



# Making Pals

Community led activities for older people in care homes

## Consultancy Brief

### 1. Background of Project

#### 1.1. Background of Alive!

Since 2009 Alive! has been dedicated to improving the quality of life of older people in care homes through meaningful activities: meeting individual needs and improving well-being. Alive! aims to transform the residential care sector so that older people's mental, social and emotional well-being is prioritised alongside their physical care by:

- Using innovative techniques to enhance well-being through engaging and enabling older people to reconnect with important memories, life experiences / interests.
- Modelling good practice, providing training/ongoing coaching for care home staff to deliver person-centred, meaningful activities.
- Supporting the development of sustainable relationships between care homes and local communities, to combat residents' loneliness and isolation.
- Acting as an advocate for older people in care, by engaging with policy and decision makers.

Alive!'s offices (and the majority of our staff team) are based in Bristol where we have a strong presence, and active, well-established links with care homes, local authorities, and the academic and voluntary sectors. In 2015, well-being sessions benefited 7,700 older people in 385 care settings (Care Homes and Day Centres) in Bristol, Bath and North-East Somerset, North Somerset, Gloucestershire, South Gloucestershire, Dorset, Hampshire, West Sussex and Wiltshire.

## 1.2. Background of Making Pals

The Henry Smith Charity (HSC) is funding Alive! to develop a three-year community engagement project for older people living in care settings across Greater Bristol. In order to achieve the greatest impact, we intend to focus on residential care homes in the 'Greater Bristol' area. This is defined as the four unitary authority areas of Bristol, Bath and North-East Somerset, South Gloucestershire and North Somerset.

The project title is 'Making Pals'; it will build on Alive!'s intergenerational projects Paint Pals and iPals that connect CH residents with local school children. 'IPals' uses iPads and Paint Pals uses painting to nurture mutually beneficial relationships.

Making Pals' aim will be to challenge and break down the barriers between care homes and the local community, local businesses, groups and organisations and nurture relationships, so that older people in care (even the frailest) can be part of community life. We wish to pilot a number of community engagement approaches and interventions and share the lessons far and wide. In doing so, we want to achieve the following objectives:

- Change the way in which care homes are perceived, by celebrating excellent practice and promoting positive images that challenge negative stereotypes;
- Encourage care homes (residents, staff and relatives) to see their care community as being an integral part of the local neighbourhood and to develop new ways to engage with it;
- Support the development of meaningful, sustainable relationships between care homes and people/organisations outside the home;

## 2. Scope of Making Pals

Making Pals will work with 10 care homes over the first six months of the project to understand and refine methods for understanding residents' 'assets' and how they would like to be involved with their community. The learning from this exercise will be taken to produce a toolkit that will be tested with further care homes in the Greater Bristol Area over the following three years. Ultimately it will be distributed to care homes nationally.

In the Greater Bristol area, Making Pals will conduct an in-depth community asset mapping exercise. The outcome of this will be an easy to use resource for all care homes in the area, so they can signpost themselves to the right community groups to fulfil their residents' requests.

After the scoping phase, the project will work with care homes and the local community to trial different methods of intervention to encourage community engagement and

evaluate their effectiveness in various situations. It will then produce a list of possible successful community engagement methods for all care homes to use.

The combination of these activities will mean that care homes can open a dialogue with their residents around what they want to do while equipping them with the tools, support and contacts to make that happen.

In addition, an evaluation and toolkit detailing the most successful of these methods will be produced to allow this to be replicated in other areas across the country.

### 3. The Consultation

Making Pals will run in-depth studies of 10 care homes to understand what activities residents would like to take part in and what opportunities there are to fulfil these requests in their local area. Learning from these 10 studies will inform the focus of the latter stages of the project as well as the design of methods to collect activity suggestions in all subsequent care homes involved with Making Pals.

