



Study commissioned
by Suffolk Artlink

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A REFLECTIVE STUDY OF
THE CREATIVE CARERS
PROGRAMME



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Executive Summary

Creative Carers is a comprehensive training programme run by Suffolk Artlink for those involved in delivering creative activities within care homes and day centres in Suffolk. Designed for employed carers and volunteers working within the caring profession, twelve homes and centres across Suffolk will have completed the full Creative Carers programme by Autumn 2007. This study places Creative Carers in the wider context of the caring profession as a whole, taking into account relevant government policy. The study includes observations of in-house creative workshops, informal interviews with carers, activity coordinators, artists, trainers and staff from Suffolk Artlink and two case studies at different stages of the programme.

In 2003 Social Care Services in Suffolk identified a need for improving the skills of carers of older people in the quality of activities that they offer to their client group. As a result, Suffolk Artlink undertook research via visits, questionnaires and discussions with individual carers, and delivered pilot projects to provide evidence of the need for arts based training for carers. The pilots informed the design of the Creative Carers Training Programme and as a result, Artlink decided to invest in training carers of the elderly in order to ensure longer term benefit of arts activities in homes and long term improvement in the quality of life of those they care for. The programme aims to

- Give carers of older people the additional skills and confidence to deliver high quality activities
- Create new opportunities for older people and their carers, to take part in creative activities with professional artists
- Improve the long term care for older people in Suffolk
- Improve the job satisfaction and confidence of carers
- Encourage Care Home volunteers to undertake further training to progress towards paid employment
- Ensure sustainable good quality activity provision in care homes

The programme recommends a specific and adaptable approach to creative activity in care homes developed through experience of individual arts projects for the elderly.

Key points addressed by the programme include

- Encouragement of carers to explore their own creativity
- Training that is easily adapted to carer's workplaces and clientele
- Training that delivers a set of tools to create a portfolio of ideas
- Whole day group sessions away from the workplace and individual sessions in the workplace
- Use of inexpensive materials for creative activity
- Encouragement to draw on clients as a resource for ideas, preferences and personal ideals
- Regular record keeping
- Inclusion throughout
- Equality and participation rather than outcome driven activity are of paramount importance
- An artbox of creative materials given to each home
- The importance of process over product
- Encouragement of managers and carers to assign time for the evaluation and development of their creative programme

The training aims to give the carers

- Creative skills
- Workshop facilitation skills
- Communication and presentation skills
- Planning and time management skills
- Experience of collaborative working
- Increased confidence and self-esteem
- Strategies for the generation of creative ideas and their mode of delivery

Conclusions and Reflections

The Creative Carers programme has grown slowly, responding to local demand and thorough testing has ensured it is built on firm foundations. The programme chimes with current political, medical and government thinking, finding itself at the centre of new practices.

The programme causes a number of beneficial modifications to carers and their clients:

- Elderly people who encounter creative carers become more active physically
- They become more active mentally
- Through common creative experiences they become less isolated and more socialised
- They make less demands on their carers - less attention seeking (fewer loo trips, less requests to see the doctor, less complaints)
- Nursing staff are able to get on with nursing duties with less interruption
- The relationship between carer and cared for is changed and humanised
- Carers are empowered and grow in confidence
- Carer job satisfaction is increased

Recommendations

The study identifies a number of key recommendations for the future

- Establish a postal, verbal or email network between carers
- Arrange workplace visits for carers to underpin networking
- Ensure Care Home managers attendance at Open Day in order to highlight required support for carers on the programme
- Ensure carers attendance at evaluation meetings
- Establish a more realistic and acceptable level of payment from Care Homes to confirm their place on the programme
- Trainers must ensure the programme strongly advocates process over product throughout
- Advocate collaborative working to allow authors or makers to remain anonymous.
- Demonstrate to Care Home Managers the value of planning time
- Trainers should work with carers to understand causes of client unwillingness to participate in creative activity
- The programme should strongly advocate respect of client's wishes
- Introduce cross-artform activities into the programme
- Accreditation, or another form of recognition for carers should be considered
- Trainers must be cautious in their use of artistic or technical terminology during the delivery of the programme

Taking the programme forward

In setting up a county based and/or regional programme in the future, the following points need to be addressed

- An efficient communication structure
- An online resource
- Artist and trainer recruitment process must rigorously question applicants to ensure their working practice rings true with the programme's philosophy and aims
- Adequate funding for artist training to deliver the programme
- A follow up session in each care home, possibly one year after the programme has been completed

There is an apparent tension between the requirements by government placed on care home managers to provide and evidence activities for their clients and the provision of activities that value process and are inclusive, beneficial and socially worthwhile. There is a strong place for Suffolk Artlink as the county agency to lobby government (DCMS/Strategic Health Authority) to ensure that terminology on official paperwork allows for the widest range of activities to take place and that this is recognised by care home inspectors.

As a unique and beacon project for Suffolk Artlink, Creative Carers is likely to attract interest from neighbouring agencies. Tailoring the programme into a transferable model holds marketable potential.



A Reflective Study of the Creative Carers Programme

This research has been undertaken as a reflective study with specific case study enquiries into the Creative Carers programme, focussing on two care homes at different stages in the programme to assess performance with regard to core objectives.

The research has included observations of in-house creative workshops, informal interviews with carers, activity coordinators, artists, trainers and staff from Suffolk Artlink. Further to this, the wider perspective of care home activity on a local and national level has been studied. All data collected has been anonymised where appropriate. For ease of writing, the term Care Home should also be seen to include day centres.

It might seem that the clients, as main beneficiaries of the creative activity advocated within the Creative Carers programme, do not feature heavily in this study. The main focus for this research has been to study the empowerment of Care Home workers to deliver creative activity. The benefits of the arts and arts activity to health are identified early in the study. This study aims to reflect the range of experiences of those involved and, in so doing, provide conclusions that are useful to stakeholders and other interested parties.

