Developing a culture of relationship-centred care in a care home group


Abstract

This article outlines the development of a new way of working across a group of care homes in south east Wales, based on a philosophy of relationship-centred care and an ethos of empowerment for older people in the homes. The underpinning aim was to enable residents to have a good quality of life, reflecting recommendations made by the Older People’s Commissioner for Wales in a 2014 review into the quality of life and care of older people living in care homes in the country.

After the introduction of the new way of working, the care home group were approached by a university to take part in a collaborative project offering nursing students clinical placements in the care homes, mentored by registered nurses employed there. The collaboration between the university and the care homes meant that nursing students became enveloped in the person-centred culture, receiving positive exposure to nursing older people early in their careers. It is hoped that the clinical placements may encourage them to consider careers in the specialty.

Keywords

ageism, care homes, culture change, mentors, nursing students, older people

THE number of older people globally is increasing. In the developed world people aged 85 and older are the fastest growing population group (World Health Organization 2011). In the UK the Office for National Statistics (2012) projected that, by 2035, the number of people aged 85 and older will reach 3.5 million, accounting for 5% of the total population. Older people already make up the majority of patients being cared for in hospital, and in Wales there are twice the number of care home beds than there are NHS beds (Moultrie and Rattle 2015). The increasing demand on all care services, together with legislative changes wrought by the Social Services and Well-being (Wales) Act 2014, means there is a critical need to review the culture in care homes so that it meets the needs of older people.

In 2014 a comprehensive review into the quality of life and care of older people living in care homes in Wales was undertaken by the Older People’s Commissioner for Wales (OPCfW). The review involved visits to care homes across the country, together with focus groups and questionnaires involving older people and their families. It suggested that when older people move into a care home, they are in effect moving from one home to another, and they need to feel that they are moving to a real home, ‘a place that we hope will be filled with friendship, love and laughter’ (OPCfW 2014). This reflects well with nursing care, which is more than attending to older people's needs; it is about their wishes to experience love, compassion, fulfilment and a sense of belonging (Nolan et al 2006, Smith 2010, OPCfW 2014).

The review tasked commissioners, inspectors and independent providers to provide evidence about how they would respond to, and carry out, the recommendations made.

In light of the OPCfW (2014) report, a comprehensive strategic review was undertaken across the nine care homes in a group based in south east Wales to explore the culture of care. With the review team that comprised senior managers in the group, the group's director of quality and strategic policy (CS) carried out an initial strengths, weaknesses, opportunities and threats analysis.

Semi-structured interviews were conducted with residents, staff and relatives to find out more about the culture of care in the homes and whether they felt empowered living and working in them.

Developing a philosophy of relationship-centred care (Nolan et al 2006) was identified as the goal. Relationship-centred care emphasises seeing the care home as a community where older people, staff, family
and friends are valued. Everyone in a care home needs to have a sense of security, continuity, belonging, purpose, achievement and significance (Nolan et al 2006). Nurturing these senses for older people, staff, families and friends is a vital part of improving care. Person-centred care, which is part of relationship-centred care, involves treating people as individuals with dignity and respect, and enabling them to make choices about their care based on needs, preferences, interest and life history (Figure 1).

Workshops were held with all staff, from those involved in providing care to maintenance and kitchen staff, to explore the application of relationship-centred care and what it would look like in the care home group. The inclusion of all staff in the workshops aimed to ensure they were all on board to implement the change to relationship-centred care.

The director of quality and strategic policy and strategic review team developed an action plan consistent with the belief that older people want to enjoy a good quality of life and their families and staff working in the homes also want a positive experience. The plan demonstrated a commitment to a culture of empowerment for older people. It was an important point for change and recognised a need for a holistic, relationship-centred approach where collaborative working was the change agent. Several theories encourage person-centred care, but all of them accentuate the importance of relationships and valuing staff and residents as equals (McCormack and McCance 2006, Nolan et al 2006, Hurtley 2007). This was the aim of the culture change.