#### 3.1. Selection of Participating Care Homes

The care homes selected for in-depth studies should contain the maximum variety of conditions needed to test & learn before replication at scale. The defined criteria for selection will be as follows;

- **Deprived and wealthy** – *(using the mdi index- local authority for care homes outside of Bristol)*
- **Large and small**– *by number of beds*
- **Outstanding and those under special measures/requiring improvement** – *using CQC rating*
- **Urban and rural**- *Based on the density of housing in the local area*
- **Residents living with dementia** - *Homes focusing on advanced dementia and homes providing care for people who are cognitively able*

Care will be taken during the selection process to have one of each of the extremes named above. Where there is extra capacity, homes requiring improvement and/or focusing on dementia will be favoured due to their more challenging nature and therefore greater need for testing.

Selection of care homes will be finalised by the Making Pals team in consultation with other members of Alive! staff.

## **4. The Making Pals Research Methodology**

The methodology used will be a mixture of desk-based research completed by the Making Pals team and information collected directly from care home staff and residents. All activities outlined below will only take part in the 10 selected care homes. What we learn from conducting the below research will help inform the Making Pals project in supporting other care homes to understand their residents' needs.

### **4.1. Phase One – External Asset Mapping**

**June 2017 - October 2017**

This phase is to be carried out by the Making Pals team with help from the selected care homes.

The Making Pals team will begin by seeking out and understanding examples of local, national and international best practice in the field of community engagement with elderly care homes. This information will provide the project and its stakeholders with a bank of inspiration to drive the project forward.

Key to the success of the project will be the process of creating maps of all community assets around the selected care homes and eventually across Greater Bristol. The asset maps will provide a resource of contacts for Making Pals, care home managers and volunteers to drive forward the requests of residents. These assets should include a good variety of local institutions and community groups, as well as businesses that may be able to provide resources such as transport and physical donations.

As care homes will be more familiar with their local area than the project team, their input should be requested during this process and their local knowledge captured. In addition, a list of organisations they have engaged with, have been unable to engage with and who they would like to engage with should be collected.

The outcome of this phase will be an interactive map that can be used as a resource for all care homes in Greater Bristol. This map will be maintained by Making Pals throughout the duration of the project and measures taken to ensure the accuracy of the work after the project funding ends.

## **4.2. Phase Two – Internal Asset Mapping**

**September 2017 – February 2017**

There are two main aims of the internal asset mapping phase of the consultation;

1. Mapping the level of community engagement that already takes place in care homes
2. Understanding residents' assets, skills and desires for activities.

### **4.2.1. Aim 1 - Mapping care homes' current community engagement**

To understand the level of community engagement taking place in care homes a survey will be promoted nationwide. This survey will seek to understand what engagement goes on but also the perceived and real barriers to working with the community. It will focus on;

- Current levels of community engagement taking place within care homes
- What assets/resources are available to care homes to assist with community engagement
- What perceived or real barriers are preventing community engagement
- How access to transport affects community engagement and activity provision

More in-depth work will take place with the 10 care homes chosen for the scoping phase, this will take the form of;

- Interviews with residents, relatives, activity co-coordinators and managers to record the opportunities that residents currently have to request activities
- Interviews with activity coordinators to understand what processes are in place to capture the residents' skills or assets.

- Interviews with activity coordinators and managers to help us understand what they perceive as activity and engagement
- Analysing activity schedules and conducting interviews with activity coordinators and managers to help us understand the current level of community engagement and any challenges/successes they have encountered

This work will help us understand the challenges the project will have to overcome and help avoid reinventing the wheel when designing outcomes in the later stages of the project.

#### **4.2.2. Aim 2 - Understanding Residents**

Due to the high chance of care home residents living with some form of physical or cognitive impairment (e.g. dementia, hearing loss) and the varying severity of these conditions, it is important that careful consideration is given to how they are consulted. Therefore, a range of approaches to gathering suggestions and requests should be used and tested.