Validity of the study

In a study of this kind where multiple perspectives on a subject are of interest, it makes no sense to ask questions which can simply be answered yes or no, as with a testable scientific hypothesis. Qualitative methods of enquiry such as case study, ethnography, etc, are designed to recognise and embrace the complexity of human experience and interaction and are therefore an appropriate means of investigation for this evaluative study. Using qualitative methods of enquiry will predictably come under scrutiny for its reliability. This is because the study appears to rely heavily on anecdotal evidence or hearsay and speculation. If a scientific hypothesis were being tested, anecdotal evidence becomes largely, although arguably not totally, irrelevant. However, this study is not concerned with 'validity' or 'testability' in the scientific sense. Therefore, the analysis of material was conducted within the following criteria

- Is a claim *likely* in the overall context of the study?
- Was the respondent sufficiently close to the event/person to give a *credible* account?
- Are there comparable accounts from more than one source?

Aim of the study

Generally this study aims to represent fairly both negative and positive views about the Creative Carers programme. In addition, it aims to place Creative Carers in the wider context of the caring profession as a whole. The paper takes into account government policy and seeks to place Creative Carers within this framework, looking specifically at government directives to care homes in relation to their activity programmes.

The length of this study limits the scope and depth of information that can be included, however it seeks to provide sufficient information to assess the broad position of creative activity in care homes today and includes sources of information for further reference. The paper does not examine the wider range of care home provision nor does it study care in general. What the study does address, is the function and effectiveness of the Suffolk based Creative Carers model.

A word on language

The caring profession is located in a variety of situations and as such adopts multiple terminologies to identify key groups. Residents, customers, clients, the elderly, the cared for, are all frequently expressed descriptive words for the people carers look after. Similarly, 'carers' as a general term can include trained nursing staff, general care workers, activities providers and those in the voluntary caring sector. For the purposes of this study, the term 'carer' and 'activity coordinator' will be used but should be understood in the broadest sense. Those that are cared for, in whatever situation are generally referred to as 'clients'.

Provision of Care

The provision of care for the elderly is undertaken across the UK within three different frameworks, although there is some cross over that can occur particularly when a client is transferring from one type of care to another. These are:

- Caring for the elderly within the family unit, either with the elderly person remaining in their own home or living with relatives
- Home care for those wishing to remain in their own homes but with regular visits by trained professional carers, this includes retirement homes where the elderly live independently but within a secure sheltered housing or warden assisted arrangement
- Care homes – dedicated residential homes that provide for all a persons needs, ranging from basic minimal care through to nursing care

Within these are subdivisions, for example, day centres situated within a community or as part of a care home. This range of services for the elderly provides for the needs of the majority of situations. Government guidelines and standards for those delivering care services

seek to ensure uniform standards of care across homes and services and make certain of appropriate social, cultural and medical care for each setting.

The Commission for Social Care Inspection, set up by the Government, operates a regular inspection programme to all care homes, council social workers, home care, nursing agencies and adult placement schemes and those living with families. One aspect of their inspection is the provision of social activities.

The Care Standards Act 2000 contains the National Minimum Standards for Care Homes for Older People, published under section 23 (1). Within the standards, number 12.1 states

The routines of daily living and activities made available are flexible and varied to suit service users' expectations, preferences and capacities.

In addition, the standard states

Service users have the opportunity to exercise their choice in relation to: leisure and social activities and cultural interests; food, meals and mealtimes; routines of daily living; personal and social relationships; religious observance.

The expected outcome is that

Service users find the lifestyle experienced in the home matches their expectations and preferences, and satisfies their social, cultural, religious and recreational interests and needs.

Arts and health, a mutually beneficial relationship?

As far back as 1859, in her Notes on Nursing, Florence Nightingale wrote

The effect of objects, of beautiful objects and especially of brilliance of colour is hardly at all appreciated... people say the effect is only on the mind. It is no such thing. The effect is on the body too. Little as we know about the way in which we are affected by form, by colour, and light, we do know this that they have an actual physical effect. Variety of form and brilliancy of colour in the objects presented to patients are actual means of recovery.

Nightingale, in Haldane, 1999

There has been intensity in the debate over the value of the arts to health in recent years. Whilst there is a history of the arts being part of a holistic approach to wellbeing with well-noted examples of their mutual benefit, trusted research and evidence has only been developed in the past decade. Based in the Chelsea and Westminster Hospital, Dr Rosalia Staricoff completed *A Study of the Effects of Visual and Performing Arts in Health Care* in 2004. Dr Staricoff concluded that the integration of the arts in healthcare

Induced significant differences in clinical outcomes,

Reduced amount of drug consumption,

Shortened length of stay in hospital,

Improved patient management,

Contributed towards increased job satisfaction,

Enhanced the quality of service.

The Kings Fund has commissioned several studies on arts and health and their website lists some of the growing number of publications on the subject, for example *The Arts in Healthcare* edited by Duncan Haldane and Susan Loppert. Organisations large and small have begun to put arts and health on their agendas, examples include the Norfolk

Arts and Health Forum (a subdivision of the Norfolk Arts Forum), Suffolk Artlink's arts and health network run in partnership with Sound Sense¹ and Critical Connections, an organisation dedicated to an arts and health development programme in Yorkshire and the Humber. A number of Arts and Health Consultancies have been formed across the country² and operate a wide range of related services, from conducting research to managing arts projects or working strategically across authorities and organisations.

