could make a difference to people living in their community. Dementia Friends has been gaining increased momentum across England and there are currently 80,000 Dementia Friends within local communities.

**“Staff will be better equipped with the right tools and understanding to assist customers living with dementia.”**

Many people living with dementia have told us that shopping and visiting their local high street can be very stressful. A recent study by Alzheimer's Society found that one in four people with dementia has given up shopping since being diagnosed, even though the majority feel this is the most common activity that enables them to feel part of their community. Dementia Friends should enable people with dementia to feel more independent when they go out.

We are delighted that, as part of our Dementia Friends initiative, major businesses, including Argos, Homebase, Marks and Spencer and Lloyds Banking Group, have committed to train their staff to become Dementia Friends. This will enable staff to be better equipped with the right tools and understanding to assist customers living with dementia. From being more patient with a customer paying at a till point to communicating more clearly over the telephone – there are many ways in which becoming a Dementia Friend will help staff interact with people with dementia.

This announcement from businesses

will bring us a step closer to becoming a dementia-friendly society. I know from speaking to many people with dementia just how much of a difference this could make to their lives. Sometimes it can mean the difference between staying in the community or being forced to move to a care home prematurely.

Dementia can happen to anyone and there is currently no cure but, with the right support, people can live well with dementia. We are now calling on other businesses to follow the lead of Homebase, Argos, Marks and Spencer, and Lloyds Banking Group.

Employers interested in offering Dementia Friends sessions to their staff should visit [www.dementiafriends.org.uk](http://www.dementiafriends.org.uk)



**Jeremy Hughes**  
Chief executive  
Alzheimer's Society



# Action on Stroke Month

## Mini-stroke: helping care home staff recognise a medical emergency



**The message that stroke is a medical emergency will be familiar to anyone working in care services across the UK. However, the warning signs of a TIA (transient ischaemic attack, or mini-stroke) are frequently undiagnosed, leaving thousands of patients at risk of stroke.**

A new report from the Stroke Association to mark Action on Stroke Month shows that about a quarter of people agreed that health professionals are too quick to dismiss TIA. Every year, around 46,000 people in the UK have a TIA for the first time, and given how often the condition is undiagnosed, the Stroke Association estimates that the figure could be much higher.

Someone having a TIA may experience one or more of the FAST stroke symptoms (facial droop, arm weakness, speech problems). Less common symptoms can include confusion, visual problems, vertigo or loss of coordination. Typically, TIA has a sudden onset, but unlike stroke, the symptoms are fleeting and last no longer than 24 hours.

There is no way of knowing whether a patient is having TIA or a stroke when the symptoms first start, so care home staff should respond by calling 999 immediately.

It isn't always easy to spot if someone has had a TIA. Symptoms have often resolved by the time a healthcare professional sees the patient. However, there are a number

of risk factors professionals working in care services should be aware of, such as older age, hypertension and diabetes mellitus.

It is vital that people experiencing a TIA receive urgent assessment and treatment; the risk of stroke in the first few days following a TIA is extremely high. Urgently investigating and treating people who have a TIA or minor stroke could reduce their risk of having another stroke by 80%.

### Case study: Working with care home staff to tackle TIA

During 2013 and 2014, the Stroke Association carried out training with care homes in the West Midlands and north west of England. Staff members took part in QCF Level 2 in Stroke Awareness and Level 3 in Stroke Care Management courses.

From the pre-course questionnaires, it was apparent that the majority of care home staff involved in the training could not identify a TIA and did not know how to treat the condition. Following the training, 100% of delegates responded that they would treat TIA as they would a stroke, and would dial 999 as soon as the symptoms started.

**“Care workers have a huge responsibility to be ambassadors to those in our care, to fight their corner, and to act quickly.”**

One delegate taking part in the QCF

Level 3 Stroke Care Management course recommended the training for anyone working in the care sector. She said: “This course has empowered me to make the lives of people in our care that little bit better – to be better understood and better supported. I now have concrete knowledge to share with colleagues and also to challenge professionals.

“I have realised there is a lot more to strokes than I originally thought, despite having worked with elderly and vulnerable people off and on for the past 15 years, including stroke survivors.

“Three of our residents have suffered suspected TIAs since I started the course, and I have found my newly found knowledge rolling off my tongue. It really has been an eye opener to how rapid response, GPs and emergency services lack interest once signs of a TIA have subsided. Care workers have a huge responsibility to be ambassadors to those in our care, to fight their corner, and to act quickly to give patients the best chance of recovery from symptoms caused by stroke.”

#### Cate Burke

Head of stroke training  
Stroke Association



To find out more information about the Stroke Association's specialised training, email [stroketraining@stroke.org.uk](mailto:stroketraining@stroke.org.uk).

For details about Action on Stroke Month, visit [www.stroke.org.uk/strokemonth](http://www.stroke.org.uk/strokemonth).

# Why won't people believe that living well with dementia is possible?

**Awareness of dementia – and the fact that it can happen to anyone – is growing. The figures are out there, and people recognise that many of us face the prospect of developing the condition.**

**But why are we so fearful of dementia, compared with other diseases? Is it because it encapsulates all our worries about ageing, losing our identity and becoming vulnerable and dependent on others?**

**Every month *Care Talk* features stories about work being done to help people with dementia continue to do the things they enjoy, remain as independent as possible, a valuable part of their community and their family – basically to live well with dementia.**

## Attitudes to dementia

But the latest YouGov poll found that 43% of people do not think it is possible to live a good life if you have dementia. Of those surveyed in 2013, 45% said it would be hard to tell their family if they thought they had dementia. In 2012, 26% said they knew less about dementia than other serious conditions. A total of 42% agreed that people don't talk about dementia enough, and 22% said that if people talked about it more, they would understand it better.

Every year, Dementia Awareness Week tries to change attitudes to dementia, to remove the stigma attached to it, so that people are more likely to seek an early diagnosis, make the most of the support available, and find – along with their families – ways to live with it as well as possible.

This year's theme is to talk about concerns, not bottle them up (see page 5). As Alzheimer's Society recognises "you may feel scared, confused or even ashamed" about the prospect of having dementia, but also makes the point "the sooner you know what you're dealing with, the sooner you can get on with your life and feel in control again".

There is of course no hiding from the fact that there is as yet no cure; it is

a terminal disease and a diagnosis will have an enormous emotional impact. But more understanding of what can still be done to help maintain quality of life could ease the inevitable distress, and encourage individuals and their families to really discuss the situation and develop appropriate responses to the challenges ahead.

This is not possible in the climate of fear that surrounds dementia – so how do we change that?

## Media coverage

Public perception of dementia is largely shaped by the media, but as Toby Williamson, head of development and later life at the Mental Health Foundation (which has campaigned for years to destigmatise mental health issues), wrote in his blog: "We need to actively challenge the language that is so commonly used in the media when the subject of dementia is being discussed."

Picking a broadsheet newspaper article about dementia at random from an online search, Toby says it is "filled to the brim with sensationalist language and there is one paragraph that does not contain some highly-charged phrase or other. For example, the journalist describes how dementia is a 'terrible burden on families' and talks of the 'insidious onslaught' and 'inexorable advance' of the disease. In describing a man diagnosed with dementia, the journalist talks of the 'timebomb inside him' that began to 'lay siege to his brain' and that 'four years later his mind is on the cusp of untethering itself from its final mooring posts!'"

Toby believes: "It is crucial that we move away from the image of dementia as a 'living death', and instead use language that is realistic but positive, and without resorting to euphemism. Above all, the message we need to get across is that people are 'living with' dementia and not 'dying from' it."

Increasingly TV features characters with dementia, but often the focus is on loss and distress. So it's good to see more positive images, like More4's recent documentary series *Grand Canal Journeys*, which follows married actors Timothy West and Prunella Scales – diagnosed with Alzheimer's – on their canal boat, still a hobby they both love after many years.

**"The latest YouGov poll found that 43% of people do not think it is possible to live a good life if you have dementia."**

Timothy says such journeys are perfect for his wife: "She can't remember things very well, but you don't have to remember things on the canal. You can just enjoy things as they happen – so it's perfect for her."

This angle got plenty of media coverage, as has another high-profile individual, author Terry Pratchett, who has openly voiced his feelings about having dementia and the importance of trying to live well with it and ensuring funding is available to provide support and to search for a cure.





In his foreword to the 2008 Alzheimer's Society report *Out of the Shadows*, he says: "The first step is to talk openly about dementia because it's a fact, well enshrined in folklore, that if we are to kill the demon then first we have to say its name. Once we have recognised the demon, without secrecy or shame, we can find its weaknesses."

Alzheimer's Australia offers straight-talking advice to the media on how to cover stories about dementia, pointing out: "Life doesn't stop with a diagnosis of dementia. While it is a debilitating condition, many aspects of life can still be enjoyed. When media generates outdated stereotypes and ideas, it contributes to the fear and stigma surrounding the condition."

The society highlights the value of positive images and representing the views of people with dementia themselves to normalise the issue. "Humour can be an effective way of diminishing fear of the condition, but must be used with great sensitivity. While sharing 'funny' anecdotes that people have revealed themselves can really work to reach audiences, the standard Alzheimer's/dementia jokes have little capacity for increasing understanding. The 'test' to be applied is, 'does this maintain the person's dignity?'"

## Cultural issues

The trouble is that, as initiatives like Time to Change have tried to address in relation to mental health, people are fearful and reluctant to discuss dementia. That can be a cultural issue.

The All-Party Parliamentary Group on Dementia study *Dementia does not discriminate*, published last July, found that knowledge and understanding about dementia in the black, Asian and minority ethnic (BAME) communities is particularly low, and there are myths and taboos attached to the condition.

The study found it was often not seen as a health condition, with most respondents associating dementia with 'getting old' or mental illness. There was no concept of cognitive impairment among some BAME families, resulting in the belief that older people were 'putting it on because they need attention'. In other communities dementia and mental illness were linked to being possessed by evil spirits, or

retribution for past 'bad deeds'.

Some Black Caribbean and Asian respondents viewed dementia as a 'white person's disease', because they had not come across the condition in their country of origin, and believed that people in their

community got dementia as a result of coming to the UK.

It is telling that there is no term for dementia in South Asian languages. It is often referred to in terms such as 'not being able to remember things' or 'losing memory'. Chinese people who took part in the research said there was a way of describing dementia, but the word was very derogatory and used in a negative and insulting way.

## Targeting the right audience

One recommendation by the All-Party Parliamentary Group on Dementia was that schools and young people should be a key component of any targeted campaign to raise awareness and understanding of dementia, given "the important role young people play in changing community attitudes".

**"It is crucial that we move away from the image of dementia as a 'living death', and instead use language that is realistic but positive, and without resorting to euphemism."**

Initiatives like the development of dementia-friendly communities, the 2011 Design Council and Department of Health Living Well with Dementia design challenge and Dementia Friends who can open up the subject for discussion, as well as closer links between individual care homes with dementia beds and their local communities generally, can all help increase the number of people who may be receptive to new thinking about dementia, even when it does not affect them directly.

Recognition of the potential to have a good life with dementia – and a genuine belief and desire to enable this – among all health and care professionals is another important element of any change in how the subject is approached and discussed. Learning from insights like those captured in *A Good Life with Dementia* (see page

38) can make this the norm.

But whatever the audience, the most important voice is that of people actually living with dementia.

The 2012 Joseph Rowntree Foundation study *Perspectives on ageing with dementia* explores the work of the Scottish Dementia Working Group to increase awareness, challenge understanding and lobby for policy change.

This powerful action group was set up in 2001 by two people with dementia, Agnes Houston and James McKillop, and in her introduction to the report Agnes makes her feelings clear: "We don't want to be seen as suffering from dementia, this is a term we really do not like. We are living with it and getting on with it with laughter and love and that makes a difference. We are being heard and our opinions valued."

People may find it difficult to talk about their diagnosis, but members of the Scottish Dementia Working Group feel that contributes to the stigma. Agnes writes in the study: "I have decided I will speak out about dementia, not hide it away. I believe I have a duty to let the public know that a diagnosis of dementia is not the end, but the beginning of a new life."

Some members say their lives have actually improved thanks to the camaraderie of the group and the opportunities a commitment to campaigning for change has offered.

In the report, James McKillop, who received an MBE in 2011 for his services to people with dementia, says: "I know I have a deteriorating illness and it won't last but I could have died 10 years ago if I had been given a diagnosis of terminal cancer; I wouldn't be here and look at all the happiness I've had."

Agnes (Scotland's Dementia Awards 2013 lifetime achievement winner) agrees that life with dementia can be very good indeed: "When I was working and looking after my dad, I didn't have the quality of life I have now ... it might not be for a long period of time but the quality is gold-plated, it is absolutely wonderful."

And James' message to other people, especially those newly diagnosed, in his introduction to the Mental Health Foundation guide *Still Going Strong*, is clear: "If you take a positive outlook and are determined to get on with life as best you can, I think you will be pleasantly surprised at what you can achieve."

Now it is a case of getting that sentiment out to as many people as possible, whether they have dementia or not. Dementia may be an incurable condition, but that does not mean that getting it inevitably makes you a hopeless (or helpless) case.

**Vicky Burman**



## CARE PROVIDERS

### Testing ways to make general practice more accessible (Source: Care UK)

Care UK, the independent sector health and social care provider, will develop a national pilot to test new ways for patients to access their local GP services, with an improved mix of longer face-to-face appointments and telephone and online consultations.

The pilot is the only national initiative to be supported by the Prime Minister's Challenge Fund, established to develop and support innovative approaches to providing primary care services. The pilot, which will be developed and tested in nine practices across England, will provide the facility for those patients who prefer to have their consultations dealt with by a nurse or GP online or by telephone to access their local GP practice 24 hours a day. Such consultations will be particularly appropriate for managing simple or existing chronic conditions and providing signposting and clinical advice to patients who are less able to attend their practice in person.

For more information, visit <http://www.careuk.com/news/national-pilot-test-new-ways-making-general-practice-accessible-and-sustainable>

### Kent home care providers named after council service revamp (Source: BBC News)

A list of 23 home care providers that are to work with Kent County Council (KCC) has been unveiled after a revamp of services.

Care workers had raised concerns about the new system and clients had also said they were worried that their carers might change. The council has reduced the number of companies it works with from about 120, and believes the move will lead to stronger relationships and better management, as well as savings of £2.7m a year.

For more information, visit: [www.bbc.co.uk/news/uk-england-kent-27019145](http://www.bbc.co.uk/news/uk-england-kent-27019145)

## End of life

### Carers of terminally ill miss out on vital support (Source: Marie Curie Cancer Care)

Families are not getting the support they need to cope with the overwhelming demands of caring for someone with a terminal illness, according to new research by the University of Edinburgh Primary Palliative Care Research Group, NHS Lothian, Voices of Carers across Lothian and Marie Curie Cancer Care.

The study *Understanding the barriers to identifying carers of people with advanced illness in primary care: Triangulating three data sources* suggests that family (and other unpaid) carers are not accessing support services or vital benefits because they and healthcare professionals do not recognise, or overlook, their needs.

For more information, visit <http://www.mariecurie.org.uk/en-GB/Media/Press-releases-and-comments/Carers-of-terminally-ill-miss-out-on-vital-support-new-research-reveals/>

## NHS

### GP opening hours scheme 'to benefit 7.5m patients' (Source: BBC News)

Extended opening hours and enhanced care for the elderly will soon be available at doctors' surgeries across many parts of the country. The Department of Health claims that millions of people will be able to see their GP outside working hours, including late night and weekend appointments, while the elderly and those with more serious health complaints will get tailored care, coordinated by just one local GP.