A combination of two one-hour sessions of the below methods would ensure that all care home residents have the opportunity to contribute to the Making Pals project. The exact combination of sessions will differ for each setting and so will be determined by the project team and consultant, with direction from care home staff and other members of the Alive! team.

##### **4.2.2.1. The use of existing residents' meetings**

Care homes will usually always have a residents' meeting either monthly or bi-monthly. Using this format to discuss activities would be useful as residents are already present to engage in planning for the home.

This approach should be supplemented by one of the following workshops as it will only engage those residents who are already active decision makers in their home.

- **Recording Sessions**
  - audio recorded
- **Suitable for**
  - Residents who are cognitively able though to those who are living with mild dementia.

- **Delivered by**
  - The session should be delivered by one of the Making Pals project team

#### **4.2.2.2. The use of Alive!'s guided reminiscence sessions using iPads**

Alive!'s guided reminiscence sessions using iPads can be delivered by one presenter using a projector. Though the use of an iPad app, the presenter asks around 5-6 residents what activities they enjoy and helps them create a collage containing photos of themselves and their activities. As the whole group can hear each resident speak and see pictures of the activities on the large screen, all residents can be encouraged to comment on their feelings towards each activity.

- **Recording Sessions**
  - audio recorded
  - iPad collages are to be collected for exhibition at a later stage of the project
- **Suitable for**
  - Residents who are cognitively able though to those who are living with moderate dementia.
- **Delivered by**
  - The session should be delivered by one of Alive!'s trained iPads presenters.

#### **4.2.2.3. The use of Alive!'s guided reminiscence sessions**

Alive!'s guided reminiscence sessions involve objects being available for residents to handle that are designed to spark memories from their past. For the Making Pals project, a collection of activity related objects will be presented to a group of up to 10 residents to spark discussions around their past and current hobbies.

- **Recording Sessions**
  - audio recorded
  - photos of residents holding their favourite objects will be collected for exhibition at a later stage of the project
- **Suitable for**
  - Residents who are cognitively able though to those who are living with moderate dementia.
- **Delivered by**
  - The session should be delivered by an Alive!'s presenter trained in guided reminiscence with help from any additional staff available.

#### **4.2.2.4. The use of one-to-one sessions**

Working with Alive!'s trained presenters, the project team and care home activity coordinators, one-to-one sessions with residents of around 20 minutes are used to understand what activities they enjoy. To ensure a satisfactory number of residents, around 7, are consulted over the course of 60 minutes, extra people will be needed to conduct simultaneous discussions. A discussion brief should guide this session and a selection of photographs of various activities should be present to stimulate conversation.

- **Recording**
  - audio recorded
  - photos of residents holding their favourite photo should be collected for exhibition at a later stage of the project
- **Suitable for**
  - Residents who are cognitively able though to those who are living with advanced dementia.
- **Delivered by**
  - The session should be delivered by one of Making Pals project staff with help from any supplementary people available.

Supplementing the above sessions, all care homes will have access to the following activity throughout the consultation period.

#### **4.2.2.5. The use of maps, suggestions boxes and cards**

This method uses A5 cards that prompt residents, staff or relatives to fill out a residents' preferred activity and deposit it in a suggestion box. Through talking with care home staff and managers, this has been suggested as a way to gather information from residents who usually shy away from group activity or may not be able to contribute to a group discussion. This approach will also allow relatives who have prior knowledge of a residents' preferred activities to contribute to the research.

The forms would be left in communal areas around the care home for the length of the scoping phase and staff would be briefed on what the forms are for and encouraged to fill them out for the project. The forms would then be deposited in a suggestion box and collected by the Making Pals project team. Suggestions would then be inputted and mapped.

The cards should be kept to contribute to an exhibition at the end of the project.

In addition to the suggestion boxes, wherever possible, a map of the care home's local area will hang on the wall with flags provided in order for residents, relatives

and staff to pin locations on the map they would like to visit. This work will feed into the external asset mapping exercise.