Nationally, arts and health are now at the centre of policy making. In 2006 The Department of Health commissioned a Strategic Review of Arts and Health. Set up by Harry Cayton, The National Director For Patients And The Public, the working group for the strategy included Arts Council England, the Health Service, local Government, professional bodies and organisations, individual patients and service users, artists' charities and the construction industry. The key findings were published in April 2007 as follows

- Arts and health are, and should be firmly recognized as being, integral to health, healthcare provision and healthcare environments, including supporting staff
- Arts and health initiatives are delivering real and measurable benefits across a wide range of priority areas for health, and can enable the Department and NHS to contribute to key wider Government initiatives
- There is a wealth of good practice and a substantial evidence base
- The Department of Health has an important leadership role to play in creating an environment in which arts and health can prosper by promoting, developing and supporting arts and health

One recommendation of the study was the publication of a Prospectus for Arts and Health and this followed in April 2007. In this document, Arts Council England state their five priorities for arts and health, as follows

¹ The network holds 3 events a year focussing on different aspects of the arts and health and was developed due to a need expressed at conferences.

² For example, Wills Newson Arts and Health Consultants, Bristol and Shea Debnam Associates, London and Brighton.

- Healthy Communities, which includes objectives in mental health and for older people
- Healthcare built environment, which includes working with Primary Care LIFT (Local Improvement Finance Trust) and hospital PFI (Private Financial Investment) developments
- Children and young people
- Workforce development, which includes artists working in health and the healthcare workforce
- Campaigning and resource development for the roles of the arts in health

In February 2003, in a speech in Salford, government minister Hazel Blears declared

I know in the Department of Health alone that across the NHS and Social Care contexts there are many ways - over many years - that the arts have made direct and indirect contributions to individual and community health. Some of the direct ones include:

The use of the arts in providing particular services, for example their use in day centres as a component of rehabilitation or for their therapeutic value

In the strategic Framework published by Suffolk County Council in 2006, the council aims to work closely with the National Health Service (NHS) in Suffolk in order to:

Give the best possible help and support to older people, children in need and adults with mental ill health, or learning or physical disabilities

Existing services and the provision of care in Suffolk

It is difficult to present the average care home. In Suffolk, examples range from day to residential centres, from homes with as few as ten places to those with as many as eighty places for elderly people. Care homes vary and adapt the level and type of care they provide according to their clientele. Within a single care home there can be several specific aspects of care provision, for example, a day centre, a drop in centre, acute care (for those with dementia for example), respite care, sheltered housing and fully residential care. Some homes have a dedicated activities co-ordinator whilst in others, activities are run by carers who might have a particular interest in this aspect of the work. Staff providing activities for the clients frequently work alone. This is particularly evident where an activities coordinator is in post.

Care homes are reasonably evenly spread across the districts of Suffolk. Some homes are owned by Suffolk County Council but the majority are privately owned and have contracts with the council.

Suffolk Artlink

Suffolk Artlink is a registered charity supported by the Arts Council, Suffolk County Council, Suffolk's District Councils and the Big Lottery Fund.

Artlink is Suffolk's arts inclusion agency, working with disengaged young people, adults with learning difficulties and elderly people who live independently, who are cared for in day centres and residential homes and those who are suffering from dementia.

Suffolk Artlink works in partnership with arts, care and community organisations to create opportunities that enable people of all abilities to access, enjoy and participate in the arts and creative activities.

The Creative Carers Programme

Creative Carers is a comprehensive training programme for those involved in delivering creative activities within care homes and day centres in Suffolk. The programme was stimulated by an arts project in a care home, which comprised workshops and the redesign of a room. The programme addresses the need for sustainability and ongoing benefit to both carers and their clients frequently lacking in one off arts projects. Creative Carers offers tools for ideas stimulation, support structures for those working in the field, practical advice to overcome specific needs and strategies to address confidence in carers and activity coordinators. By Autumn 2007, twelve homes and centres across Suffolk will have completed the full programme.

Creative Carers developed over a period of one year after a key project in Suffolk Artlink's programme entitled *The Haven*, which took place in a day centre in Lowestoft, Suffolk. *The Haven* demonstrated how the arts could transform not only physical space, but also assist in promoting a sense of well being in staff and clients. This was achieved through a series of artist workshops for clients and staff. Material produced during the workshops inspired the redesign of a room for relaxation.

The workshops allowed clients to mix freely, conversing and sharing experiences with each other. The design of the room provided long term benefit giving clients a place to be quiet, to receive basic treatment or to take visitors. Staff are able to use the room for their own relaxation during work breaks. Typical of many arts projects, intense activity is followed by a contrasting quiet when artists withdraw as the project concludes. Although *The Haven* avoided this situation to a degree by working with carers to plan and run the workshops, there is always a danger that momentum can dissipate or at worst be lost.

The Haven stimulated localised interest in Care Home arts projects and several enquiries to Suffolk Artlink were made asking if similar projects were planned in the future. What emerged was a cross-county need for information on creative activity and support for carers who were at times ill equipped to deliver this form of social activity.

In 2003 Social Care Services in Suffolk identified a need for improving the skills of carers of older people in the quality of activities that they offer to their client group. As a result, Suffolk Artlink undertook research via visits, questionnaires and discussions with individual carers, and delivered pilot projects to provide evidence of the need for arts based training for carers. The pilots informed the design of the Creative Carers Programme and as a result, Artlink decided to invest in training carers of the elderly in order to ensure a sustainable activity programme and long term improvement in the quality of life of those they cared for. Initially the programme also demonstrated the power of the arts to transform tired spaces, through the introduction of new artworks inspired by the users of centres however this aspect of the programme has diminished against the carers' training.

In response to the pilot and after consultation with those involved in *The Haven*, the Creative

Carers training programme was developed by Suffolk Artlink and Caroline Wright (lead artist for *The Haven* project). Their aim was to devise a programme that would invest in the training of care workers to ensure the ongoing delivery of high quality creative activity to clients.