Health Secretary Jeremy Hunt and NHS England chief executive Simon Stevens have set out the proposals for:

- More GP access, with over 7.5m people in England offered increased access to their GP services, including seven-day opening and 8am-8pm appointments
- Personalised care for the most vulnerable - 800,000 people with the most complex needs, mostly aged over 75, will also be enrolled onto a separate Transforming Primary Care programme of proactive, personalised care in the community. These patients will be offered an enhanced service, including individual care plans reviewed regularly with patients and carers by GPs, nurses, carers and other health professionals, a named GP responsible for their care and same-day access to a GP when they need it.

The Prime Minister's £50m GP Access Fund will support 1,147 practices, covering every region, to offer extra services for those who struggle to find appointments that fit in with their family and work life. GP groups have responded enthusiastically to the call for ideas on how to modernise services and will now bring in a variety of forward-thinking services to suit busy lifestyles, including greater use of Skype, email and phone consultations for those who would find it easier. The fund was originally expected to help just 500,000 people but has been expanded as a result of a high level of interest from surgeries across the country.

For more information, visit <http://www.bbc.co.uk/news/health-27015353>

## Sector

### NCF announces international partnership (Source: National Care Forum)

The National Care Forum (NCF) and the Aged & Community Services Australia (ACSA) have signed a memorandum of understanding (MoU) to share their resources and networks and to encourage members within each organisation to collaborate on matters of mutual interest.

NCF executive director Des Kelly and ACSA chief executive Professor John Kelly (no relation) signed the MoU linking the two organisations when they met recently during the International Association of Homes and Services for the Ageing (IAHSA) conference in Shanghai.

Des Kelly commented: "The NCF is excited by formalising this relationship to network and support each other. We want members within each organisation to collaborate on matters of mutual interest and to share information."

For more information, visit [http://www.nationalcareforum.org.uk/viewNews.asp?news\\_ID=1540](http://www.nationalcareforum.org.uk/viewNews.asp?news_ID=1540)

### Skills for Care and National Skills Academy for Social Care to merge (Source: National Skills Academy)

Following discussions, Skills for Care and the National Skills Academy for Social Care have agreed, in principle and subject to contract, to merge their organisations. Both parties anticipate that the merger will take place by the end of this month.

The merged organisation will combine the expertise of both teams to create an offer for employers in the sector covering the leadership, learning and development needs of the sector's 1.5m workers at all levels, from frontline staff to senior leaders. Existing members of the National Skills Academy will retain their membership within the new organisation.

Sharon Allen, current chief executive of Skills for Care, will stay on as chief executive of the merged organisation. Debbie Sorkin is leaving her post as National Skills Academy chief executive to take up a new role as national director of systems leadership at the Local Government Association Leadership Centre.

For more information, visit <https://www.nsocialcare.co.uk/news/skills-for-care-and-national-skills-academy-for-social-care-to-merge>

### CQC announces changes in regulatory fees (Source: CQC)

Following consultation, the Care Quality Commission (CQC) has published details of the fees to be paid by providers during 2014-15. All services registered with CQC are required under the Health and Social Care Act 2008 to pay fees to cover the cost of registration and inspection.

The fees scheme reflects government policy, which requires CQC to recover the costs of regulation from providers, and has been approved by the Secretary of State for Health.

Fees changes include:

- A differentiated increase to fee charges, based on current levels of cost recovery, which will mean a 1.5% increase for adult social care providers and a 2.5% increase for all other types of provider except dental services
- Adjusted fee bandings for providers of care home services to more evenly distribute fee charges.

CQC chief executive David Behan said: "As a result of the consultation we ran last year, this is the decision we have made for the year 2014-15. We will undertake a review in the year ahead and consult again regarding next year's fees in the autumn.

"We will continue to review fees in consultation with stakeholders, while ensuring that we are delivering value for money."

For more information, visit [www.cqc.org.uk/organisations-we-regulate/registered-services/fees?qc](http://www.cqc.org.uk/organisations-we-regulate/registered-services/fees?qc)

## Dementia

### Dementia caring a growing issue for business (Source: Carers UK)

Dementia is moving 'centre stage' as a business issue. Half of the UK's 6.5m carers juggle work and care – and a rising number of carers are facing the challenge of combining work with supporting a loved one with dementia. The number of dementia carers alone is set to reach 850,000 by the end of the decade.

Business forum Employers for Carers – founded and supported by charity Carers UK – has published new research showing that both employers and employees are being hit hard by a growing impact on the workforce of caring for people with dementia.

The forum's survey of businesses found that 90% believed dementia was an increasingly big issue for their organisation, adding pressure on employees, causing physical and mental health problems and leading to declined productivity and a loss of valuable staff members.

In an accompanying survey of carers who juggle work and looking after a loved one with dementia, just over half said their work was negatively affected due to their caring responsibilities:

- One in five had cut their working hours
- One in 10 had to take on a less senior role.

Only 7% said caring had no impact on their capacity to work.

For more information, visit <http://www.carersuk.org/newsroom/item/3471-9-in-10-businesses-say-dementia-caring-a-growing-issue-for-their-workforce>

## Learning disabilities

### Shared Lives approach shows positive results (Source: Shared Lives Plus)

The first national report into Shared Lives care in England has found that almost 10,000 disabled and vulnerable adults are enjoying improved lives as a result of living in Shared Lives arrangements.

Shared Lives is a radical form of care that centres on sharing home, family and community life to support older and disabled adults to lead fulfilling and active lives. It enables people from all kinds of backgrounds to draw on their families, friends and neighbours in supporting isolated and vulnerable citizens, using the Shared Lives carer's own family home.

The independent countrywide study has calculated that 9,660 people are currently being supported in Shared Lives arrangements in England. Many have been shown to be enjoying more fulfilling lives as a result, with over 90% making new friends, half going on holiday for the first time, and over a quarter joining a club not exclusively for disabled people for the first time in their lives.

Shared Lives has also been independently proven to provide significant savings compared with traditional forms of adult care – and the report estimates that if every region in England were to catch up with same the level of Shared Lives provision as the highest performing area, then savings of £150m per year could be realised.

For more information, visit <http://www.sharedlivesplus.org.uk/news/latest-news/237-government-minister-gives-backing-to-major-new-report-showing-shared-lives-care-transforming-lives-of-disabled-adults-and-older-people-across-england>

# How can trade charities help people struggling to pay for care?

**Richard Wilson, chief executive of the Cinema and Television Benevolent Fund (CTBF), talks about the charity's new partnership with care and housing provider Anchor, which will allow professionals with at least two years' service in the film or commercial television industries to receive discounted care.**

The news is full of reports about the rising cost of care in later life, which, coupled with England's ageing population, poses a number of challenges for the care and charity sectors. It's vital that third sector organisations think strategically – and it's not just down to age-related charities to respond to this need.

As a trade charity, the CTBF has a responsibility to respond to the growing needs of film and television professionals experiencing hardship across the country. The film and television industry is a huge one, and we can help anyone from SFX supervisors and make-up artists to TV schedulers and cinema managers.

**“Later life care support can affect the whole family, and we want to ensure we can support as many people as possible.”**

We have a proud tradition of caring for older beneficiaries, owning and operating Glebelands care and nursing home in Wokingham. However, we know that there is a growing need for later life support and we want to be able to support beneficiaries across the country at this time in their life.

This is why we have partnered with care and housing provider Anchor to offer all industry qualifying personnel a discount on any Anchor care home. We're going one step further by extending this offer to parents of industry qualifying personnel, potentially tripling the number of people who might benefit. Our decision to extend this offer recognises that later life care support can affect the whole family, and we want to ensure we can support as many

people as possible.

Our National Care Plan fits in well with our wider welfare offering, as we provide financial and emotional support for those working behind the scenes in the film and television industries who find themselves in need for one reason or another. Our welfare work is designed to help people living with hardship and can include assistance with living expenses and housing support.

By raising awareness of the opportunity to enjoy discounted rates across different regions, a greater number of older people will be able to benefit from Anchor's high-quality person-centred care.

Its person-centred approach was one of the reasons CTBF chose Anchor as a partner.

**“I love working with the residents and enjoy spending time with old people, ensuring they are looked after and stimulated through meaningful activity. I know I am helping improve their lives.”** – Activity coordinator Anda Ho, who works at Anchor's Abbeywood care home in Surrey

Our welfare visitors regularly visit people who could benefit from help with paying for care as they get older. Here's what they have to say about the new National Care Plan:

**“It's a fantastic opportunity for people to move into a high-quality care home near their**

**families; it's great that we can continue to support both industry-qualifying personnel and their parents through later life.”** – Patsy May, CTBF welfare visitor for the South West

Anyone who feels they might be eligible and would like to find out more should contact the CTBF on 0800 138 2522. More information is available at [www.ctbf.co.uk](http://www.ctbf.co.uk), [www.twitter.com/theCTBF](https://www.twitter.com/theCTBF) and [www.facebook.com/TheCTBF](https://www.facebook.com/TheCTBF). Further financial and emotional support is available on an individual basis in line with the CTBF's wider welfare offering.



# Care farming: cultivating confidence

Impacting positively on the lives of some of society's most vulnerable people through guided horticultural and farming activities is the ambition of a new social enterprise.

SweetTree Farming For All, a not-for-profit organisation, has been launched to help improve the wellbeing of individuals who may encounter social or educational exclusion for a wide range of reasons.

Through specially designed and managed projects, the organisation is aiming to make a positive difference to the lives of people of all ages, abilities and with a variety of care and support needs; from individuals with mental health conditions to those with acquired brain injuries, dementia, learning disabilities, ADHD, physical disabilities, an offending history, or a history of alcohol or substance abuse.

“Horticultural therapy is an emerging field of clinical practice that recognises the benefits that interacting with plants and greenery can bring.”

For participants, the projects will offer the chance to try out and develop skills in horticulture, forestry and animal care, with all activities designed to create positive experiences within a safe, nurturing environment.

“Horticultural therapy is an emerging field of clinical practice that recognises the benefits that interacting with plants and greenery can bring,” explains founder Barry Sweetbaum, managing director of SweetTree Home Care Services.

“It can be very powerful on many levels and as a care provider, focused on stimulation, socialisation and helping people live their lives to the full, it was an interesting area for us to explore. With their experience in this area, partnering with Farming For All was a natural next step.”

SweetTree Farming for All has been created by SweetTree and community interest group Farming For All. It draws on SweetTree's specialist domiciliary care experience and Farming For All's expertise in care farming.



“We already run seven projects of this nature and it is fantastic to be able to build on these experiences and to develop them even further through our new venture,” explains Jude Allen, founder of Farming For All. “We know first-hand that these projects have the potential to help change lives. They enable people to re-engage with both society and themselves, to demonstrate capabilities and develop a renewed confidence in life.”

The social enterprise has already received the backing of Britain's top gardener. Upon hearing about the organisation and its aims, Alan Titchmarsh was delighted to offer his support. “Growing things and getting in touch with the land is an often overlooked means by which we can all find greater fulfilment in our lives,” says Alan.

He continues: “For those who find themselves isolated due to disability or simply 'not fitting in' for all manner of reasons, working with nature and the natural world offers a positive lifeline that has no equal. SweetTree Farming For All recognises this and is determined to ensure that those who can benefit from contact with the land are able to experience for themselves the healing qualities that farming and horticulture offer.”

The launch follows a successful pilot programme in 2013 that saw the development of SweetTree Fields farm in Mill Hill, North London. The farm was attended weekly by



participants and their carers and the feedback received from attendees was incredibly positive.

“For those who find themselves isolated, working with nature and the natural world offers a positive lifeline that has no equal.”

Barry Sweetbaum says: “The pilot project was a great success and we really want to build on it and develop it further, to provide even greater opportunities for more people to access the service.”

He adds: “Supporting people to live independent, active and fulfilling lives that really embrace their individual likes and needs is very important to us. Through SweetTree Farming For All we hope to give some of the most vulnerable in the community the chance to benefit, by creating a safe environment for positive, enjoyable experiences.”

SweetTree Farming For All will begin by developing care farming projects in the Home Counties and around London. For more details visit [www.sweettreefarmingforall.org.uk](http://www.sweettreefarmingforall.org.uk) or call 0207 644 9505.

# Avoiding sleepwalking into a crisis

**The 2030 vision on the future for older people in the UK, published by Independent Age, is something of a sobering read. It follows the format of setting out two alternative futures – best case and worst case – against such factors as money, relationships, work and learning, lifestyle, health and care.**



▲ Des Kelly, executive director, National Care Forum

Life expectancy has been steadily rising and is undoubtedly one of the great achievements of the 20th century. However the evidence suggests that of the 21.1 additional years that a 65-year-old woman can now expect to live, it is likely that only about half of those will be disability free.

**“I regularly see wonderful examples of innovative and inspiring practice ... but they are not yet the norm.”**

Current trends, if left unchanged, show that long-term illness could rise by 44%. Furthermore, it is estimated that dementia may affect well over a million people by 2030 in England alone. We have known this for some time but it seems we are beginning to have a public debate about the significance and impact of such demographic changes.

Dementia is primarily a condition of later life. More people living longer means there will be more people with dementia. Certainly for residential care services, providing support with people with dementia has become the norm, with Alzheimer’s Society estimating that 80% of residents in care homes have

dementia. This is a situation that has happened more by default than design. We haven’t really planned for it and are probably not properly prepared for it.

The way we work with people; train, develop, supervise and support staff; the way we manage and develop services are, as a consequence, still catching up with expectations and demands. That is not to say that examples of good practice can’t be found – some providers are developing outstanding services to support people with dementia and their families. I regularly see wonderful examples of innovative and inspiring practice ... but I also know they are not yet the norm.

**“A willingness to share information and examples will help develop new models of service and ways of working that are vital for the future.”**

Thoughtful design, sensitive use of light and colours and gardens, reminiscence approaches, awareness training, environmental cues, the use of technology all contribute to changing the culture of care and a

more promising future. I am reminded whenever I see services that it is the small things that truly enhance quality of life for people in care settings. We have to put our effort into spreading the word about what works and sharing best practice ideas that make the most difference. Evidence-gathering and a willingness to share information and examples will help us to develop the new models of service, new relationships and new ways of working that are vital for the future.

This requires fairly fundamental but necessary change to ensure that the growing proportion of older people can look forward to later life in the confidence that health and care services are being designed and managed in ways that will support their independence and choice and control. The Independent Age report calls for tough policy choices that engage the public and break out of the cycle of thinking only in the short five-year electoral terms. And 2030 is really not that far away!

**Des Kelly**  
Executive director  
National Care Forum





# LUCY IS HERE FOR YOU ON YOUR RAINY DAY, WILL YOU BE THERE ON HERS?

All of us will call on Britain's 1.8 million care workers at some point. They are our largest workforce, but also one of the lowest paid. By fundraising or donating just a little you can help The Care Workers' Charity provide support to care professionals going through tough times.

The rainy day fund for everyday heroes  
[www.thecareworkerscharity.org.uk](http://www.thecareworkerscharity.org.uk)

the  
care  
workers  
charity



28 APRIL - 4 MAY

Celebrating the good care behind Great Britain

## Second national Good Care Week declared a success

Good Care Week took place from 28 April and was a resounding success. The UK-wide annual awareness campaign, in association with *Care Talk* magazine, saw local initiatives come together to create a national movement, celebrating and promoting excellence in social care. The aim – to raise the profile of social care professionals, challenge negative stereotypes and champion the many thousands of heroes who provide good care across the UK every day.

### Get involved and champion good care

Be a part of this groundbreaking initiative in future years to raise awareness of social care and ensure that this sector gets the respect and appreciation it merits.