This method would be suitable for residents of all cognitive abilities, providing support is available to help them fill out the cards.

## **5. Analysis and Presentation**

### **5.1 Analysis and report production**

A consultant should be used to advise on the methodology at the beginning of the project and will meet with the team regularly to make sure collection methods continue to be satisfactory.

They will then be provided with the outcomes from the consultations with all care homes to prepare a report. The report should be as easy to read and accessible as possible.

### **5.2 Presenting the findings**

The report will be publicly released and redacted where needed before promotion. Where quantitative data is available, data visualisations should be prepared by the project team to accompany the report.

The findings from the report should be developed into a toolkit by the project staff to allow further care homes to follow the same process as Making Pals and distributed nationally. Before distribution, the kits should be tested with care homes working with Making Pals in the latter stages of the project.

## **6. Managing the Consultation**

### **6.1. Timescales**

- Recruitment of consultant closes – **12pm 9<sup>th</sup> August 2017**
- Candidates shortlisted – **Mid August 2017**
- Interviews held – **End August 2017**
- Consultation begins – **September 2017**

- Finished Report due – **December 2017**

## **6.2. Ownership**

Reports for all phases of the consultation and all documentation produced for it will be the joint property of Alive! and the consultant.

Alive will have full rights for the promotion of the consultation, and its findings after project closure. The consultant should seek approval when looking to use the outcomes of this brief for anything other than the personal promotion of the individual or agency.

## **6.3. Roles and Responsibilities of Parties**

The following roles will be in place in order to deliver the Making Pals project and its consultation;

- **Project Manager & Primary contact for Evaluator; Emma Dyer** (Primary contact in the absence of Project Manager, Jennie Reed, Marketing Manager)
- **Project Assistant; Hayley Rogers**
- **Donor advisor; Terri Mc Donald**

Consultants will be supported by the project team in order to gather the data, interviews and resources needed in order to complete the specified tasks.

## **6.4. Payment Schedule**

The Consultant will be paid by bank transfer within 30 days of invoicing after their consultation report is signed off by the Making Pals and Alive! teams.

# **7. Submissions**

## **7.1. Skills and Competencies**

The key criteria we are looking for from the successful consultant are:

### **Essential**

- Extensive knowledge and experience of needs assessment / co-production with participatory consultation methods

- Extensive experience of presenting needs assessment reports in appropriate formats.
- Extensive experience in communicating with older people and care sector/older people's stakeholder agencies.
- Ability to conduct robust beneficiary profiling and independent desk research using both quantitative and qualitative methodologies

## **Desirable**

- Previous experience producing needs assessment / co-production reports for work with older people
- Experience of communicating with older people including people living with dementia and/or other cognitive or physical impairments.
- Consultants who work via a limited company will be preferred. This is so that they do not need to be employed on a short-term contract in line with our obligations to HMRC

## **7.2. Selection process**

The process for selecting the consultant for this assignment will be as follows. We would like consultants to produce a brief document. This should be no more than 4 sides of A4. It should include the following;

- Short critique of the above-proposed activities, including anything you may wish to change
- Outline, headings only, of the consultation report you will be producing
- Number of days, daily rate and overall cost of the consultation, broken down by project phase and daily rate to be charged. Where more than one consultant is utilised, the proposal should make clear any differences in day rates between consultants and the allocation of tasks between consultants
- Summary of key knowledge, experience and skills of the consultant, including two references of organisations for whom they have conducted similar work
- An example of their work in the area of conducting (participatory) needs assessment / co-production work

- CVs of any consultancy staff who additionally be involved in the consultation

## **8. Further information**

Please feel free to contact **Emma Dyer** if you have specific questions which are not answered here. Candidates who are shortlisted will be invited to an interview.

Proposals should be sent to:

**Emma Dyer**

**0117 3774756**

**Emma@aliveactivities.org**

Or

Alive! The Create Centre, Smeaton Road, Bristol, BS1 6XN