The programme aimed to

- Give carers of older people the additional skills and confidence to deliver high quality activities
- Create new opportunities for older people and their carers, to take part in creative activities with professional artists

- Improve the long term care for older people in Suffolk
- Improve the job satisfaction and confidence of carers and encourage volunteers to take paid employment or undertake further training
- Ensure sustainable good quality activity provision in care homes
- Develop networks between care workers and activity co-ordinators and their employers



Rationale

From the outset the Creative Carers Programme aimed to empower carers and furnish them with the tools needed to plan and deliver their own personalised activities using the environment, context and tools to hand in their place of work. What the programme does not do is provide the materials and skills for a prescribed set of activities. Thus the training carefully encourages carers to explore their own creativity and to incorporate a set of actions and principles to plan individually stimulated ideas for an activity. In this way the training is easily adapted to carers workplaces and clientele. For those who are less confident in their own creative ability, the programme provides a set of tools to create a portfolio of ideas, often drawing on personal knowledge which in turn forms a growing information resource.

The training programme incorporates whole day group sessions away from the workplace and individual sessions in the workplace to support carers in any site-specific or clientele-specific issues. In addition an artbox, filled with objects and materials relevant to the course, is given to each home at the end of the course.

The Creative Carers programme seeks to use carers'/activity coordinators' existing knowledge as a basis from which to develop skills of enquiry. Carers are encouraged to draw on their own experience and perceptions (past employment or interests are two examples) as a source of ideas. The programme does not advocate the use of expensive materials for creative activity; instead, ideas are generated from everyday items and/or existing carers skills. Carers are encouraged to make use of their clients as a resource for ideas and are assisted in generating activities that spring from and embrace client's interests, preferences and personal ideals.

To ensure sustainability, the programme instils regular record keeping as a fundamental part of the course to ensure there is an ongoing and growing resource of information for carers to refer to and use. This is particularly important in the case of new staff that will immediately be able to access a record of past activities and plan new activities using the knowledge bank. Carers are encouraged to network and swap successful ideas and ways of working.

Finally and most importantly, the programme advocates inclusion throughout. Carers are shown the importance of equality and participation and advised to avoid outcome

driven activity. The importance of process over product is stressed throughout, as is the notion that clients taking part in any way, however small, is of benefit.

The training aims to give the carers

- Creative approaches
- Workshop facilitation skills
- Communication and presentation skills
- Planning and time management skills
- Experience of collaborative working
- Increased confidence and self-esteem
- Strategies for the generation of creative ideas and their mode of delivery in the long term

Funding the programme

Creative Carers has been wholly funded through fundraising on a project-by-project basis. The £200 fee that each home pays for the programme supplements this money and is offset by the resources contained within the Artbox. Over the past four years funding has been received from Arts Council England East, ESF Global Grants, Suffolk County Council Arts for All, District Councils, Age Concern England, Havebury Housing Partnership.

The Programme Content

The programme in Suffolk

The first training programme was held in the summer of 2006 when carers from four Suffolk Care Homes attended the first Creative Carers Open Day, funding having been secured from Arts Council England, the District Councils and ESF Global Grants. This was followed by a second course in autumn 2006 and the third in spring 2007.

By September 2007 carers, activity coordinators and volunteers from a total of 12 care homes will have completed the course.

Applications to the programme have been made from widely differing centres of care, for example, day centres, residential centres, privately run centres, council centres and centres run by Age Concern.

The selection of Care Homes has taken the following criteria into account (in no particular order)

- The present level of creative activity in a centre
- The level of commitment to the programme (particularly in terms of managerial support for staff time and development)
- Geographical location
- Attendance at the open Day
- The small cost is seen as a statement of commitment to the programme
- The manager must be fully committed to the programme and in supporting their staff during and after the programme
- Security of future of centre

Application forms request specific information from each home and the signature of the home's manager. This is followed by an informal telephone interview from Suffolk Artlink before selection is made.

For each course, attendance has been as follows

Sector	Applications	Places available	Attendees at Open Day
West Suffolk	12	4	16
Central Suffolk		4	
East Suffolk	9	4	23



The Open Day

Each programme is launched through an open day hosted by Suffolk Artlink. Representatives from invited homes include carers, nursing staff, volunteers³ and managers. The day includes presentations about the role and work of Suffolk Artlink and further presentations about Creative Carers from the course trainer together with demonstration workshop sessions in several artforms – dance, visual arts and creative writing, each run by a professional artist. Opportunities to discuss and share with other delegates are accompanied by a viewing of a short film representing past projects with the elderly that have been organised and managed by Suffolk Artlink. As a result of this day homes are encouraged to express their interest by completing a booking form.

The Training Day

The training day is tailored to carers, activities coordinators and care home managers together with volunteers looking to further their knowledge in the field. Each selected Care Home is encouraged to involve as many people as possible in the programme. The participants take part in a progressive series of activities prefaced by a general presentation on the course philosophy. Throughout, strong emphasis is placed on the philosophy of process over product that is so distinctive of the course. Exercises in large groups are followed by smaller group activities. These take trainer-selected everyday objects as the starting point for stimulation of ideas; as the day progresses participants are encouraged to personally select objects. Participants on the course work in progressively smaller groups until they are in pairs and end the day presenting an idea from inception to delivery to the remaining participants and trainer. Sharing, open discussion and debate augment the exercises. Several handouts summarizing the day's information are available to take

away and opportunities for networking are available over the lunch and coffee breaks.

Encouraging participants to develop their mental creativity is a key component of the programme. By using a structured set of questions and observations to explore and develop creative ideas around an (everyday) object, the trainer demonstrates the planning of a workshop/activity that could be adapted to suit different clientele with particular needs or limitations and of a suitable nature for elderly people. An example set of observations surrounding a random object is shown in the following table (please note this is not an exhaustive list)

Object	Scarf
Size and shape	Long, thin
Material	Wool, silk, thread, fabric
Colour	Red and orange
Qualities	Soft, textured, warm
Uses	Warmth, covering up, fashion accessory
Alternative uses	Use as rope, unpick and re-make, fold, stitch, pleat
Associations	Winter, autumn, bonfires, skiing, coats, gloves

Further exercises gradually develop this approach leading to suggestions of activities around the subject. The following workshop was one of many proposed from the above ideas.