- Get your colleagues involved; care workers, managers and providers. What could you do collectively to raise the profile of social care in your local community? Open days, encouraging volunteers and visits from local schoolchildren are just some simple yet effective initiatives.
- Get your service users and their families involved. Ask them to support the campaign by providing testimonials about their care provision.
- Write to your local MP about Good Care Week. Ask them to help you raise the status of social care in your community and formally support the campaign.
- Share your ideas with us for raising the profile of social care locally so that colleagues throughout the sector can emulate this in their own communities. We will feature your examples, stories, comments and suggestions on the Good Care Week website and in *Care Talk* magazine.

Of course, you can be a Good Care Champion all year round – ongoing promotion of the work done to provide great care can really help improve people's views of the sector.

### Sector supports Good Care Week

/Hillside Lodge Care Home, Pulborough

#### Shaw healthcare: It's all in the conversation

Inter-generational conversations have been filling the air at Shaw healthcare's Hillside Lodge Care Home in Pulborough, West Sussex. Nursing home residents and students have been enjoying time together, thanks to the innovative thinking of Shaw healthcare and Seaford College.

The project has seen three students being welcomed at Hillside Lodge every Thursday over a number of weeks, and focuses on different generations coming together for conversations in relaxed environments, while at the same time highlighting many generational similarities and differences of the people, not simply the age differences.

Activity coordinator Martine Fish said: "In the planning stages, I wasn't too sure about the idea of this project but it has given so much joy to the residents, who really love seeing the students. It has been a real eye-opener for me and we shall look forward to more interaction with Seaford College."

Students have been talking, reading, joining in musical entertainment and simply having a cup of tea while enjoying the company of an older person. This is not work experience; students are not engaging in any delivery of personal care. This is inter-generational community interaction at its best, taking place in communal areas within the care home.

/Sector support

Supported by





28 APRIL - 4 MAY

## Celebrating the good care behind Great Britain

### /Christies Care: Inspiring community to use local services



The second annual Good Care Day held by live-in care specialists Christies Care at their training centre in Saxmundham provided practical, useful information to more than 60 people from the local community.

The Christies event, as part of Good Care Week, created a real buzz with the local media

with director Lin Barnes appearing on BBC Radio Suffolk, superb features in the prominent *Suffolk Magazine* and *Essential Suffolk* as well as numerous articles in local papers and newsletters, including the widely circulated *East Anglian Daily Times*.

With a focus on stroke, care speakers from a range of organisations took to the stage to raise awareness of the symptoms, supporting services available in the area and practical guidance to deal with the administration required in times of crisis.

The programme included speakers from Christies Care and the associations and charities it works with – such as Age UK Suffolk, Suffolk Family Carers, Headway Suffolk Services, Co-Op Services, Gotelec Solicitors, The Hearing Care Centre and the Stroke Association.

Feedback from attendees confirmed that the mixture of expert opinion, information and personal testimony was reassuring and informative. Tips on how to access services available in the area and how to organise power of attorney were appreciated. The event also provided a valuable networking opportunity for local businesses and residents.

### /Colten Care: Young stroke survivor 'wowed' by care home generosity



Colten Care's Avon Reach care home in Mundeford, Dorset, has raised more than £750 to help young stroke survivors.

Local woman Claire Whitehouse, who suffered a stroke when she was just 19, campaigns on behalf of the Stroke Association, and said the generosity of elderly residents at Avon Reach had left her "blown away".

The money was raised through a gala dinner, raffles and the sale of arts and crafts items made by residents, including knitted teddy bears and paper flower displays.

Claire, now 23, said the cash would help towards providing better information and facilities for young stroke survivors, who can feel very isolated and alone after leaving hospital.

Avon Reach resident Ray Holliday presented a cheque for £765.60 to Claire at a reception in the home.

### /Abbeyfield Kent Society: Fundraising to grant older people's wishes



Staff at a children's nursery in Maidstone have worked together to raise funds for the Abbeyfield Kent Society's new fundraising initiative, The Wish Appeal.

Staff and parents of children at Alphabets Nursery have helped to raise over £60 for the Wish Appeal, providing the first donation for the initiative, which aims to grant final wishes for the older people living with the Abbeyfield Kent Society, a charity and housing association with care homes across the county.

Christine Devlin, home manager at Connors House, a residential home in Canterbury, said: "We recently granted a wish for one of our residents who wanted to see a film at the cinema; it only cost around £30 but it made him so happy, he can't stop talking about it."

In accordance with the nursery's eco school values, the staff incorporated recycling into their fundraising. Debbie, Nicola, Gemma, Natalie and Poppy, all employees at Alphabets, brought in their old clothes and encouraged the children's parents to bring their unwanted clothes too.

When they had plenty of sacks of unwanted apparel, they used a scheme called Rag Bag, a service that pays by the tonne for unwanted textiles, to generate funds for The Wish Appeal.

### /Amore Care: Teaming up with local students



Amore Care's care home The Willows, in Chesterfield, Derbyshire, has demonstrated its commitment to Good Care Week by teaming up with students at a local school to bridge the generation gap and share life experiences.

The Willows was visited by a group of students from Netherthorpe School once a week for six weeks. The young pupils each partnered up with a service user from the care home to discuss how things have changed for each different generation; ultimately they were able to create a book based on their shared experiences.

Netherthorpe School head teacher Rachel Batham said, "The students were reluctant at first, worrying what to say, but after the first 10 minutes they looked forward to their weekly visits.

"They had conversations and exchanged banter with the residents, and enjoyed getting first-hand accounts of events that they had only read about in history books. The students made an attachment to the different characters so much and are now planning to visit their new friends during the school holidays.

"Students said they didn't want the sessions to end; they had a brilliant time and thought it was a fantastic project. They said they hope to keep this connection going."

# A floral tribute to . . . care

**“I value the importance of independence and thought it was a lovely idea to help someone remain that way rather than having to go into a care home.”**



## Do you often meet someone who makes you want to be a nicer person?

I met one recently and her name is Tracey Davies. Having only been in her job a few months, she was nominated for and won a Great British Care Newcomer Award for the London region . . . and it's easy to see why. The job?

Tracey is a care giver for Home Instead Senior Care, but she used to deliver flowers. So why did she make the move?

“My job was delivering flowers,” Tracey smiles. “One day an elderly woman opened the door and she must have been in her 90s. She asked me to come in and I felt so much warmth towards her when I saw how sparse the little place was. She was coming across so lonely, offering me a cup of tea. She really touched my heart.”

Tracey told her that she'd pop in if she was ever passing and went shopping for her to buy simple things like tea and biscuits. This continued for a short while before there was no answer. When the next visit was the same, Tracey asked the neighbours but they knew nothing. Five months passed before Tracey knocked again – still no answer. Dead, or moved into a home, Tracey never discovered.

But there was a legacy; the elderly, lonely woman had sown seeds of change.

“I had time on my hands and saw an advert on the internet for home care where you could choose your own hours. I value the importance of independence and thought it was a lovely idea to help someone remain that way rather than having to go into a care home.”

The first few people were difficult to care for, but Tracey more than coped. As in most things, personality either helps or hinders, and Tracey has a big personality; it certainly helps in the homecare world. She believes herself to be a ‘little bit mad’ and though I'm not sure what the dictionary definition of mad is, if it's believing nothing's too much trouble, then Tracey Davies is completely bonkers.

When I ask her what she thought the judges saw in her, she replies: “Maybe I like a challenge, but I really enjoy reaching out. I work with a woman with Alzheimer's and when we're together she never stops laughing. Her daughter said that although her other carer is very good at what she does, it's me who brings out the best in her. I try to bring a bit of fun to it all – ill people can live sad lives.”

Though it's a stupid question, I ask what the best part of the job is?

Instant reply: “It's when I see my ladies laugh and smile. My client with Alzheimer's thanks me a lot and says that without me, she'd have to go into a home. That means so much to me. I enjoy what I do so, so much. It's given me an extra reason for living.”

## “There was a legacy; the elderly, lonely woman had sown seeds of change.”

So what does an award-winner think are the qualities needed to be a good carer today?

“You need to be passionate and have plenty of empathy. I don't think that people are given enough training. It amazes me how some people get the job to begin with and last so long! It infuriates me and should never happen. You have to love the job.”

After speaking with Tracey, I knock on 84-year-old Don's door and ask him if he'd like to have a coffee with me. He said yes and I'm very glad he did – for both of us.

### Debra Mehta



# PJ Care signs major sponsorship deal to boost girls' football

## Specialist healthcare provider PJ Care has given girls' and women's football a major boost.

It has agreed a five-figure sponsorship deal with Milton Keynes club MK Dons to help develop girls' football in the Buckinghamshire area.

The money will go towards improving the fitness and wellbeing of girls in the four junior teams at under-11, 13, 15 and 17 levels.

The MK Dons club not only has a high-flying senior women's side, it is also one of only 32 clubs across the country to be licensed by the Football Association to run a Girls' Centre of Excellence.

Jan Flawn is the founder and chair of PJ Care, which provides specialist neurological care at Mallard House and Bluebirds in Milton Keynes, as well as at the Eagle Wood Neurological Care Centre in Peterborough.

Jan says: "We are really pleased to be working with MK Dons to help with the development of girls' and women's football.

"Our sponsorship will help girls from the local community not only develop their football skills, but also their health, fitness and general

wellbeing at a really important time in their lives."

Through a partnership with local gym owner Laura Bowley from Happy Bodies, Centre of Excellence players will undergo a special training regime tailored around their needs.

They will attend group training evenings at the nearby gym and have regular follow-up sessions to check on their health and fitness progress.

The MK Dons Ladies elite squad will be given a similar regime of fitness tests and follow-ups.

Charlene Ward is from the MK Dons Sports and Education Trust (SET), which helps the club develop its sporting links with the community.

She says: "The great support from PJ Care does not only offer the girls' programme financial support for this season but allows MK Dons SET to develop and sustain existing opportunities for female sport within Milton Keynes and surrounding areas."

Charlene adds: "The work we are doing here is already paying off, with one of our under-17 players being invited to train with the England squad.

"Players from the squad come from all parts of the local community, and a great deal of what we do is to encourage them to live healthy lifestyles, stay fit and be active.

"This partnership with PJ Care and Happy Bodies is a fantastic extension of that."

SET, which has been central to setting up PJ Care's sponsorship, works to create innovative programmes and projects based around sport that can benefit local communities.

It currently runs a girls' skill centre for children of all abilities between seven and 14, holiday courses, and works with schools and community groups to encourage girls to get involved with sport.

PJ Care will work alongside the MK Dons SET to promote, highlight and raise awareness of women and girls in sport – and particularly in football.

For its part, PJ Care will have its name on the front of the shirts of all five Girls' Centre of Excellence teams.

Jan says: "I'm delighted to be able to help support and promote these young women. They are at the top of their sport in the area, and will become role models for other girls who want to achieve and develop their talents."

Charlene Ward adds: "Thanks to the fantastic support we have from PJ Care we are able to continue developing the female programme and raise the profile of the game in the local community, most noticeably within the girls' elite game and the Centre of Excellence.

"We are looking forward to our continuing relationship with Johann van Zyl, PJ Care's chief executive officer, Jan Flawn and the team at PJ Care, as they are committed to helping develop Milton Keynes and the community within their organisation, in the same way that we are using sport and in particular women's football.

"This is an exciting partnership, thanks also to Jan's success as winner of the First Women of Business award last year. She is keen to leave a legacy for female sport, something she is already helping us make great strides towards."





# How can you encourage a person with dementia to have a more meaningful life?

We all know that for a person living with dementia, life doesn't have to stop. There are many approaches to care planning and activities that can encourage people with dementia to still have a meaningful life. We asked a group of care professionals their views.



**Nicholas Kee Mew**  
care team manager, Runwood Homes

I believe it's important to empower a

resident to make their own choices and to retain their individuality, so I practise person-centred care. I do a life story to find out all about them and encourage them with their care plans. I like to encourage someone's hobbies. One of the residents used to work in a library, so I created one in the home and we bought a lot of books and now she goes there every day. Being there means so much to her.



**Stephen Burke**  
director, United for All Ages

It's about building on their strengths so that they're not

just sitting around the house watching TV. I'm a big no-no on TV! Getting to know them and talking with them and their families is vital because they can tell you what their interests were. Tapping back into those interests is really good. Enjoyment makes a meaningful life and that doesn't mean just doing things that are frivolous – enjoyment can be something that makes the person feel useful.



**Haddy Mybe**  
care worker, Anchor

I encourage a person to have a more meaningful life by not looking at their dementia as an illness. You have to make them feel comfortable and

help them a lot with things they normally do and encourage them – make them feel part of you. I also believe in encouraging a service user to do as much for themselves as possible.



**Rose Dogruel**  
MiHome care

This happens by talking and communicating – asking the resident and their families what that person

liked in life so you can gauge what they might like now. I can tell when someone is living a meaningful life because they're happy – they're smiling and laughing. A happier person will be eating and communicating. Happiness means a meaningful life – if someone's happy in their environment, and happy to talk with you, it gives meaning.



**Joyce Barnard**  
care worker, Home Instead Senior Care

I encourage a meaningful life by getting to know the service users and keeping as normal a way of life as possible.

It's very important to keep to their routine and to do the things they've always enjoyed, even if you have to modify them slightly. It's important to make them feel wanted and a normal part of society – that they can still do the things others can do and still contribute to society.

## Conclusion

- Get to know the service user
- Communicate with the families
- Encourage independence
- Encourage laughter
- Encourage choices
- Keep their routine
- Ensure they remain part of their community

# Should people living with dementia be encouraged to take risks to promote independence?

Maximising control, independence and choice are all key to person-centred planning for people living with dementia. We asked a group of stakeholders, 'Should people living with dementia be encouraged to take risks in order to promote independence?'



## The Government

Dr Glenn Mason, director for people, communities and local government, Department of Health

I absolutely think that for people with dementia the management of risk is key – and key for all of us. When I leave this building, I'll be crossing roads and going down stairs and, fingers crossed, I will reach the station and be perfectly fine. It's the same for people with dementia, or the users of care services: it's all about how to manage risk rather than how you take risk away.

## The national charity

Paul Dunnery, area manager, Alzheimer's Society

Absolutely! The worst thing we can do, as a risk-averse culture, is to prioritise risk issues before quality of life. Risk assessment should be there to promote quality of life not to detract from it.

## The care provider

Margaret Spence, manager, Community Integrated Care

It's about assessing, and the control measures put in place, so they can take risks, because life is a risk. We've got residents with minimal dementia who have signed up to a buddy system so they can actually go out and be tracked, as they don't want to go out with us because it's viewed as too much control. However, the local authority telecare carries a buddy system and that provides a range of where they can go – into town, for example. It's about monitoring. Just because you've come into a care home, you shouldn't have all your risks taken away from you.

## The charity care provider

Jan Lovett, care home manager, Fremantle Trust

Absolutely – life is one big risk. Risks can be managed and lessened but without risk in our lives, life is pretty much not worth living. If you wrap someone up in bubble wrap just because they have dementia, it's not the way to go.

## The care worker

Tracy Sutheran, senior carer, Community Integrated Care

That's hard, isn't it? They have got to take risks, but obviously we need to be there to support them at all times. Dementia is a horrible condition, but you have to let people live an independent life as much as they can. We have a four-unit care home and one is a dementia unit, and absolutely, they do take risks, with our support.

## Conclusion

- Managing risks
- Prioritise quality of life
- Monitoring to promote safe independence
- Supporting the person living with dementia

# Mrs MACBLOG

Finally got back to my flat after a short spell in a nursing home to convalesce. They were very nice at the home, and I knew quite a few people, but there were some who had quite severe dementia and didn't seem to recognise me, or even to know where they were half the time.

I saw one man who constantly wandered around with one shoe on and one shoe off, and I think he was searching for the missing one. And there were several who just seemed parked in front of the television and asleep all day. One woman screamed any time anyone came near her or tried to move her. That was horrible to see.