To implement the change a pilot was undertaken in one home to observe, learn and share knowledge across the care home group. We worked with families to raise awareness of the changes ahead, explaining the reasons for them and what they could expect. Most importantly, we engaged with older people and care teams to ensure that it was a positive process and that individuals were able to continue enjoying their lives and experience improved quality of life and happiness in the homes.

**Nursing student placements in care homes**

Studies globally have found that nursing students can hold negative attitudes towards older people (Nolan et al 2002, Nursing and Midwifery Council (NMC) 2009, Kydd et al 2014). Such attitudes may be exacerbated by nurses and the education sector, for example:

» Educationalists can influence students’ attitudes to different groups in positive and negative ways (Coleman 2015).

» Education largely increases negativity about working with older people (Engström and Fagerberg 2011, Nash et al 2014).

» Pre-registration training values technology, and cure and caring have largely been devalued (Stevens 2011).

» Lack of input on caring during training and the skills needed to care (Deasey et al 2014).

There are many benefits to nursing students undertaking placements in care homes and gaining an understanding of the needs of older people at the start of their careers.

Currently nursing students undertake most of their clinical placements in NHS primary and secondary care settings, with little independent sector involvement. However, most nursing care of older people is provided in care homes and the majority of nurses will come into contact with older people at some point in their careers. It is therefore important that students understand the opportunities for learning in care home settings and the career possibilities available.

The care home group was approached by the University of South Wales about offering clinical placements and was keen to collaborate. Registered nurses were identified as potential mentors from each of the company’s nine care homes. To assess the suitability of the homes for placements, educational audits were carried out using the All Wales educational audit (All Wales Nursing and Midwifery Pre-registration Group 2011) and full mentorship training was given to the nurses by the university’s link lecturer (NMC 2008).

All the selected nurses undertook 2 days training, in addition to self-study and use of workbooks, to attain the standards required by the NMC (2010). This training gave an overview of the curriculum and their responsibilities, alongside developing the nurses’ assessment and coaching skills. They gained in confidence, which gave them the

---

**Figure 1. Framework for care**

- **Relationship-centred care**
  - Relationship-centred care emphasises seeing the care home as a community where older people, staff, family and friends are valued.

- **Person-centred care**
  - Person-centred care involves treating people as individuals with dignity and respect and enabling people to make choices about their care based on their needs, preferences, interest and life history.

(Nolan et al 2006)
Implications for practice

- The number of older people is increasing and there is a greater need for well-educated, committed nurses to care for them.
- Changing the culture in care homes using a relationship-centred approach that focuses on the needs of older people may encourage more positive attitudes.
- Nurses who are encouraged to engage with higher education providers may be more empowered to develop and further their knowledge.
- In positive learning environments students may be encouraged to consider working with older people and develop positive attitudes.

The mentor was very helpful and I learned in positive learning environments.

- Nursing students were placed in the homes under direct supervision of the nurse mentors. The students were made aware of the culture of empowerment and the relationship-centred care model in use. Formal evaluation is yet to be undertaken but initial limited and informal feedback has shown that the students were enthusiastic about the culture and there was great potential for practice-based learning in the placements. The mentors were keen to support the students and to ensure they understood and could respond to the needs of older people. Student comments from the informal feedback included the following:
  - "We are able to spend time talking with older people and to find out more about them as a person using the “Who I am” document."
  - "I feel part of the team and get included in the family-centred approach. It is so different from hospital care."
  - "The mentor was very helpful and I learned from her clinical work."

Conclusion

The aim of the culture change outlined in this article was to develop and implement a relationship-centred framework to deliver person-centred care. The framework fostered a new culture with an ethos of empowerment for older people. Change is not always easy. However, the benefits of this new way of working far outweigh the challenges. The collaboration between the university and the care homes meant that nursing students became enveloped in this culture, receiving positive exposure to nursing older people early in their careers. It is hoped that the clinical placements in the care homes will encourage them to develop positive attitudes in the care of older people. They may, in the future, become valuable members of the independent sector workforce.

References