In autumn, collect dry leaves and cover the floor of a room so clients can swish and crunch the leaves underfoot creating a distinctive sound and smell. The leaves can also be picked up and thrown into the air, giving clients the opportunity to feel the leaves in their hands. Accompany this with a reading of a poem by Keats – On Autumn and possibly extend this activity on a further occasion to include looking at images that employ autumn colours.

³ Volunteers may already be working in the selected homes or may have been introduced to Suffolk Artlink by volunteering agencies in the area.

This basic workshop outline is sensory, uses literature that may have been studied by elderly people in their youth, allows the bed or wheelchair bound to experience the sensations of outside, creates a visual spectacle (the latter is useful to encourage less confident observers to join in and as a talking point between carers and the elderly). It is a strong starting point for other related activities such as creative writing, printmaking from leaves, knitting scarves, a visit to a wooded area, an autumn picnic and so on, which might be included in a further workshop or planned as a series of ongoing activities.

In-house training Best practice workshops

Each Creative Carers programme contains three 'best practice' workshops in each Care Home. Each offers a different art form (dance, movement, visual arts, poetry, creative writing, music for example) and are delivered by professional artists.

The workshops are sandwiched between a planning session where the visiting artist talks with the carer to explain their workshop idea and how they will execute it. This is also a sharing of expertise as carers will hold information about their clients that will assist the artist in their workshop delivery⁴. Several days before the workshop, the artist will contact the Care Homes to discuss what they intend to deliver and to ascertain any particular considerations they will need to account for⁵. Afterwards, the artist and carers jointly evaluate and write up the workshop. This allows the carers to witness the planning process of the artist, the execution of the workshop and the aftermath when much is learnt and noted for the future.

It is important to note that the Creative Carers programme is not about art therapy. The programme seeks to demonstrate the benefit of creative activity for social inclusion and

mental and physical health. It does not concern itself with the analytical approach of art therapy or use art as a tool for psychological understanding. The programme is based on the premise that the arts can bring added value to the cared for and creative activity delivery can be a rewarding part of a carer's job that introduces new levels of mental and physical stimulation. The professional artists who deliver the workshops are selected because they have experience of working in community settings with a range of clientele.

Developing workshops

Both during and after the artist-led workshops, carers begin to develop ideas for their own workshop, supported by the trainer. During a visit to the Care Home the trainer will develop an idea with the carer taking their individual situation into account, their client needs and limitations. This might include the optimum number of clients for a workshop, clients' particular medical conditions, facilities, sourcing materials, length of workshop, and so on. The delivery of the carer's workshop follows a week later with the support of a trainer on hand before, during and for feedback afterwards. The trainer will help the carer to complete a full evaluation of the workshop and note this into a dedicated activities book. The book includes sections on suppliers of materials, responses from clients and ideas to take a workshop idea forward towards a series of linked activities⁶.

During the trainers visit, the artbox contents and their use as supporting resources for workshops will be discussed. The carers are encouraged to add to the contents over time and as the bank of workshop knowledge grows.



Aftercare

After six months the trainer re-visits each Care Home to further support the activities coordinator and carers and to assess progress to date. At this point any problems or challenges are addressed and help given.

A further meeting is coordinated by Suffolk Artlink to bring together all the carers, managers and activities coordinators to share their experiences and to encourage a self-supporting network. Networking is framed within a social occasion although some informal sharing of experiences is part of the event. This assists the trainers and Suffolk Artlink in the ongoing process of reflective evaluation that has allowed the programme to effectively respond to learning.

Trainers, Suffolk Artlink and Artists

Prior to the commencement of the programme, a planning meeting is held to determine the nature of the Care Homes taking part and any specific information required. The artists, who are selected because their way of working chimes with the programme's ethos, make use of this time to share their experiences and ideas for each workshop in order to ensure there is continuity in approach and consistency in communication with the homes and their staff. The meeting is repeated at the end of each programme to share experiences. Information gathered informs future programmes and also assists the trainers in their post programme visits to the homes.

⁴ For example, concentration spans, particular medical conditions, number of wheelchair users, etc.

⁵ This might be number of wheelchair users, facilities available etc.

⁶ For example, a visit to the seaside could lead to the construction of a photograph album and a series of related writing workshops followed by a dance and music workshop based around sea shanties.

Creative Carers Programme, East Suffolk, 2007

Four Suffolk homes were selected; Harry Chamberlain Court, Lowestoft - A day care centre for up to 18 older people, Beech House, Halesworth – a residential home for up to 30 residents, Oaklands House, Reydon - a residential and sheltered housing centre and Estherene House, Lowestoft – a residential care home for up to 21 residents.

All four homes had a current activities programme at the beginning of the course. Each home provided activities to a greater or lesser degree, determined by their staffing levels, facilities and particular staff interests. Two of the homes have a dedicated activities coordinator.

At the time of writing, the homes were part way through the programme therefore a home from an earlier programme, The Briars, was contacted for their views nine months after completion of the programme.

Case Study One

Beech House is a residential Care Home located in a quiet part of the small market town of Halesworth. It is one of a group of six homes under the same company ownership. Within Beech House is Harvest – a small unit for those suffering with dementia located in a different part of the building. The majority of service users are resident; however there are a few who visit on a daily basis including the partners of some of the residents. Beech House had an existing activities programme with a weekly schedule of events including reminiscence work and other one to one activities such as hangman and noughts and crosses. Trips to the local library were also arranged. The manager has a personal interest in social care and is keen to support her newly appointed activities coordinator and other care staff in their work in this area. The activities coordinator keeps records of all Beech House activities, whilst the staff in Harvest keep a separate record of their activities.