Dementia is a terrible thing. I get worried because I get forgetful all the time and I wonder if I'm heading for dementia too. I know that it doesn't follow – everyone gets a bit forgetful, because we've too much

going on in our heads all the time – but it's a horrible disease to get and no one would have it if there was a magic pill to take to prevent it, or cure it.

I've known people with dementia who seemed to be in a good place – quite a rosy-coloured world; but there are just as many others who are in a frightening place, which gets more and more alien as they get locked deeper into the dementia. I can't imagine what it's like to become fearful of the world around me. I mean, we all know it can be a strange place but that's not the same as being frightened to death half the time, or angry that you can't understand something.

But hark at me! The other day I tried making a telephone call with the TV remote!

*Mrs MacBlog*

*Mrs Mac is now 91 years old. She has lived in extra care accommodation for over five years and she has been widowed for 12 years. She gets four calls a day.*



## Challenge for care workers – discuss the following issues.

1. Verona does actually have a level of dementia, but she doesn't identify what she has seen in the nursing home with how she feels. It's a progressive disease with no cure. How can you look out for signs of Verona's deterioration?
2. Is being a bit muddled and forgetful an inevitable sign of having (or getting) dementia? There could be other reasons why people are confused. Can you name some?
3. Dementia means people lose understanding of the world around them, including everyday objects that they've regularly used. How can you help people feel safe and confident in those everyday things?

# This is Your Life

**As I walked out of the greeting card shop I had tears running down my face. I can't quite remember now if they were tears of hurt or tears of anger, probably both. My wife came up to me and whispered "Whatever is the matter?" and I explained everything to her.**

Only minutes before I had entered the shop to buy some Christmas cards, and when I went to the counter to pay, my dementia kicked in, and I became a little confused. I explained to the staff member that I would be a minute or two as I have a diagnosis of dementia and would get there in the end; what happened next will stay with me for the rest of my life.

He laughed out loud, in my face, and said "OH YES! I HAVE THAT AS WELL!!" And it was a full two minutes that passed before he finally realised I was serious and apologised profusely!! I turned around and walked out of that shop, humiliated, upset and empty handed, and VOWED to myself, my wife and all those that are touched by this awful disease, that this would never happen ever again. That day the Torbay Dementia Action Alliance and the Purple Angel dementia awareness campaign was born!!

That was a mere two years ago. I have now lived with this awful disease for six years, but in the last two years I have seen more progress than ever before in an understanding of this disease. Not just because of what we here at the Purple Angel campaign have done, but because good honest hardworking people have decided to stand up and tell the world how it really is LIVING WITH DEMENTIA and not DYING FROM IT.

In the last two years we have gained worldwide recognition; the Purple Angel logo is now an international symbol for dementia awareness. The world didn't have one before, we do now. Please see ADI link

<http://www.alz.co.uk/symbol>

All information about this and how to become a Purple Angel Ambassador is available here <http://www.ostrichcare.co.uk/care/ostrich-purple-angel-ambassadors.aspx>

So, as you can see, there certainly is a 'Life after a Diagnosis'. Please remember, I have dementia, and if I can do all this, just imagine what we could ALL do if we put our minds to it!!

Norrms McNamara





# UP CLOSE AND PERSONAL WITH...

## Trish Morris-Thompson, director of clinical governance and quality, Barchester Healthcare



**With more than 30 years' experience in the NHS, Professor Trish Morris-Thompson brings a fresh outlook to care provider Barchester Healthcare in her role as director of clinical governance and quality. Prior to joining Barchester, Trish was chief nurse at NHS London for more than six years and completed her time in the NHS at the Care Quality Commission to assist with the development of the quality monitoring model. As the face of social care shifts, Trish tells *Care Talk* how she aims to further drive clinical excellence throughout the company by developing innovative, localised solutions.**

**“We must continuously adapt our business to meet the changing needs of older people who are joining our care settings.”**

It was my first anniversary with Barchester Healthcare on 1 April. In the last 12 months I've been privileged to get to the heart of what we do and I am proud of the excellent care provided by exceptional staff. The wealth of talent within the company crosses the breadth of all staff groups. Of equal importance is the opportunity to meet our remarkable residents, their families and friends.

I've enjoyed understanding more about Barchester's social care delivery and how we go about meeting the varied needs of residents. I've learnt that we must continuously adapt our business to meet the changing needs of older people who are joining our care settings and continue to embed our homes into their neighbouring communities.

From a nursing perspective Barchester already had a fantastic team of care specialists and an in-house regulation team when I started. I'm working to further gel these teams together, providing a golden thread from services to the Board to ensure clinical governance remains of paramount importance. We want to work more closely with the respective care inspectorates to make sure our homes are consistently highly rated and exceed the inspection requirements.

As a nurse and midwife, I feel an affinity with our nurses. We have more than 2,500 and most of our general managers are qualified nurses too. Between us, we have a huge amount of experience and a mix of private and public sector knowledge. My goal is to constantly share best practice to the benefit of all individuals living in Barchester care homes or mental health hospitals and to ensure our nurses and carers have access to training and career development.

With people arriving at our homes with more complex care needs than ever before, it is important that we continue to maintain and recruit top nursing talent. As a company with an in-house business school and having just been named one of the *Sunday Times* 25 Best Big Employers to Work for 2014, I know that we offer excellent benefits to all our employees. Attracting the next generation of nurses into social care is essential, especially as the ageing population will continue to grow for the

foreseeable future.

**“Attracting the next generation of nurses into social care is essential, especially as the ageing population will continue to grow for the foreseeable future.”**

Support and training throughout your career is key. Our nurses have access to degree, certificate, diploma and masters programmes in clinical leadership; these are available within our business school. Barchester has announced its new BSc Nursing Studies programme for all qualified nurses within the company. It's a bespoke programme, designed collaboratively with the University of Wolverhampton.

In 2014 I'm looking forward to working closely with Barchester's new chief executive, Dr Pete Calveley, and will continue to look into any improvements we can make to ensure clinical governance is watertight and service improvement continues to be a priority around residents' needs and wishes. I'm delighted to be part of this important sector and am frequently inspired by the dedicated staff who work within it.

# Care creatures

## Royal welcome for Princess

Amore Care's Addison Court care home in Accrington has welcomed a new resident who has made an immediate impact on the home.

Princess, a tortoiseshell cat, has moved into the home from the local RSPCA centre.

To welcome Princess to Addison Court, staff and residents held a party where the affectionate puss made friends with everyone. The occasion was a joint celebration as inspectors from the Care Quality Commission (CQC) visited the home and verbally confirmed that it is compliant with all required standards.

Amore Care offers residential, nursing and dementia care to older people with varying

levels of need. Addison Court is a purpose-built care home that provides care for up to 48 older people, including those with dementia.

Addison Court home manager Anne-Marie Potter says: "Everyone at Addison Court has welcomed Princess to the home.

"The residents absolutely love her and she is going to be one spoilt cat! Having a pet around the home is definitely beneficial for residents. They enjoy the companionship and animals are known to have a calming and therapeutic effect and give those residents who previously owned a cat the opportunity to interact with the animals and rekindle fond memories.

"We had a lovely party to celebrate Princess moving in and also to say thank you to our staff whose hard work has led to the home being fully compliant following a recent CQC inspection."



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# PLANET JANET



I don't know whether there are rules about this sort of thing, but I'd like to recommend an excellent book on dementia to people with a personal or professional interest in the topic. It's *Still Alice* by Lisa Genova and describes the very poignant and self-aware journey of a clever academic who discovers she has Alzheimer's disease. The story shows her relationship with those closest to her, family, friends and colleagues, dealing with their increasing realisation of how the illness is changing Alice, and their relationship with her.

I bring this book to your attention because we see much in the press about the effect of dementia (in all the forms it takes) on the people with it. We see far less about the way others relate to those with dementia and the effect their reactions have both on themselves but also those who are suffering because either they have it, or they are caring for someone who has. (And yes, shall we use the term 'sufferers', because for most people that describes their relationship to this terrible and remorselessly degenerative illness? As one person said to me, 'If there was a magic pill to cure this disease, not one of us with it would hesitate for a heartbeat. We'd take the pill and see the back of the blessed thing').

Alice works in the field of neuroscience and she knows only too well what's ahead of her but she is constantly surprised at the awkward embarrassments the illness has on those around her. Sometimes out of ignorance as well as fear, people can

be downright *crass* and patronising: sometimes that fear manifests as hostile and threatening behaviour towards those made vulnerable by the disease, or, just as bad, their negative behaviour is perceived as being hostile to those losing the cognitive ability to nuance what someone is doing around them, or saying in front of them.

I noticed with great delight that the Department of Health's website celebrates the fact that many major employers are putting their staff through dementia-friendly training and encouraging them to become Dementia Friends. The purpose of the training is to try and remove the 'fear factor' from dementia and to overturn the sorts of prejudices people show towards those whose behaviour may seem at odds with a perceived 'norm'. This will help staff deal better with those customers who may seem confused, perhaps caused by dementia, or who are shopping with relatives who have dementia. It will also help them understand the illness better should someone in their family get it.

I heard a story recently about a couple who had always enjoyed going to their local theatre together. The husband got Alzheimer's but they continued to attend as many performances as possible. One day, they were in their seats and a member of the theatre staff asked them if they might move to allow space for a wheelchair user to come in to watch the performance. The man refused and an awkward scene took place. The more the member of staff requested he move, the louder he refused. His wife said you

could have heard a pin drop – people were embarrassed and shocked at his intransigence in the face of someone with a specific need for compassionate cooperation. The thing is, it was his dementia-self who was not cooperating because that person doesn't any longer deal well with changed plans, or being spoken to by a 'stranger', nor did he fully understand what was being asked of him.

In this awkward little exchange, the member of staff was out of her depth as well, never having had to deal with something like this, nor having the skills to recognise his dementia or how best to relate to him. Had she had dementia awareness training and learnt to be more dementia-friendly, the whole sorry situation might well have been avoided. The sad corollary to this story is of course that the couple felt they could no longer go to the theatre and another of their links to their community was severed, and the pleasure they had in a shared pastime could no longer be enjoyed. Quite possibly the wheelchair user was similarly embarrassed and may have chosen not to return to that theatre. There is of course the economic loss to the theatre but much more important is the loss to vulnerable people of an activity that they had enjoyed and at which they felt just the same as they had always done before the dementia 'got them'.

# AND THE WINNER IS...

## The Care Home Worker Award, Christine Cundall, Community Integrated Care

Christine Cundall, care and activity worker at Community Integrated Care's EachStep Blackley service, was the proud winner of the Care Home Worker Award at the national finals of the Great British Care Home Awards.

### What the winner said...

"I am overwhelmed to have received this award and it is such an honour to have been named national carer of the year 2014. Thank you to my family for their support. It was moving to hear my children saying how proud they were of me; it is usually me that is so proud of them. I would like to dedicate this award to all of my colleagues at EachStep who do such an excellent job. Thank you for providing me with such strong support, not forgetting our residents, who took great pride in making me a congratulations banner during Sunday afternoon's activity."

### What the judges said...

"Christine is caring, warm, wonderful and understanding – she is intelligent and thoughtful about what she does and she understands the issues facing social care for families and society as a whole. Supporting people with dementia, Christine's ethos, to 'try to reach the person each and every day', is an inspiration to us all."



▲ Host Jane McDonald with winner Christine Cundall and sponsor Professor Martin Green from Care England

## SHOWCASE



## Care Talk on the road

Care Talk has a packed agenda of conferences and seminars ahead. We are proud to be media partners and supporters for some fantastic events, listed right.

### Coming up

**NICE Annual Conference 2014**  
ICC Birmingham  
13-14 May 2014

**National Learning Disabilities Conference and Awards 2014**  
Edgbaston, Birmingham  
16 May 2014

### The Great British Care Shows

See the back page of the magazine for full details of venues and dates

Celebrating excellence in supporting people with learning disabilities and autism



# The National Learning Disabilities Awards

in association with



Gala dinner on Friday  
16th May 2014,  
Edgbaston Stadium,  
Birmingham



Hosted by  
Jeff Brozier



Categories include awards  
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- Registered managers
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# Howzat!



## Judging day for the inaugural National Learning Disabilities Awards



**Perhaps it's no coincidence that Edgbaston Cricket Ground recently played host to the judging day of the inaugural National Learning Disabilities Awards; after all, they were set up to celebrate those who are daily battling for people with a learning disability or autism.**

Organised by *Care Talk* magazine in association with the British Institute of Learning Disabilities (BILD), the new awards have been universally and enthusiastically supported across the sector by the Department of Health, Association of Directors of Adult Social Services (ADASS), Skills for Care and The National Skills Academy for Social Care, among many others.

So, on a misty spring day, the crease made way for over 100 shortlisted finalists, competing in 14 categories as diverse as

the Supported Housing Award, which seeks to celebrate innovation and good practice across a range of housing options, to the Award for Supporting Older People with Learning Disabilities. In fact, all areas of care for people with a learning disability were represented, and in vast numbers. And with so many finalists and judges converging, it was hats off to Eddie Morecroft and colleagues from community interest company We Can Do It for the smooth running of the day, as they undertook the job of meeting everyone and shepherding nervous but excited finalists to their interviews.

**“Given that our society and communities are still indifferent to people with a learning disability, we can certainly make a difference.”**

Shown to the candidates' waiting room, I asked Eddie why he began the company. “We were going out into the community

and doing lots of work and getting nothing for it,” he explained. “We thought, hey! Someone's getting a bad deal here and that's us! So we set up our own company. We go out and we train staff on all different things to do with learning disability. A lot of independent firms come to us now and ask us to train their staff.”

Unsurprisingly, Eddie couldn't chat for long because not only was he working, he was also a finalist for the People's Award, and a judge for the Care Home Manager's Award. But ex-postman Lewis Wallis from Certitude had more time – probably too much time – as he sat quietly looking at some papers with half an eye on the huge windows overlooking a friendly match taking place down on the grand pitch. Working for an organisation supporting adults with a learning disability, and finalist in the Support Worker category, he felt honoured and privileged to be nominated.

“It's brilliant and fantastic to be here today,” Lewis said. “This is a great event because



it's a way to acknowledge all the support people have given. It makes people see, at the end of the day, that everyone is an individual and we've all got lives and are achieving goals in life. I think these awards are essential."

As rain temporarily stopped play outside, Patrick Quinn, director of the Great British Care Awards, and the new awards' co-creator, emerged from a judging session only too pleased to chat about his cause celebre and how the early indications for this inaugural event are hugely promising.

"Nominations have flooded in for every category," he explained. "It absolutely bears out that people want to party and celebrate and have a good time for a change. It's grim enough that social care gets a bad press, but then throw in learning disabilities and it's right on the extremes."

Post-Winterbourne View, Patrick Quinn and Lisa Carr, directors of the Great British Care Awards, decided it was high time to celebrate, and give a platform to all the good news stories and practice in the learning disabilities sector. It bears out the old adage that from bad can come good.

And though the new awards will run alongside the well-established Great British Care Awards, they are markedly different. Two prominent categories are the Best Employer of People with Learning Disabilities and the People's Award especially for people with learning disabilities.

Perhaps not known for being overly effusive, Patrick's pride and passion were evident. "If we look back in five years' time, I think these inaugural awards are going to be quite something. They make a real statement, not just within social care, but in the wider community."

So, a difference can be made?

"It really isn't rocket science," Patrick laughed. "If you celebrate, give praise and reward, then frontline staff are going to be

happier and perform better. Given that our society and communities are still indifferent to people with a learning disability, we can certainly make a difference here."

**"If you celebrate, give praise and reward, then frontline staff are going to be happier and perform better."**

And as the day drew to a close, a difference had already been made. Finalists were abuzz with the pride and excitement of being shortlisted for these prestigious new awards and there was even talk of frock shopping for the upcoming gala event where the winners will be announced.

Packing up with the rest of We Can Do It, I asked Eddie which role he had preferred. "Being a judge," was the unequivocal reply. "I like to hear people's ideas and see where they come from, and it helps to give me ideas of different ways of doing things. I thought we saw a really high calibre of managers and it was difficult to find the winner."

And what did Eddie think of these new awards in terms of raising the general public's awareness of learning disabilities?

"It's really good – no, it's amazing that we now have these awards. Hopefully they will have an impact. A lot of these awards are not for companies but for the frontline staff giving the care every day."

There may have been no sixes scored out on the cricket pitch, but there were enough calculated in the day's judging rooms to make an easy century for the brand new National Learning Disabilities Awards.

Howzat!

**PS Good luck to all the finalists from all at Care Talk.**

**Debra Mehta**



# National finals of the Great British Care Home Awards 26 April, Grosvenor House, Park Lane, London hosted by



presented by Jane McDonald



[www.care-awards.co.uk](http://www.care-awards.co.uk)



## The Care Employer Award



Canterbury Oast Trust

## The Care England Home Care Worker Award



Christine Cundall – Community Integrated Care

## The Care Newcomer Award



Jane Lythgoe – The Partnership in Care Ltd

## The Care Home Registered Manager Award



Shanci Mathew – Morton Grange

## The Care Home Nutrition & Hydration Award



Paul Wydra – Four Seasons Health Care

## The Dignity in Care Award



Adrienne Ratcliffe – Community Integrated Care



The Dementia Carer Award



Nicolas Kee Mew - Anchor

The Care Team Award



Lyndhurst Staff Team - Caretech Community Services

The Care Activity Organiser Award



Rebecca Craker - Optalis

The Ancillary Worker Award

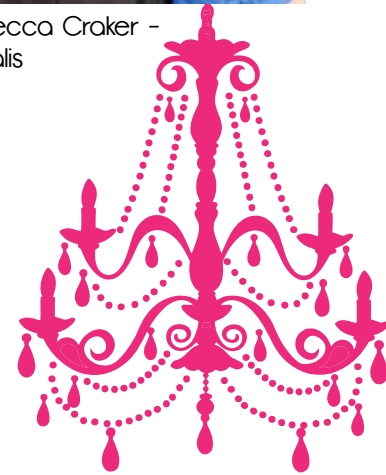


John Rose - Amber Support Services

The Care Trainer Award



Becky Harvey - Belena Training



The Care Innovator Award



Susanna Chard - Choices Housing Association

The Frontline Leaders Award



Anna Lesniak - PJ Care

The Putting People First Award



Steve Todd - Vanehill Care Home

The Unpaid Carer Award



Marion Hill

The Outstanding Contribution to Social Care Award



Jan Flawn - PJ Care

and not forgetting the runners-up!



## Great British Care Awards networking dinner

Great British Care Awards



Supporters of the Great British Care Awards came together to celebrate St Patrick's Day at a sector networking dinner on 13 March at Holme Pierrepont Hall, Nottingham.



# AN UNRIVALLED PROGRAMME OF EVENTS FOR 2014

High quality conferences focused on providing our audience of senior public sector decision makers with the latest information on policy and best practice alongside access to industry expertise to aid with delivery.

## Health & Social Care Reform Events

**18th February - Reducing HCAIs**

Location: The Brewery, London

**12th March - Public Health**

Location: The Brewery, London

**25th March - Social Care**

Location: The Brewery, London

**8th April - The Dementia Challenge**

Location: The Mermaid, London

**24th June - Reducing HCAIs**

Location: The Mermaid, London

**5th November - Public Health**

Location: The Mermaid, London

**25th November - Improving Patient Care**

Location: The Mermaid, London



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# Providing leadership and the best support for people with dementia



The National Skills Academy is committed to improving the care of people living with dementia. Many of our members support this key and growing demographic, and, with the Prime Minister's Dementia Challenge, it's clear that the issue is being taken seriously. The national dementia strategy is nearing the end of its first phase, and the Prime Minister has stated that a new framework for the strategy is to be put in place.

**"I do not know what it is like for families, but I try to support them."**

Through our dedicated Registered Managers Programme and local networks, we aim to reach more people working in care home and homecare settings, to enable them to gain the skills, qualities and confidence that they need to work effectively with people with dementia and their families.

The case study on the right from Marches Care shows how one of our founder members has developed innovative solutions for supporting people with dementia and their families, and how one of their registered managers has, through participating in the programme, been able to change the way that she performs her role and manages her staff.

Marches Care operates a home called The Uplands in Oxon; the managing director is Mandy Thorn, and Carey Bloomer is the nurse manager.

Over 80% of the residents at The Uplands have some form of cognitive impairment. The home tends to admit people from the psychiatric ward at the local hospital into their specialist dementia beds or from the local district general hospital into long-term nursing beds. The team that supports the residents is a settled team of specially trained nurses who work with the individual, often managing them off the medication that they came to the home with, towards the best quality of life possible.

In 2012, Marches Care put a sensory garden into the grounds of the home, which has worked well for everyone at the home, but has been of particular benefit to those living with dementia, and their families. The garden gives space for residents to reflect. One family, whose loved one had recently passed away, were able to spend time in the garden, and they wrote to Mandy to express how important the garden had proved as somewhere to "contemplate and give thanks" as part of the grieving process.

The home enjoys good GP practice support, with a GP with a special interest in dementia and end of life. And The Uplands works with the local Age UK Diamond Drop-in Centre for carers of people with dementia. Both Mandy and Carey are Dementia Friends.

Carey has been on the Registered Managers Programme, and it has changed the way in which she works with people with dementia and their families. Carey said: "I now think of the person with dementia in the centre, with the circle

of support around them. I recognise that I do not know what it is like for families, but I try to provide a shoulder to support them."

Leadership is all about behaviours, and relationships. The example from Marches Care shows that successful support for people with dementia and their families is as much about the community as the care home.

The importance of support after end of life care is also key. Many relatives still wish to stay engaged with a care home once their family member has passed away; indeed, members of staff also have to come to terms with the loss. Good leadership at every level is key to enable these relationships to be maintained – and leadership starts with all of us.

## **Caroline Bernard**

Head of policy and communications  
National Skills Academy



# How to be a good...



## care trainer

**If there is one word that best describes Maria Field's approach to care training, it is 'bespoke'.**

Maria, who is care trainer at Care Management Services, says that the ethos of the organisation is to be person-centred as possible. For this to work effectively, the ethos is carried into training.

"We have bespoke training because we provide bespoke care," she says. "It's as simple as that."

While many organisations claim to provide person-centred care, Care Management Services takes the concept as far as it can go. This is because the organisation, which is based in north east England but covers the entire UK, cares for young adults with neuromuscular conditions and complex care needs. These include muscular dystrophy, myotonic dystrophy, facio-scapulo-humeral dystrophy, spinal muscular atrophy and cerebral palsy. Most of the clients have Duchenne muscular dystrophy, which is the most severe form of the condition as well as the most common.

**"We need ... flexibility and adaptability to cater for a condition that is degenerative. It's important to have one eye on the future."**

Each client has a team of five or six staff members, including a team leader, all of whom are recruited specifically for that individual's care. Therefore, training is specific to the carer and the client. The care is 24/7 and complex in terms of health and social care needs.

"Our clients are young and all want to live life to the full. That means carers need to be highly trained so they can adapt and respond to a client's changing needs. We need that level of flexibility and adaptability to cater for a condition that is degenerative. It's really important for us to have one eye on the future and to anticipate what might come next," explains Maria.

**"They are usually to a certain academic standard and high achievers in the scheme of the care sector."**

The organisation is keen to retain its carers for as long as possible so as to best anticipate changing needs. Maria says one way of retaining staff is to invest heavily in training.

This is all the more important given that "very, very few" new recruits have any training in care, says Maria. They are usually young to reflect the age of the clients, who are often at university.

"The recruits are usually to a certain academic standard so they are warm to learning and used to striving. They want to better themselves. They are usually high achievers in the scheme of the care sector," says Maria.

The bespoke training includes qualifications that are needed and all employees have achieved or are undertaking QCF 3 or 4 in health and social care. But it also covers anything else that the individual team member feels would help them in their care work. This might include training in a specific aspect of their client's care. Or it could be training to improve their driving.

Maria explains that all staff must drive as this is how clients get around. But some staff members have found it difficult to drive such a big vehicle and can access extra training for this.

Training needs are identified every six months at the appraisal with the team leader, when a development plan is drawn up.



Team leaders are trained to a high standard of teaching and management, says Maria.

"They are usually graduates; some will have degrees that are related to social care and others will not. They all go through rigorous training that includes vocational teaching qualifications," she says.

The organisation also spots and develops individuals' strengths. For example, someone might be seen to be very good at coaching and asked if they would be interested in developing it.

Under Maria's guidance, Care Management Services has become accredited assessment centre for Pearson/EDI, which is the UK's largest qualifications organisation.

Training is seen as important at every level of the organisation. Everyone has a personal development plan – even Maria. At present, she is writing her dissertation on employee engagement through training for a degree in leadership and management.

Maria says that the investment in training means that the organisation has excellent rates of retention.

"People stay with us. Not many companies can keep such high-achieving people for three to five years and it is because our staff can develop alongside our clients. Like the client, they can develop their aspirations and ambitions," she says.

**Julie Griffiths**

# Showing what a good life with dementia can look like

A new independent report commissioned by Red & Yellow Care has been launched to show what a good life with dementia could look like. The report, entitled *A Good Life with Dementia*, outlines a six-part framework for enabling a happy and fulfilling life with dementia, rooted in universal notions of identity, happiness and fulfilment. The publication of the report coincides with the launch of the new service, Red & Yellow Care, which offers specialist, integrated dementia care that is centred around and tailored to the person with dementia.

The report draws on the expertise and insights of those working in the field of dementia, happiness and wellbeing, as well as primary research with people with dementia and their carers. As a result, the following six themes were identified as being key to a good life with dementia, which interestingly conflicts with the new research that shows 43% of people in the UK don't think it's possible to live a good life with dementia:

1. How to better support people with dementia to maintain their sense of uniqueness and personal identity (Respecting identity: 'It's not one size fits all')
2. Achieving the right balance between memory-based activities and enjoying the here and now (Embracing now: 'It's a moment-living life')
3. Ensuring people with dementia are able to experience meaningful human connections (Sustaining relationships: 'You don't always need words')
4. Ensuring people with dementia are able to experience a full range of emotions (Valuing contrast: 'Good days and bad days')
5. Taking risks – what are we protecting people with dementia from? (Supporting agency: 'What's

there to worry about?')

6. Promoting good overall health for those who are living with dementia, including physical and emotional wellbeing (Maintaining health: 'My priority in life')

Red & Yellow Care is an independent healthcare company offering clinical dementia care that puts the person with dementia at the heart of everything. Red & Yellow Care's belief is that by treating the whole person, not just the condition, people with dementia can maintain independence for longer and both the individual and their family can have a good life for longer.

Red & Yellow Care provides personalised, clinical care and support for people with dementia, or suspected dementia, through its:

- Diagnostic service
- Post-diagnostic care and support service.

The right clinical care can make a big difference to people with dementia, but few people with dementia receive the care they need. It can be confusing



and difficult to access or completely fragmented – notably because of the barriers between mental and physical health and social care.

Red & Yellow Care is different. Its team of dementia experts ignored the status quo and instead have designed the ideal scenario; a care system that revolves around the individual. This is delivered by providing patients with a named dementia nurse, who is supported by a fully integrated, multi-professional healthcare team, who optimise physical, mental and social health from diagnosis onwards. In other words, care without borders.

# E-learning modules support life story work with benefits all round

More than 10m people in the UK are now aged 65 and over – and this number is projected to continue growing over the next 20 years. Our ageing population has seen a rise in the number of people diagnosed with dementia, and a growing number of people in a caring role means a greater demand for skills and training in dementia care.

South West Yorkshire Partnership NHS Foundation Trust has responded to this challenge by launching its innovative online training Portrait of a Life e-learning resource. Following on from a piece in the January edition of *Care Talk*, the trust can now report on the results of a pilot scheme conducted in Wakefield older people's services across acute, memory, recovery and wellbeing pathways.

Portrait of a Life e-learning explores the concept of life story work, best practice and, importantly, how to manage risks and ethics. Life story work has long been recognised as an important therapeutic process, providing the opportunity to produce a collection of memories based on information about a person's life.

The pilot scheme ran between September 2013 and April 2014 and evaluated the effectiveness of

the e-learning programme using a test pool of 60 members of staff. All 60 staff members completed the three Portrait of a Life e-learning modules successfully, and a resounding 98% of staff said that the course objectives were achieved and that they would recommend it to colleagues. All said they plan to use life story work in the future. The training is now being rolled out across the rest of the organisation.

## Key findings 1: 100% of staff reported that they had benefited from undertaking Portrait of a Life e-learning modules:

- Increasing staff competence and understanding of life story work
- Improved interaction with service users
- Improved service user engagement
- Improved service user wellbeing
- Increased flexibility of training provision
- Improved access to learning materials at times and places that best fit in with the lifestyle and work commitments of staff

## Key findings 2: 87% of staff reported that they had seen positive changes in behaviour and performance improvements with the service users they have undertaken life story work

## with:

- Improved engagement with service user
- Improved engagement with family/carers
- Improved relationships between service user and family/carers
- Meaningful care planning
- Reduced behaviours that challenge
- Reduced need for medication

## Key finding 3: Since the pilot began in September 2013, 49 life story products, such as story boards, memory boxes and journals, have been produced alongside service users, and a rolling programme of reminiscence sessions and displays has been implemented.

The e-learning resources have now been made available to organisations, at a fraction of the cost and time taken for face-to-face training. Each e-module is available at £25 (plus VAT) per module – or £60 (plus VAT) if all three are purchased together. The learning is accessible from any PC or tablet – anytime, anywhere. You can view the trailer at [www.portraitofalife.co.uk](http://www.portraitofalife.co.uk) where you can also read testimonials from learners, make online purchases, and access the modules.

## Innovative e-learning for life story work

Portrait of a Life is a ground-breaking e-learning resource supporting care staff and carers in individualised life story work. This upholds person-centred care for older people and those living with dementia.

Three e-modules cover an introduction to life story work, best practice and how to manage risks and ethics. You can access and complete anytime online, confirm understanding with Knowledge Check and download key documents to put the learning into practice.

Portrait of a Life shares years of real-life experience from South West Yorkshire Partnership NHS Foundation Trust. You can find out more, watch the trailer, buy and play online.



South West Yorkshire Partnership   
NHS Foundation Trust

Helping you meet CQC and NTF standards

## Portrait of a Life

[www.portraitofalife.co.uk](http://www.portraitofalife.co.uk)



With all of us in mind

# Bringing high street optician services to care home residents

Specsavers Healthcall provides eyecare services to those unable to visit a high street optician unaccompanied due to physical or mental disability, either in their own homes or care homes. Specsavers bought Healthcall – one of the UK's largest domiciliary opticians – last year, after recognising that many of our long-standing customers could no longer visit our stores. Our mission is to provide the best value eyecare to everyone, simply, clearly and consistently, exceeding customer expectations every time, and we wanted to make sure those unable to visit our stores had access to that same level of service.

Here director of business development Jayne Rawlinson answers some of the most common questions about our service to care homes.



**Q How easy for care home managers is it to organise eyecare for their residents?**

**A** We want to make the delivery of eyecare as simple as possible for care home staff. That's why we take care of all the paperwork and NHS administration; just call us and we will do the rest. We will provide a bespoke folder in which to keep all residents' eye health records and our staff will also let you know when residents are due for their next eye test. We are also happy to arrange a visit to test just one person if new residents arrive who need an eye test.