In an interview conducted before the in-house programme, but after the Creative Carers training day, the activities coordinator was asked to explain the staffing levels in support of the activities programme

I do them on my own. Some carers join in but only those who are interested and motivated to do so. You have to be an extrovert to do activities; a lot of carers do not have the confidence in that area – they feel they are making a fool of themselves. Some people are resourceful some are not.

Later on, when questioned about what creativity is and her perception of creativity in others, she states

My thought processes are creative - well I always think it [creative activity] is art...acting, drama etc.

Later on she adds

I suppose creativity is anything that involves making or ideas or making artistic decisions.

Beech House Care home manager

The whole care planning process is an activity – you have to find out about their [the clients] past, their aims for the future, what they want – I have to make sure this is done. I spend a lot of time talking with the residents just talking.

The Care Home manager makes clear the requirements placed on Care Homes by the authorities to provide an activities programme.

We have to provide an activities programme that residents have access to. This includes people with dementia for example. The information must be available to everyone. We have a notice board in each bedroom with, amongst other things, up to date information on the activities programme and carers will talk about activities as they help people get dressed in the mornings. We must allow people to make informed choices. We also have to evidence this, for example, an activities room is evidence – and if it is scruffy that is to the good as it shows it is

used. Pictures on walls are good. Daily records are kept (we use a computerised care plan) and we have to provide evidence that people went to an activity – most of this is paperwork.

The social care plan for each resident is separate from eating and drinking needs. I believe if you take care of social needs other things take care of themselves - taking part helps to avoid dwelling on ailments. Activities provide stimulation and active minds.

The activities programme in a Care Home is just one aspect of the overall care package that homes offer. It has to be balanced with demands on time and financial and practical resources. Beech House Care home manager explains

Time is the biggest issue and also financial resources. We have activities for 20 hours a week but its not enough. Because care is changing – dependency is higher - carers do not have the time to run activities any more. Time is taken up with toileting and more immediate needs.

She continues

We bought in reminiscence boxes for group work and these were popular but they are expensive and then they have to be returned.

When questioned about elements of the existing programme at Beech House, the activities coordinator states she needs to offer

Good, valuing activity, 'grown up' tasks not childlike ones.

and

The residents like to see an end result.

The manager adds

What needs to be pushed more, is a link to the community, more community work like, for example, we have a walking float in the carnival this year

It emerges during interview that the activities coordinator has tried several different topics for activities and with different approaches. Two examples are making things for the Christmas fete and an activity that used sensory materials. She has found it difficult to

engender interest from the residents for these activities and explains she does not have a great deal of personal confidence in 'selling' the activities to the residents.

When asked how she learnt about Creative Carers, the manager states

I heard about Creative Carers from a leaflet. I thought it ideal for our activities coordinator who is very enthusiastic. Sometimes I feel I don't offer her enough support and the programme seemed right for her. Two other staff are taking part in the programme, [one is] a carer who works on the special needs unit with people suffering from dementia. She coordinates the activities in that part of the home. One of our night workers is also taking part.

Mid point interview

Half way through the programme a further informal interview was held. The activities coordinator stated

The training day was fantastic – it opened my eyes to what I could do, I have tried out a dance activity three times and the residents love it, I had 14 people there.

How do you feel now you are half way through the programme?

My confidence has been boosted I am doing more with people [and have] more ideas. I have enjoyed it; I haven't not wanted to do things. The idea here is to improve lives. They [the older people] have the right to have as much input into their last days as anyone and to be treated with respect. That's what they have put over to me [the artists and trainers]. I can now believe in what I am doing – it's a finished product now. Before I was never quite sure what I was doing, it's helped me get there.

Appendix One and Two illustrate the course at Beech House from the viewpoint of the trainer and artist.

Case Study Two

The Briars, a residential care home situated in Glemsford in Suffolk cares for seventeen elderly residents, some with dementia. The home has a small but pleasant garden and is in a rural part of the county. The Briars is a small home with a strong 'family' atmosphere. Three staff attended the (first) course together with the Care Home manager. One of these staff had professed an interest in delivering activities but was lacking in confidence in this area of her work. At the commencement of the course, the home operated a selection of activities on a random basis responding to situation. The Briars also contributed to the course one and two joint mentoring meetings.

A telephone interview was conducted with the Manager nine months after the completion of the Creative Carers programme, which led to the following responses.

What are your thoughts on the Creative Carers course now that some time has passed?

I remember we were worried about the high standard expected of us at first and we were slightly sceptical. However, we made it our own and have put our own edge to the activities to personalise them for The Briars. I did not realise creative activity could be so stimulating for our residents. The course has helped us to provide a properly structured programme not an ad hoc one.

Have there been any noticeable changes in your residents as a result of the activities programme?

The Creative writing did not take off that well, so Christine, a carer who is now our activities coordinator and who attended the Creative Carers course, altered this to a two hour weekly session of creative reading. The sessions are very popular, it's just amazing. I am taken aback at the level of concentration this session generates in our service users. As a result of the programme we have used the ideas generation techniques to provide different outdoor activities, something we did not do very much of before. One of our carers does gardening, growing in pots, bringing specific flowers in to the home. The course gave her a start and she has taken it forward to suit us here.

Have any of your staff been affected by the course?

Since the course, the carer who delivers activities is a different person, confident and happy in her work. Creative Carers is one of the most rewarding things we have done in a long time. Our activities are now well structured and beneficial and enjoyable for the service users. We have the local college here each week but the residents prefer our in-house activities to theirs!

Any other points you would like to make?

We had a visit from the care homes inspector recently and she was talking about our activities and saying we needed to keep records to evidence them. Christine produced the book of activities, as suggested on the course, with all the ideas, the outcomes and evaluations. The inspector was very impressed.

I would be interested in a 'top up' session, like a refresher day for the staff who completed the course and any new staff who are keen to help with the activities programme.