**Q What range of products are available to residents?**

**A** Our eye tests will be thorough and carried out with all the care and attention you would expect. All our visiting opticians are fully qualified and experienced in conducting eye tests at home. We feel strongly that living in a care home should not be a barrier to people being offered good value and a large range of glasses to choose from. That is why Specsavers Healthcall customers can take advantage of the same offers that are available to people visiting our high street stores. Our opticians will be able to explain exactly what is available and which offers the best value for each customer. Complete single vision glasses start from just £25 and residents can choose from a range of 180 glasses frames. They can also order frames from our full store range on request.

**Q How do you cater for residents with dementia?**

**A** We understand that many care home residents require special care, that's why all our staff are trained to deal

with people suffering from dementia. All of them have taken the Alzheimer's Society's Foundation Certificate in Dementia Awareness.

**Q How do you make sure care is personalised?**

**A** Our optometrists not only test people's eyes but will also speak to residents, and their carers, about their daily routine and the sort of activities they do in order to carry out a holistic assessment of their eyecare needs. We will also provide each individual with a Visual Information Package – a unique written record of the outcome of their eye test, including their prescription and any other findings, and of the glasses they have chosen. Our staff also provide training materials for care home staff to help them understand residents' eye health needs and help them look after their glasses.

**Q Will we see the same optician each time?**

**A** Our eyecare services are provided by people living in the local area so the service will be provided by the same clinical team each time. We understand how important continuity is to both residents and staff.

For more information on Specsavers Healthcall's services visit [specsavers.co.uk/home-eye-tests/care-homes](https://www.specsavers.co.uk/home-eye-tests/care-homes) or call us on 0800 198 1135.





# We're still putting our opticians into care homes

Specsavers Healthcall is committed to providing domiciliary eyecare services of the highest quality to care home residents. Which means that the people in your care can have access to the service, value and choice that have helped make Specsavers the UK's most trusted optician. And we want you to have complete confidence in our service, so we'd like you to experience it for yourself. Use the vouchers below to get a free eye test and money off glasses at any Specsavers store.

**To book a care home visit, call 0800 198 1135 or go to [specsavers.co.uk/home-eye-tests](http://specsavers.co.uk/home-eye-tests)**

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## FREE EYE TEST

Valid for one test booked on or before 31 July 2014. Present voucher at time of test. Cannot be exchanged for cash, used with other vouchers or redeemed by customers already entitled to a free NHS eye test. One per person. CODE 10825



## £20 OFF GLASSES or £40 OFF DESIGNER GLASSES

**£20 off:** Applies to a complete pair of glasses from the £69 range or above. CODE 11167. **£40 off:** Applies to a complete pair of glasses from the £99 - £149 ranges. CODE 10863.

**£20 and £40 off:** Valid until 31 July. Present voucher at time of purchase. Cannot be exchanged for cash or used with other offers. One per person.



# COPPER INFUSED PYJAMAS

**Designed With The latest Fabric Technology.  
Fabric That Is Independently UK Lab Tested  
To Kill Even MRSA.**



## Super Soft and Warm

- The fabric is soft, comfortable, warm and breathable
- These copper / bamboo mix pyjamas are a health inspired design and can be worn for long periods of time, for example hospitals or care homes
- Tested and proven to be anti MRSA / anti-microbial
- Copper / Bamboo infused garments are soft and smooth with no spurs to irritate eczema sufferers & can help with dry skin
- Bamboo fabric is known for fantastic moisture management
- No need to launder as often as other pyjamas **LESS LAUNDRY!!**
- Odour resistant - Feel fresh for longer.
- Anti static
- Contains: 40% Copper infused Yarn, 60% Bamboo Yarn incorporating deowear® technology

**“Could Copper Pyjamas stop you from getting a hospital superbug?” - The Daily Mail.  
As seen in The Sunday Mirror, The Daily Mail Health, The Mail Online and BBC1 News**

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**[www.copperclothing.co.uk](http://www.copperclothing.co.uk)**

# Copper-infused pyjamas, bedding and socks that can really aid health

Copper clothing can be the first line of defence against, and even destroy, the likes of MRSA, klebsiella pneumoniae, staphylococcus aureus and Candida in a matter of hours, and can stop any microorganism entering the body via the skin, greatly reducing and stopping the chance of any bacterial or fungal infections. Microorganisms enter the tissues of the skin often at the site of compromised skin such as a sore, ulcer or a cut, to cause symptoms such as redness, swelling and/or pus. Several studies indicate that the people most at risk of serious infections include:

- Elderly people (due to dermatological changes, bedsores, athlete's foot etc)
- People with wounds or abnormal skin sites
- Those who are already ill and may have a lower immunity or be immunosuppressed
- Those who are already carrying staphylococcus aureus or MRSA
- Those who are hospitalised for a length of time
- Surgical patients
- Diabetics
- Those who have previously used antibiotics, or use antibiotics for prolonged periods
- Those who have had previous MRSA colonisation.

## Underarm bacterial and fungal infection



**Bacterial and fungal infection, before wearing copper-infused pyjamas**

**After wearing copper-infused pyjamas for 12 nights**

**Subject: 65-year-old woman with a history of chronic skin infections and no other medical intervention**

About 30% of the general population are colonised by staphylococcus aureus. A carrier can be a source of infection for themselves (for example, they can infect themselves if they have a wound), especially those with a compromised immune system. They can also infect others

when the bacteria are passed on, either on someone's hands or fabrics. In about one tenth of these carriers (3% of the population overall), the staphylococcus aureus is MRSA.

It is estimated that approximately 70% of older people in the UK experience skin problems, many of which are preventable. Age-related changes in the skin mean older people are at increased risk of skin breakdown and should be supported to maintain good skin health. Copper complexes and copper fabrics that deliver copper ions are well known to be used in wound healing and angiogenesis (growth of capillaries to promote blood flow).

It is also known that the bacteria can delay dermal healing by competing with host cells for already depleted nutrients and oxygen. MRSA may remain as reservoirs in many healthcare settings, which is a particular issue where pressure or diabetic ulcers are common. It is important to remember that chronic wounds often develop due to an alteration in blood-flow (micro-circulation) to the infected area. The use of systemic antibiotics has very little or no effect on the wound site as the reduction of the capillaries that were able to deliver blood are sometimes broken, split or withdrawn; this can prevent access of the antibiotic to the affected area. Copper fabric is now used on a daily basis by the Chinese military with over 2m troops having copper fabric socks, underwear and towels, and there has not been one report of dermal intolerance.

The pyjamas and bedding are new and innovative by British design. Also, what is relatively new is the anti-microbial functionality of the fabric, also engineered to be anti-static (so it will not attract dust or skin cells demonstrated to carry MRSA) and promote angiogenesis, which can enhance wound closure, skin rejuvenation, promotion of collagen and elastin. The fabrics are also known to be anti-dust mite (a main cause of asthma) and anti-odour.

## Can copper fabrics have the same benefits as copper?

Yes, says Prof Bill Keevil, a microbiologist and director of the environmental health care unit at Southampton University.

"When bacteria come into contact with copper in the clothing it kills them. Tests suggest that washing the fabric at any temperature doesn't weaken the effect.

"Copper fabrics are now being looked at for

wound healing. Copper stimulates several enzymes that promote healing, it has great potential for things such as diabetic ulcers that won't heal."

Gemma Wilby contracted a serious MRSA wound infection within days of a Caesarean. After two weeks in hospital on high doses of antibiotics, she was sent home with more antibiotics, but after another two weeks the flesh-eating bacteria continued and she was rushed back in to hospital.

The antibiotics were clearly not working, so maggot therapy was tried. Usually maggots live for around five days but the infected wound in this case was so bad the maggots died within hours. After another bout of surgery to remove as much of the infection as possible, Gemma was sent home. Infection control specialists swabbed the infected area and all the swabs came back positive for MRSA. No longer on any antibiotics, Gemma decided to take off the wound dressing and let the copper pyjamas have direct contact with the wound site. Two days later infection control were there again to take a sample. Later that afternoon they returned saying that the sample taken was incorrect and they would need another sample; the next day they came back again to announce that the swabs proved negative. The infection was gone.

So impressed are senior hospital consultants that a trial in a high infection rate ward is now going to take place. In fact, a bacterial load test has shown that a standard NHS clean hospital gown grew 400,000 000 'colony-forming units' (CFUs) in 24 hours and the copper fabric zero.



**No medical intervention, knee-high copper semi-compression socks worn.**

# Taking the hassle out of care home hygiene

**Luke Rutterford, technical manager at Rentokil Specialist Hygiene, discusses why care homes should outsource hygiene and waste management services.**

Care homes across the UK are rightly scrutinised to ensure their service standards are up to scratch. However, recent findings from the Care Quality Commission suggest that over 4,000 UK care homes have no real leadership in place. With budgets cut and staff resources stretched, it is easy to see how hygiene standards can sometimes slip. But care home environments have strict legislations surrounding the levels of hygiene, and therefore may be better served by outsourcing deep-cleaning tasks to a trained professional.

The pressures imposed on care homes by shrinking budgets and stretched



resources could feel like an intolerable burden. Care home managers should consider easing the pressure on their staff by employing trained professionals to undertake some of the more unpleasant jobs within a care home. Juggling frontline services and backroom duties can cause hygiene levels to slip, causing grime and bacteria to build up that can go unseen by staff. Bodily fluids such as blood, urine and vomit, which are a common occurrence in care homes, can seep into porous materials and not be visible to the untrained eye. This makes clean-up extremely difficult and the risk of exposure to infectious organisms much greater.

A professional specialist hygiene company can work around staff and residents to clean and decontaminate the premises in a safe and legal way. There can be a tendency for staff to rush through the cleaning of a room in order to get it back into service and this could mean that some vital areas are missed altogether. The benefit of using external, specially-trained professionals is that they have experience of a broader range of different establishments and cleaning challenges. They can offer alternative ways of achieving the highest standard of hygiene possible, while minimising disruption to operational activities within a care home.

Another area staff should not have to

deal with is waste management. Care homes can produce a large amount of waste each week, which can often contain hazardous materials such as needles and syringes. These materials require an efficient collection and disposal service to ensure they are taken off-site promptly and disposed of in a responsible manner.

**“Care home managers should consider easing the pressure on their staff by employing trained professionals to undertake some of the more unpleasant jobs within a care home.”**

It's important to remember that when it comes to hazardous and infectious waste, the cradle-to-grave rule applies. This means the producer of waste will always be held responsible for the safe and legal disposal of it, even after it has been passed onto the waste carrier collecting it. This is why it's important to work with comprehensively-trained waste disposal experts who will safely and securely dispose of waste and advise on the correct products that comply with both the UK and EU legislation.

With the winter months still lingering and the inevitable onset of the norovirus (which can shut down a care home in 24 hours) and other infectious diseases just around the corner, managers need to make sure they have systems and processes in place to manage and limit possible outbreaks. At such crucial times, employing a professional service to extensively deep-clean and decontaminate premises in a safe, legal and discreet way is vital.

# Social network platform forges care partnership to support those in need

The screenshot shows the Yecco website interface. At the top, there's a navigation bar with 'Home | Family Homecare | Car Insurance'. Below this, there are two main sections. The left section is titled 'Yecco Home Care Insurance' and features a green header. It includes a sub-header 'From £2.50 per month' and a paragraph: 'If you are over 18 years old and worry about who might look after you, a family member or friends following an accident, injury or hospitalisation Home Care insurance may benefit you.' Below this, a list of services is provided under 'Cover is provided for:'. The right section is titled 'Car Insurance' and features an orange header. It includes a sub-header 'Your Cover Car Insurance from Allianz' and a paragraph: 'Allianz Your Cover is part of Allianz Group, one of the world's largest insurance providers, insuring more than 30 million cars worldwide.' Both sections have a 'Get A Quote' button.

Allianz Global Assistance UK has forged a partnership with Yecco, the newly launched social media platform. Yecco allows families, care-givers, professionals and other services to communicate together online and on mobile devices. In doing this, Yecco helps to address some of the universal issues of self-management of health conditions, loneliness, isolation and care planning faced by the elderly and those living with chronic conditions, and associated difficulties faced by families and carers.

Confirming its importance in a world that is demanding greater social responsibility for those in need, Yecco has been voted one of the Real Business Everline Future 50 Businesses for 2014. This list recognises Britain's most exciting and innovative new businesses and puts the spotlight on Yecco as being a technology start-up that is changing people's lives.

Under the new agreement, Allianz Global Assistance is offering Yecco Home Care, providing up to six weeks

of assistance at home, in the event of unforeseen illness or an accident resulting in hospitalisation. This partnership forms part of Allianz Global Assistance's ongoing commitment to helping the UK population plan for care and the associated costs involved.

Free to join, Yecco is available online via a PC, an IOS tablet or mobile device. The service can also connect to third party resources (such as NHS health records, GP record systems and third sector providers) for the care relationship to become truly collaborative and beneficial for both families and healthcare professionals. Yecco therefore helps to enable people to have control of their health and lifestyle choices connecting to the chosen friends, family members and professionals of their choice.

Janet Jadavji, chief executive and founder of Yecco, says: "We are delighted to start on this journey with Allianz Global Assistance. Yecco will be releasing a number of exciting features over the next 12 months to further assist

people and professionals both here in the UK and abroad relating to health and wellbeing."

Yecco Home Care, provided by Allianz Global Assistance, insures families and individuals over the age of 18 years, providing personal care, domestic help, light meal preparation and transport from hospital following an initial stay. The service aims to give anyone who has an accident or falls ill unexpectedly the care they need, when they need it most, without having to rely on the care system.

"With an ageing population and a struggling health system, the cost of growing old is something that concerns many people," explains Phil Carr, head of corporate business development for Allianz Global Assistance in the UK. "Most people put off getting or planning for care, until the last minute. This means they either need to rely on social care or foot the bill for the support and services they need. Yecco Home Care goes some way to reduce the uncertainties around care costs and our partnership with Yecco provides the perfect platform to bring people access to this type of support.

"By working together with Yecco we are providing financial peace of mind for families and individuals and reducing the anxiety caused in the event of accidents or illness. With Yecco Home Care, families know they will get the care they need, providing vital support and helping to bridge the care gap. This forms part of the Allianz commitment to making life easier for people in need and those who look after them."

Log onto [www.Yeccoinsurance.com](http://www.Yeccoinsurance.com) for more information.

Follow Yecco on Facebook [teamyecco](https://www.facebook.com/teamyecco) and Twitter [@teamyecco](https://twitter.com/teamyecco)

Follow Allianz Global Assistance UK:

# How to make mobile working work in social care

**The key to transforming morale and efficiency in social care is to start from the needs of frontline staff – and then work back to technology, says Colin Reid, chief executive of TotalMobile, a market leader in mobile working solutions for local government.**

Social care teams are under enormous pressure just to fulfil their existing remit. And that's even without the call to collaborate better with healthcare providers and other partner agencies under the Integrated Care agenda. No wonder recent King's Fund monitoring reports (such as January's *How is the health and social care system performing?*) contain some alarming findings about the level of morale among staff, as well as sobering statistics about the high turnover of employees, the number of unfilled vacancies, and the rising skills gap. It is not uncommon for social care teams to have more than 20% of jobs unfilled.

Work-related stress means employees exit the profession, jaded and burnt out. There is a clear risk of a downward spiral here, as persistent gaps in the team increase the workload for other staff members. This is a situation that can't go on.

In response, we must find a way to alleviate the strain on staff. But given that budgets are under continued pressure, the only way to achieve this is to empower employees, making it easier for them to do their jobs well.

Where to start? Well, in addition to a busy schedule, care workers and managers in particular spend an inordinate amount of time on administration – much manual and paper-based. In the worst cases, care workers are reported to be spending less than 15% of their time with service users and the rest on this sort of activity! This inefficiency is costly, stressful to the care worker and has a markedly detrimental effect on service delivery.

It is for many of these reasons that local authorities are discovering the value of advanced mobile productivity – solutions for creating, processing and accessing digitised case files and associated administration on mobile devices.

Within social care, the needs of users are diverse because care services range from adult care and child protection to domiciliary services, each having their own processes and priorities. Rather than implement a single, generic solution that tries to do too much, or foot the bill for a series of individually customised applications for different user groups, Nottinghamshire County Council has instead opted for a mobile working platform designed to reflect the way each group of people actually works.

As the user-facing part of the application has been designed with the specific type of user in mind, there is almost no learning curve and staff feel the benefit very quickly. At Nottinghamshire County Council, this has had a direct bearing on user acceptance and led to a rapid rise in staff satisfaction.

Notably, Nottinghamshire's mobile-working set-up does not rely on a continuous Internet connection. If connectivity is lost, the content remains securely accessible on the device, and re-synchronises with head office systems the next time they are online. Also, the mobile working solution is designed to operate optimally on the user's specific handset, whether it is an iPad or an Android device, Windows, etc.

As the benefits being experienced by Nottinghamshire social care teams are highlighted to other departments across the council, the vision is that spin-off solutions will be developed at a minimal incremental cost. This is because they will share the same core platform, and can be easily configured for each new user

group.

Meanwhile, councils in Fife, Cardiff and Newcastle have now declared their intentions to adapt their existing mobile technology for use in social care, due to the scale of potential for transformation this technology has shown.

As momentum grows around integrated care, efficient mobile working looks set to come into its own. With the right platform underneath, councils will find it easier to securely share and combine data with other agencies – a move that will empower care workers further still, as well as help the public sector deliver a more efficient, joined-up service to citizens.

## Colin Reid

Chief executive  
TotalMobile

You can read the King's Fund report *How is the health and social care system performing?* (January 2014) at [http://www.kingsfund.org.uk/sites/files/kf/field/field\\_publication\\_file/quarterly-monitoring-report-january-2014.pdf](http://www.kingsfund.org.uk/sites/files/kf/field/field_publication_file/quarterly-monitoring-report-january-2014.pdf)



# People unsure of loved ones' funeral choices

Nearly three-quarters of people in Britain (69%) wouldn't be certain what song or hymn a loved one would like to be played at their funeral.

A survey commissioned by the East of England Co-operative Society has revealed that 36% of people were unsure what, if any, song or hymn a loved one would most like played. A further 33% said that while they knew a loved one would like a song or hymn to be included, they didn't know what it was.

Andrew Dawes, operations manager for the East of England Co-op's funeral team, says: "Funerals are about celebrating lives. Many of us have ideas of how we would like to be remembered but it seems those closest to us may not be aware of them. Organising an advance funeral plan takes these decision-making pressures away from loved ones and also ensures your wishes will be fulfilled, however fundamental or unique."

**"36% of people were unsure what, if any, song or hymn a loved one would most like played."**

And it seems many people do want something special when it comes to a farewell music choice. More than half (54%) said they would not want any of the anthems previously revealed as the nation's top 10 most popular contemporary funeral songs.

Of those who did want a song from the top 10, the most popular were Robbie Williams' *Angels* and *Time to*



*Say Goodbye* by Sarah Brightman and Andrea Bocelli, both with 9%. Only 6% would choose the previous national favourite of Frank Sinatra's *My Way*.

Andrew adds: "It may seem gloomy but, like writing a will, planning your funeral in advance is a positive step. It brings peace of mind for all the family, including protecting them from rising funeral costs as everything is paid for."

And it appears we like a positive approach. The most suggested song (1.9%) outside of the top 10 was *Always Look on the Bright Side of Life* from Monty Python.

**"An advance funeral plan takes decision-making pressures away from loved ones."**

Other individual choices ranged from the reflective *Who Wants to Live Forever* by Queen, to the touching *Never Forget* by Take That and celebratory *I've Had the Time of My Life* by Bill Medley and Jennifer Warnes.

More tongue-in-cheek ideas included *Disco Inferno (Burn Baby Burn)*, *Light My Fire*, *Highway to Hell* and *Staying Alive*. Among individual and upbeat suggestions were *The Timewarp*, *Gangnam Style*, *Dancing Queen* and *The One and Only* by Chesney Hawkes.

For more information about pre-planning a funeral call 0800 0744361 or visit [www.eastofengland.coop/plans](http://www.eastofengland.coop/plans)

# Clydesdale and Yorkshire Banks committed to UK care sector



▲ *Derek Breingan, head of healthcare, Clydesdale and Yorkshire Banks*

**Care home operators in the UK are looking to the future with a heightened sense of optimism. Many are diversifying to cater for the changing needs of our ageing population, or working with partners, including specialist schools, social services, clinical commissioning groups, the NHS and private medical insurers, to provide specialist care for those suffering from dementia and long-term mental health issues or with learning difficulties.**

Most operators planning to grow their services will require investment by a funding partner. When seeking a funding partner, operators should look for expertise within the sector and a demonstrable understanding of their business. Questions you should be asking prospective funding partners include: Have you supported similar businesses? Can you produce evidence of how this helped the operator? Can I visit or speak to operators that you have supported?

It is also essential that operators are able to demonstrate a strong business plan. While the time may feel right for expansion, operators need

to be satisfied they are investing in their existing portfolio to future-proof their business models. And it is important to ensure standards are maintained while managing expansion plans.

In the last six months, Clydesdale and Yorkshire Banks has supported a number of growing care home operators to establish new homes, refurbish or expand existing premises, create new jobs and increase the level and quality of care available.

Among them is Home from Home Care, a specialist care home provider in Lincolnshire that is preparing to roll out an expansion plan to increase the availability of residential places and create new employment after securing £8m of new banking facilities.

Home from Home Care was established in Lincoln in 2004 by Paul and Ann de Savary with their son Hugo. They founded the company because of what they saw as a lack of suitable homes for their daughter, Laura, who has a complex learning disability.

Paul de Savary, co-founder at Home from Home Care, says: "Expanding on our uncompromising approach to supporting individuals, many who are already on our waiting list, would not have been possible without the support of the bank, which has worked closely with our team to help us realise our ambitions. The added bonus is the human element – being able to improve the

circumstances of a few more people for whom there are limited comparable services."

Another care business, Vida Healthcare, is being supported to create two new specialist dementia care homes in Yorkshire after receiving financial backing to launch its first home in 2012.

The proposed homes by Vida Healthcare, run by father-and-son team Chris and James Rycroft, are part of a strategy to create five homes with a total of 500 places. In 2012 the company opened the 70-bed Vida Hall in Starbeck, Harrogate, which created 70 new jobs.

**"While the time may feel right for expansion, operators need to be satisfied they are investing in their existing portfolio to future-proof their business models."**

Vida Healthcare's approach includes providing specialist care, which enables residents to reduce their dependency on antipsychotic medication. The care home operator works closely with a leading clinical psychologist, specialising in cognitive stimulation therapy, to pioneer a new treatment for mild dementia, which reduces anxiety and drug dependency.

James Rycroft, Vida Healthcare managing director, says: "The ageing demographics of our society mean that dementia care will become a growing part of the UK's healthcare provision. We're delighted to announce that we plan more homes and are looking to continue our partnership with the bank in achieving this."

It is to be welcomed that care businesses want to improve and enhance their existing portfolios to ensure positive outcomes for people in their care. The UK care home sector is one of Clydesdale and Yorkshire Banks' priority areas and we remain committed to working with businesses that can demonstrate strong business cases and a clear vision for growth.

## **Derek Breingan**

Head of healthcare  
Clydesdale and Yorkshire Banks



# Specialist neurological rehabilitation – the only way ahead

**High-quality specialist rehabilitation must become the pathway of choice for people with neurological conditions, says PJ Care chief executive Johann van Zyl.**

I'm not one to look back for too long, but for anyone in health and social care 2013 was a challenging year to say the least.

The Francis Report not only reviewed the catastrophic failings at the Mid-Staffordshire NHS Trust, but also put everyone in the care sector under the microscope. It came hot on the heels of 2012's Winterbourne View scandal, which saw former care home employees in court for neglecting and abusing patients.

**“High-quality specialist rehabilitation is the most clinically appropriate way to treat people with brain injuries and neurological conditions.”**

The issue of standards of care has never been more prominently in the public eye. So it was a wonderful moment in September 2013 when PJ Care officially opened its flagship £12m Eagle Wood Neurological Care Centre in Peterborough to the highest praise from one of the most vocal campaigners for improved social care. TV presenter and actor Sir Tony Robinson took a tour of the centre and declared: “I just wish Eagle Wood was replicated in every other town and city across the country. It's important to celebrate best practice. And Eagle Wood is just the best practice you could possibly have.”

But looking forward, rather than back, my strongly held view is that it's time for a major change in my specialist sector. It's time everyone accepted that high-quality specialist rehabilitation is the most clinically appropriate way to treat people with brain injuries and neurological conditions. And now is the time to increase investment in brain injury rehabilitation.

PJ Care runs three specialist neurological care centres – two in Milton Keynes and Eagle Wood. And we demonstrate every day that the highest quality specialist rehabilitation is clinically the most effective solution for people with neurological conditions – and also the most cost-effective.

Although specialist rehabilitation may in the short term cost more to funders than a person going home, ongoing savings are made because that person requires less support in the long run.

I'm not alone in my view by any means, Professor Michael Barnes, chair of the UK Acquired Brain Injury Forum, has also called for more investment in brain injury rehabilitation.

Prof Barnes said: “There is good evidence that although rehabilitation costs more money clearly than someone going home, or going to a nursing home, that money is recouped over two to three years by that person requiring less support from the state, getting back to work and earning money.”

Specialist rehabilitation is an issue that needs urgent attention. Every 90 seconds someone in the UK suffers a brain injury. There can be many causes, such as a bleed to the brain, a fall, an assault – often it is the result of a road accident.

**“The way forward is as clear as the evidence – but it will take serious lobbying and political will to make the necessary changes.”**

In these situations, the brain has to rebuild pathways to allow the person who has suffered the injury to relearn the things they once took for granted, and that is why specialist rehabilitation and appropriate quality care are so vital.

Other neurological conditions mean more than a million people in the UK are disabled and need care and rehabilitation.

The way forward is as clear as the evidence – but it will take serious lobbying and political will to make the necessary changes. Meanwhile, at PJ Care we will continue to provide the type of excellence in care that I believe everyone deserves.

We may not be able to do what Sir Tony Robinson has called for, an Eagle Wood in every town and city, but we will certainly continue to offer what we always promise – ‘compassion, commitment and care’ – to anyone who comes through our doors.

**Johann van Zyl**  
Chief executive  
PJ Care

Find out more about PJ Care, a provider of specialist neurological care and neuro-rehabilitation for people with progressive or acquired neurological conditions, at [www.pjcare.co.uk](http://www.pjcare.co.uk)



# Business round-up

## Sector

### Major growth among health and care social enterprises



Picture: A therapist from community interest company Bromley Healthcare with a patient

A report based on data from the RBS SE100 live web platform, an information resource for social ventures in the UK, shows that health and social care social enterprises have grown 121% in the last year, compared to an average growth of 42% across all social enterprises.

The RBS SE100 Index is a listing of social ventures, ranked and scored according to their growth and social impact. 15.8% of the 3,503 enterprises listed on SE100.net are primarily focused on delivering health and social care services, with activities ranging from running hospices to providing training for people with learning difficulties and promoting healthy eating.

Health and social care is the second largest sector (in terms of combined turnover) listed on SE100.net and accounts for £852m out of a total £11bn turnover of social enterprises in the UK, surpassed only by large housing associations.

The *RBS SE100 Quarterly Report* has revealed that 97% of income for social enterprises in the health and social care sector comes from local authority or health services contracts. Indeed, many of the health and social care organisations listed on the index are public sector spin-outs, encouraged by the Government as a more efficient, effective way to deliver public services.

For more information, visit <http://www.socialenterprise.org.uk/news/light-bulb-moment-for-health-and-social-care-social-enterprise-changing-the-face-holistic-healthcare-the>

## Care providers

### CareTech Holdings reports strong performance

CareTech Holdings has reported a strong performance for the half-year to 31 March with trading in line with directors' expectations. This performance reflects the strength of the group's underlying business and the success of its innovative new services developed in partnership

with care commissioners, positioning it for continued growth. CareTech has focused on care pathways and the reconfiguration of services to provide higher acuity care and higher margin services.

For more information, visit <http://www.iii.co.uk/research/LSE:CTH/news>

### Community Integrated Care plans £4.8m dementia service



National social care charity Community Integrated Care has announced proposals to develop a new £4.8m specialist dementia care service in Blackburn, set to open in summer 2015. The proposed development will be overseen by LNT Construction.

The service, which will be named EachStep Blackburn, will apply the charity's EachStep model of integrated dementia care, which aims to support people from diagnosis until the end of their lives. It will provide domiciliary care in the Blackburn community, as well as respite, residential, nursing and palliative care for 64 people within the new service.

The charity formally announced these proposals when it met local people and community groups from Blackburn at an open consultation event.

For more information, visit <http://www.c-i-c.co.uk/community-integrated-care-announces-eachstep-blackburn>

### ARCO announces new chair

The Associated Retirement Community Operators (ARCO), the trade association representing the leading providers of housing with care, has elected Richard Davis from LifeCare Residences as its new chair.

Richard will lead ARCO in its continued efforts to establish the housing-with-care sector in the



UK as a mainstream option for older people. He takes over from ARCO's inaugural chair Jon Gooding, who announced his resignation in December 2013 after accepting a new role outside the retirement community sector.

For more information, visit <http://arco.org/2014/03/arco-announces-new-chair/>

### Majesticare sells seven premium care homes

Legal firm Geldards has advised the shareholders of East Midlands-based Majesticare on the sale of seven of the company's care homes to Four Seasons Health Care, the UK's largest independent health and social care provider.

Majesticare has been operating luxury residential and nursing homes since 2000 and specialises in residential, nursing and dementia care for the elderly. It will retain nine of its homes following the sale.

## Movers and shakers

### CBE for Anchor chief executive



Jane Ashcroft, chief executive of Anchor – England's largest not-for-profit provider of care and housing for older people – has collected her CBE from Prince William, Duke of Cambridge, at Buckingham Palace.

Jane was recognised in the New Year's Honours List for her services to older people. She became Anchor's chief executive in March 2010 and in the same year was the first person to win the Outstanding Contribution to Social Care award at the Great British Care Awards.

Jane said: "It's a great honour to receive this award and to be recognised along with other members of our community who are committed to making a real difference to people's lives. To me, this award represents the tireless work of all of my colleagues at Anchor to enable older people to live fulfilling and happy lives. I have

# Business round-up

great pride in all of our achievements.”

Jane frequently advises government departments on older people's issues and is also chair of Care England – the largest representative body for providers of independent care services in England. She is a trustee of The Silver Line, a helpline for older people initiated by Esther Rantzen.

Jane also continues to campaign for government to take a joined-up approach to planning for demographic change by appointing a dedicated Minister for Older People.

## Huntercombe Group appoints chief executive



The Huntercombe Group, one of the UK's leading specialist healthcare providers, has appointed Valerie Michie as chief executive officer.

Valerie is currently managing director of Serco Health. She has successfully achieved a turnaround in business

performance and plotted significant growth for Serco in the UK, Middle East and Australia, by following her underlying belief in improving quality and enhancing the patient experience.