Quotes from sharing meeting at the conclusion of course three

(Those present: Artists, care home staff and managers, staff from Suffolk Artlink and trainer)

"It's what we have got to get our heads around. It's not separate, activities are just part of that person's day"

Care Home Manager

"It is useful to think of it [the activities programme] as adding qualities to a person's day, not tasks to a member of staff"

Trainer

"Activities can be a focus for everybody, allowing them [the activities] to permeate the environment"

Trainer

"The artbox is good and I have added things to it"

Carer

"The artbox is not so good, the ink is messy and you have to put on gloves and aprons, which takes time. Colourful wrapping paper would be a good addition"

Carer

"We have enjoyed the course and I think our residents have too"

Activities coordinator

Reflections and Recommendations

This study seeks to draw out the positive and negative aspects of the Creative Carers programme in a constructive manner and with a view to establishing the potential for the programme to develop regionally.

The Creative Carers programme has grown slowly, responding to local demand. Careful testing of ideas through the two pilot schemes have ensured the programme is based on firm foundations and has adapted and grown to reflect lessons learnt along the way. The programme chimes with current political and medical thinking and recommendation by government to raise the use of the arts in healthcare. In the national and regional climate where the Health Service is exploring non-medical approaches to healthcare, Creative Carers finds itself at the centre of new practices.

Unlike the many arts projects in healthcare settings, Creative Carers advocates and establishes a model for sustainability. This aspect of the programme is the result of early testing and research and is fundamental to the ongoing success of the programme. Sustainability and investment in staff skills has stimulated the level of satisfaction in the programme from Care Home Managers.

In Winter 2006 participants on the first and second Creative Carers programme met to share their experiences. At this time, participants on course one had completed the course six months ago and those from course two had recently reached the end of the course. Questions put by Suffolk Artlink drew early indications that the Creative Care Programme causes a number of beneficial modifications to Care Home clients:

- Elderly people who encounter creative carers become more active physically
- They become more active mentally
- Through common creative experiences they become less isolated and more socialised
- They make less demands on their carers - less attention seeking (fewer loo trips, less requests to see the doctor, less complaints)
- Nursing staff are able to get on with nursing duties with less interruption

- The relationship between carer and cared for is changed and humanised

The opportunity for social networking and a sharing of experiences within the current programme framework goes some way to establishing a self-supporting network of care workers. On the first two courses, carers have only partially exploited the opportunities presented to them to communicate and share experiences. This aspect of the programme needs to be presented more frequently during the training and in a more supported manner to encourage carers, who are frequently short of time, to participate and find it a worthwhile exercise to share experiences with their peers. Communication structures between carers outside the confines of the programme should be established earlier on in the process and might include postal as well as online communication. Research should be undertaken into existing networks that could serve the same networking purpose and with which care workers are already familiar. Visits by carers to the workplaces of their fellow participants might help to underpin mutually supporting networks.

Care Home Managers attendance at the Open Day is crucial to the individual Care Home's success on the programme and to ensure that carers accepted onto the course are fully supported during and after the course. Whilst it is recognized that staffing levels in Care Homes can make attendance difficult, the involvement of as many carers as possible from the selected homes can make a significant difference to the overall success and sustainability of the programme.

The 'contract' signed by Care Home managers and a representative from Suffolk Artlink should be modified to more strongly reflect the requirement of as many carers as possible to be involved in the programme. This might mean observing a best practice workshop or taking an active role in assisting with an activity when their clients are engaged in it.

The contract could also include the requirement for attendance at the concluding sharing/networking meetings.

The fee paid by each Care Home is small in proportion to the amount of time, training and benefit they have experienced on the programme. In reality the present fee directly correlates with the value of the materials contained within the artbox. This presents an unbalanced expectation from both care workers and care homes and Suffolk Artlink, the trainers and artists. A survey should be conducted to establish a more realistic and acceptable fee level that correctly reflects the expected commitment to the programme. Any rise in fee could be linked directly to specific costs incurred in running the programme, for example, materials for best practice workshops or artist travelling expenses.

The training day serves to set several key measures in the programme. It has to determine the levels of experience of the participants in their caring roles, understand their approaches to creativity, find a mutually comprehensive language and give sufficient confidence to the participants in order that they benefit from the content of the day. To assist with this process there may be cause to invite previous Creative Carers participants to speak briefly of their experiences on the programme either at the Open or Training Day.

Study of the three courses to date has shown that dance and creative writing best practice workshops to be more appealing and understandable to carers. The visual arts are less accessible and perhaps because they are more skills based, hold a fear for some carers. There is some evidence that this is linked to an expectation of an outcome for visual arts activities. Trainers must ensure that the visual arts element of the course strongly illustrates process over product and demonstrates the wide range of methods that can be employed to create joint, collaborative works where authors or makers remain anonymous. Reducing the fear in the visual arts should be seen as a key aim throughout the programme.

Recommendation for time to rigorously test workshop ideas and to practice with new materials should be strongly made to carers and Care Home Managers. The potential for visits to galleries, museums or artist studios for carers may serve to assist with this.

Motivating clients to participate is a difficult area for carers. The programme should work to

understand the cause for unwillingness to participate and find solutions to client negativity in order to empower carers with strategies to overcome this. That notwithstanding the course should advocate that a client's wishes are always respected. Areas to consider in generating support are carer language, carer confidence, client confidence, the benefit and repercussions of simply observing activities, one to one activities, physical barriers, putting the client at the centre of activity planning and linking activities across artforms.

Some carers on the Training Day have found it difficult to assimilate the philosophy of the course in particular to understand the aim of process over product. Trainers should spend more time instilling this information and using metaphor and past examples as illustration.