The Huntercombe Group is the specialist care business of Four Seasons Health Care, the independent elderly and specialist care provider owned by Terra Firma, a leading private equity firm. Huntercombe has 60 hospitals and specialist units providing care, treatment and rehabilitation services in areas of mental health and brain injury.

For more information, visit <http://huntercombe.com/news/company-news/April-2014>

## New vice presidents and director at Mencap

The Royal Mencap Society has announced two new vice presidents of the charity, and a new director of fundraising. Lord Dafydd Wigley and Alderman Alan Yarrow will help promote Mencap's work and learning disability issues within their own spheres of influence, while Richard Yorke will bring over 16 years of fundraising experience to the charity.

For more information, visit <http://www.mencap.org.uk/news/article/new-appointees-mencap>

## New Century Care appoints non-executive chair

New Century Care (NCC), a leading UK operator

of care homes for people with dementia and specialist nursing needs, has appointed Ted Smith as non-executive chairman. Ted brings extensive experience from a successful career in the healthcare sector. He was chief executive of European Care Group until the end of March and, prior to that was chief executive of Craegmoor for six years.

For more information, visit <http://www.pnewswire.co.uk/news-releases/new-century-care-announces-appointment-of-ted-smith-as-chairman-253526651.html>

## Friends of the Elderly appoints new chief executive



Friends of the Elderly has appointed Steve Allen as its chief executive.

Working alongside the board of trustees, Steve will take responsibility for the delivery of the charity's vision and its particular mission to tackle frailty, isolation and poverty among older people. Steve's past

experience has equipped him well to handle the changing landscape of health and social care and the charity's drive to integrate support for older people in their communities.

Steve founded his own care business on the south coast, after first working as a police officer and risk management consultant. He is a board member of the United Kingdom Homecare Association, and vice chair since 2012, and been part of the national Leadership for Empowered and Healthy Communities programme. Steve is also a director of the government-backed Coast to Capital Local Enterprise Partnership (LEP), where he leads on EU social cohesion and third sector partnerships.

For more information, visit <http://www.fote.org.uk/2014/03/19/new-chief-executive/>

## Property

### Barchester agrees new Castleoak care home development

Barchester Healthcare has signed a 35-year lease agreement with leading care developer Castleoak for an 80-bed care home in Castleton on the outskirts of Cardiff.

The £8.5m home will be funded by the CarePlaces Fund, a joint venture between Castleoak and sustainable growth investor Bridges Ventures that focuses exclusively on building high quality, sustainable homes for older people.

Over the last 12 years Castleoak has built 22 care homes for Barchester Healthcare, the equivalent of more than 1,400 care beds.

For more information, visit <http://www.castleoak.co.uk/newsroom/i/560/>

## McCarthy & Stone half-year results

McCarthy & Stone, a leading builder of retirement housing, has announced its half-year results to the end of February. Overall revenue is up 49% to £149.7m, driven by higher volumes and selling prices, and net profit of £11.5m reverses a loss of -£9.3m in 2013. Legal completions on properties rose 30% to 659 units compared with 506 the previous year, and the average selling price rose 17% to £205,000.

The company reports a 79% rise in forward sales revenues to £131.3m, and an increased land bank of approximately 8,500 plots under its control, with a projected sales value of £2bn. It is making good progress on planning, with all consents already in place to deliver its anticipated sales volumes for the next financial year (to 31 August 2015).

In March McCarthy & Stone received the Five Star award in the National House Building Council/Home Builders Federation Customer Satisfaction Awards for the ninth year in succession, the only UK house builder, of any size or type, to have taken top marks every year since the launch of the awards in 2005.

For more information, visit <http://www.mccarthyandstone.co.uk/media-centre/national-press/mccarthy--stone-half-year-results/>

## Acquisitions

### Sale of Bingley Wingfield Care Home



Karen and Mike Reynolds have bought Bingley Wingfield Care Home, which was converted from a Victorian residential building and had a purpose-built wing added to house

single en-suite accommodation.

The care home, with nursing registered for 48 by the Care Quality Commission, had an asking price of £1.25m, and is the couple's third care home in the West Yorkshire region purchased through specialist property adviser Christie + Co.

For more information, visit

[http://www.christie.com/en/news/2014/04/03/bingley\\_care\\_home\\_acquisition\\_makes\\_it\\_three\\_17794](http://www.christie.com/en/news/2014/04/03/bingley_care_home_acquisition_makes_it_three_17794)

# MP and resident unveil £1.6m Manchester care home expansion

New Care Projects LLP, the operator of the Manorhey Care Centre in Urmston, Greater Manchester, has recently completed a £1.6m project at the home.

The project was the addition of new accommodation, officially unveiled by Stretford and Urmston MP Kate Green and resident Milly Mitten, aged 84, from Urmston.

Now complete, Manorhey boasts an additional 20 beds, taking the home from 63 beds to 83 beds, catering for the increasing need for quality nursing, residential and dementia care in the region.

Milly says: "It was an honour to be asked to officially open the new accommodation at Manorhey. I have only been at the home for a few weeks but have settled in straight away. The staff are all exceptionally kind and have cared for me so well since I arrived. Manorhey is a lovely home."

Kate adds: "It was great to visit Manorhey, open the new accommodation with Milly and have a chat with some of the residents."

"The new space looks excellent and is a great addition to the dementia care on offer in Greater Manchester."

With Manorhey Care Centre regularly achieving 100% occupancy, New Care made the decision to acquire an additional parcel of land neighbouring the home to cater for the increasing demand for beds.

The 20 new beds will serve the home well, enhancing its clinical offering, including residential, nursing and specialist dementia care, and positioning Manorhey as the leading care centre in Urmston.

Furthermore, a £200,000 refurbishment within the original building is 60%

complete, ensuring the highest quality environment is maintained throughout Manorhey Care Centre. This is a delicate logistical operation as the work is underway while clients remain in the home, but will include an updated kitchen with blast chillers, now required in all care homes. Manorhey Care Centre will also boast an array of new services, designed specifically for the home by its hospitality and client experience manager, Kay Johnson, meeting the most rigorous of standards.

In recent weeks, Manorhey Care Centre has already welcomed 11 new residents, including Milly, testament to the home's reputation for the provision of affordable quality care.

Chris McGoff, chief executive of New Care Projects, says: "Manorhey Care Centre was our first home built in 2010 and it is a great achievement that four years in we have had to add beds to the premises to ensure the pent-up demand for our unrivalled care is catered for."

"At Manorhey Care Centre, the team

specialises in complex clinical care and we offer an affordable service, which not only represents excellent value for money but is received by residents in purpose-built surroundings.

"We are determined that all our residents are treated with respect, that they receive a second-to-none service and their dignity is at the heart of all we do, from which we have forged a formidable reputation."

For further information regarding Manorhey Care Centre, please contact Dawn Collett on 0161 747 6888 or visit [www.newcarehomes.com](http://www.newcarehomes.com).

(Below) Manorhey resident Milly Mitten (front left), joins Stretford and Urmston MP Kate Green (front right), to officially open the new accommodation, with Manorhey's registered manager Joanna Fryers (back left) and New Care's partner for clinical services and operations Dylan Southern (back centre) and chief executive Chris McGoff (back right)



# A FOCUS ON DEMENTIA AND PERSON-CENTRED CARE

Person-centred care is a key provision for service users within the care sector – it is particularly important for service users with dementia. The rationale behind this is to provide service users with both choice and empowerment.

Person-centred care also means treating service users with dementia with dignity and respect. Staff at your service should be able to go further than just meeting their basic human rights in every instance.

Examples of regular criticisms voiced by the Care Quality Commission (CQC) following inspections include a lack of personalised information in care plans, a lack of information on informed consent and mental capacity assessments for service users with dementia, and a lack of dementia-friendly décor and specific activities focused around dementia. We have also seen services criticised for not having provided dementia specific training to relevant care staff.

## Staff training and care plans

Appropriate training strengthens personalised care delivery and the development of positive staff values, attitudes and empathy. Providers should ensure that their staff receive training to ensure that they are equipped with the correct skills to provide a high standard of personalised care.

**“Providers should consider how the service user feels ... about the care they are provided with.”**

This can range from how to devise detailed care plans and making reasonable adjustments to reflect service user needs to training on communicating effectively with individual service users with differing levels of capacity, to ensure they understand and are involved in decisions about their care. Providers should consider how the service user feels and develop an understanding of how service users may feel about the care they are provided with.

## Consent

Valid consent should always be sought from people with dementia. To obtain appropriate consent you should inform service users of the options, check that they understand, ensure there is no coercion and that they continue to consent over time. If the service user is deemed to lack capacity to make a particular decision, the provisions of the Mental Capacity Act 2005 must be followed.

Providers need to ensure they have detailed records of all decisions made, including any capacity assessments or best interests decisions made on behalf of a service user, including details of



relevant individuals involved in the decision-making process.

**“CQC’s new approach to inspection ... provides for an increased focus on personalisation and quality care.”**

## Activities and décor

There are many ways residential care homes can make the environment more dementia friendly. For example, colour coordinated decoration and memory boxes outside service users’ bedrooms can aid service users in finding their way around the home. We have seen homes that provide ‘reminiscence’ rooms that are furnished to represent specific decades. Appropriate signage can also aid service users with dementia.

Activities provided will vary depending on the service user’s life history and personal preferences, but research by Alzheimer’s Society has shown that even simple activities, such as conversations, joint participation in games and personalised music, can be effective.

CQC’s new approach to inspection, to be implemented from October 2014, provides for an increased focus on personalisation and quality care. In particular, regulation 4 of the draft regulated activities regulations (Health and Social Care Act 2008 (Regulated Activities) Regulations 2014) – due to come into force on 1 October – will put person-centred care on a statutory footing.

It is therefore more important than ever to ensure that you are providing tangible personalised care to service users to ensure your service is prepared for an inspection under CQC’s new approach. Although many examples of good practice are seen daily throughout the care sector, it is often the case that only the negative is highlighted and portrayed to the public. Providers should not become complacent with the provision of personalised dementia care – it is vital that person-centred care provision is continually encouraged throughout the sector.

**Samantha Cox**  
Trainee solicitor  
Ridouts



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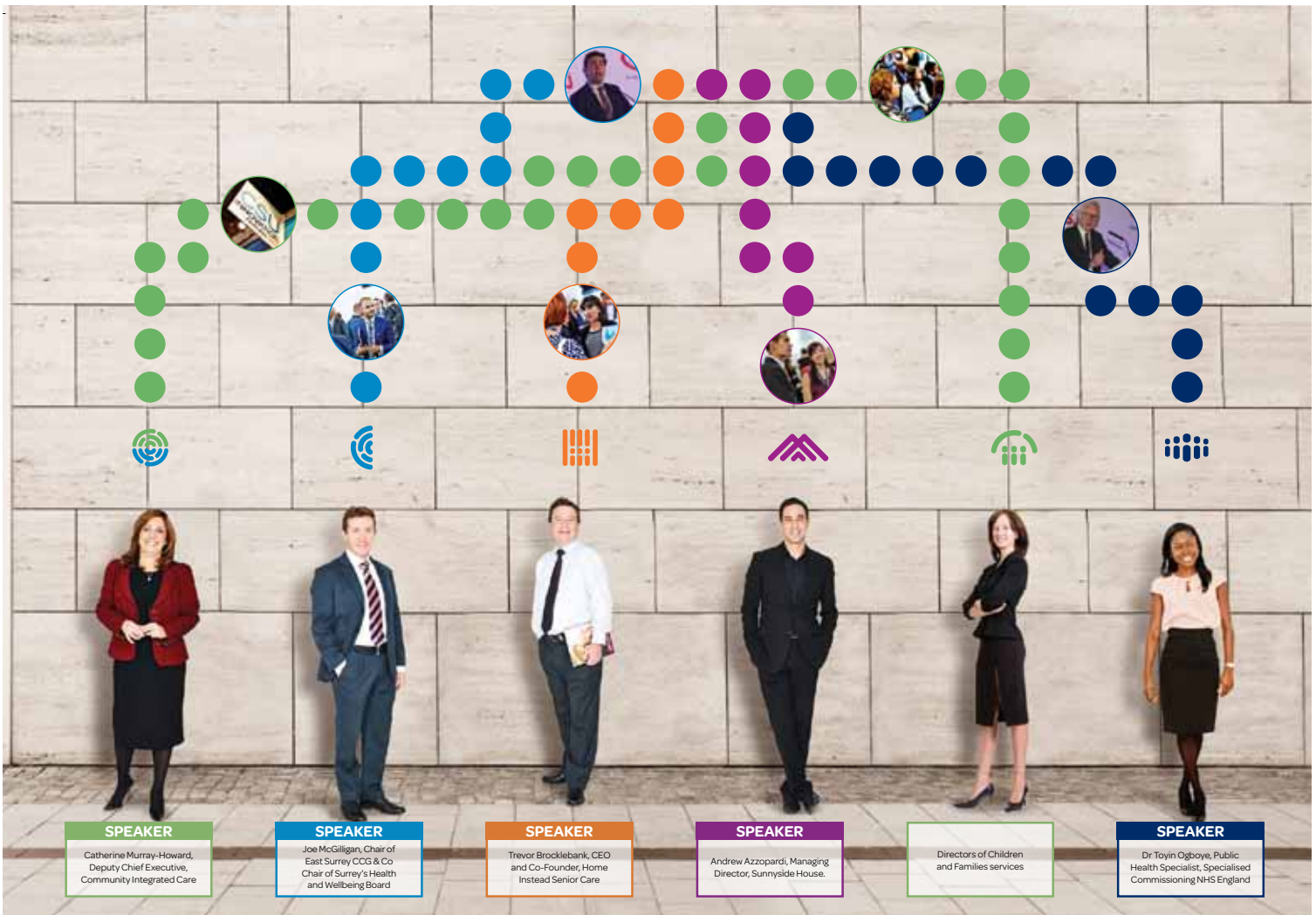
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## Coming up in the next issue of *Care Talk*

- Holidays and activities
- National Carers Week
- Guest editor - Products and services to prevent falls
- Falls Awareness Week



**SPEAKER**  
Catherine Murray-Howard,  
Deputy Chief Executive,  
Community Integrated Care

**SPEAKER**  
Joe McGilgan, Chair of  
East Surrey CCG & Co  
Chair of Surrey's Health  
and Wellbeing Board

**SPEAKER**  
Trevor Brocklebank, CEO  
and Co-Founder, Home  
Instead Senior Care

**SPEAKER**  
Andrew Azzopardi, Managing  
Director, Sunnyside House.

Directors of Children  
and Families services

**SPEAKER**  
Dr Toyin Ogboye, Public  
Health Specialist, Specialised  
Commissioning NHS England

## Health+Care is the only national event where health meets social care

Health+Care returns on the 25- 26 June 2014 at London ExCel. More than 7,000 professionals will gather from all over the country for 14 theatres of world class conference programmes, **with dedicated 'Home and Residential Care' theatres**, delivered by expert speakers and policy makers.

In addition to the 14 theatres of content, there will be a new Care Commissioning and Public Health conference, a centralised hub for technology – Technology First, and new features for 2014 for you to follow your own specialist learning needs.

Health+Care is the only event to bring together the entire health and social care sector on a major scale, making the event your best shared learning and networking opportunity. Plus the 400 exhibitors will enable you to source and compare the latest innovations.

**In just two packed days, you can update your knowledge and meet more people than you could from months of research in your office.**

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- > Meet the people that can award you budget available from the Step Down Care initiative
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- > See new innovative pricing mechanisms and ways of setting contracts
- > Debate the role of regulation in improving quality

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\*Commercial companies will not qualify for complimentary passes



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4th June  
York  
Racecourse

### South West

11th June  
Bath Racecourse

### South East

18th June  
Brighton  
Racecourse

### North West

25th June  
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