Through empowering carers with relevant knowledge, the programme allows carers to feel more confident in their workplace and more able to deliver meaningful creative activity. This spills into the relationship with clients as there is common ground between carer and client and therefore potential for shared experiences and ease of communication. As a result, job satisfaction for carers is increased. To highlight and mark this, research should be undertaken into the value of accreditation. This might take the form of a simple certificate to carers and Care Homes or the course could form part of an NVQ. Exploration of links to local colleges (West Suffolk College in Bury St Edmunds, for example) together with a study of the feasibility of Suffolk Artlink becoming an accredited Training Centre should be undertaken. Should accreditation through more formal channels be established, carers will need to be made aware early in the course of the opportunity to register for accreditation and be given the criteria well in advance for study purposes.

Carers come from a wide variety of backgrounds and hold a wealth and breadth of knowledge and experience. The three courses of the programme that have taken place at the time of writing have demonstrated that those involved in delivering creative activity have come into their present positions from domestic work, medical care (nursing and caring), administration/office work and education. It is the task of the trainer to stimulate creative ideas from the knowledge bank of the course participants to avoid any feelings of inadequacy. Trainers must be cautious in their use of artistic or technical terminology and a common language must be established early on in the training process.

Taking the programme forward

In setting up a county based and/or regional programme in the future, the communication structure will need to function both locally and on a wider base. It is suggested that an online resource for ease of use together with the creation of more intimate communication networks will need to be addressed.

The recruitment and selection process for artists and trainers will need to rigorously question and establish their working practices in order that it rings true with the programme's philosophy and aims. Adequate funding and time should be allowed for training to equip artists with the skills needed to deliver their element of the programme.

A follow up session possibly one year after the course has been completed might prove useful to carers to refresh their knowledge and assist new members of staff to understand the programme.

Whilst it is recognised and applauded that inspection needs to quantify the provision of activities programmes in Care Homes (without which activities programmes may not exist), there is an apparent tension between the requirements placed on Care Home managers

to provide and evidence activities for their clients and the provision of activities that value process and are inclusive, beneficial and socially worthwhile. The need to evidence activity provision by having pictures on walls undermines the value of collaborative working and the small but very valuable stimulation of involvement through a non-outcome based event. There is a strong place for Suffolk Artlink as the county agency to lobby government (DCMS/Strategic Health Authority) to ensure that terminology on official paperwork allows for the widest range of activities to take place, from one to one, small but significant activity through to group activities. Suffolk Artlink is well placed to strategically lobby for the principle of process over product as a key aim for all activities in Care Homes and to advocate less emphasis on outcome driven evidence by Care Home inspectors.

Contributors

Anna McGregor – Director Suffolk Artlink (up to 2007)

Helen Rousseau – Artist and Creative Care trainer

Chris Warner – Director, Suffolk Artlink

Nicky Stainton – Director Creative Arts East

Cathy Bullen – Dancer and Creative Care artist

Alex Casey – Project and Finance Officer, Suffolk Artlink

Michael Laskey – Poet and Creative Care artist

Margaret Wyllie – Painter and Creative Care artist

Managers, activities coordinators, residents and carers from The Briars, Glemsford, Harry Chamberlain Court, Lowestoft, Beech House, Halesworth, Oaklands House, Reydon and Estherene House, Lowestoft

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Activity - Harvest

Painting activity - some painting was done but what seemed more important was the interaction between carers and residents. Carers saw real engagement by some participants who don't always participate or who are not always able to.

Activity - Beech House

The activities coordinator's activity was very similar in terms of what the participants were invited to do. The delivery was however much more lively with music and a sing along to introduce the session. Everyone got involved there were some lively conversations and a good atmosphere.

Outcomes

Both sessions would have benefited from being more thoroughly organised and

resourced - to make the job easier, have water to wash brushes to hand, etc.

I suggested that it might be helpful to work more broadly with people in the dementia unit i.e. rather than asking people to "make a picture" perhaps put on some music and work with them to make movements - however small - that go with the music, that might then translate into movements with a hand and paint brush or even a hand and paint.

It was also clear that other carers would benefit from being involved in the activities and are in fact free with nothing to do whilst the residents are involved in an activity. I encouraged activities coordinator to present this to her manager and other carers as a training and professional development opportunity that she could run.

I saw the centre manager before I left and mentioned this to her - she seemed supportive of the idea.

Appendix One

Notes compiled by trainer during Creative Carers programme

Trainer led session Beech House with activities coordinator and carer

There is a weekly activities programme that tends to cater for customers of Beech House rather than Harvest - the dementia unit located in a different part of the building. We discussed the benefits of having a centralized activities folder/record for all staff to contribute to and draw on.

As the dementia unit has less input in respect of creative activities and, as a group have very different needs, it was decided that the activities coordinator and carer would devise and deliver two workshops each tailored to the particular needs of Beech House and Harvest.

The activities coordinator wanted to pick up on the theme of the Seaside initiated as part of previous activities. Both wanted to focus on development of a messy visual arts activity.

We talked broadly about a painting/music/movement activity for Harvest focusing on colour and the movement of water. For the Beech House workshop the activities coordinator wanted to explore ways of printing with paint and washing up liquid. We also discussed the benefit and possibility of working across subject specialisms.

We planned the general structure of the session and how they might evaluate it.

Carer Led Session - activities coordinator, carer and myself. Harvest 6 residents. Beech House 6 residents, a couple of other carers got involved intermittently.

Appendix Two

Artist study after best practice workshop at Beech House

Approx 15 participants 4 carers

Prior to attending the workshop at Beech House I had a friendly phonecall and efficient follow up giving me all relevant information I needed. The home seemed well informed as to what I required of the morning both in terms of the carers training time as well as dance session for the elderly.

Session with elderly

Despite what appeared an efficient call and exchange of information prior to my visit, I was a little taken aback on my arrival to find the residents gathered together in their communal room and already well into their dance warm

up (I arrived 5 mins early and expected to spend some time with the carers before as well as after the dance session) However the very keen home manager explained she was just giving them some idea what they were going to be doing with me and that she had been doing lots of similar work since our open day in March. She hadn't quite exhausted them and we embarked on an extremely happy, positive and entertaining session.

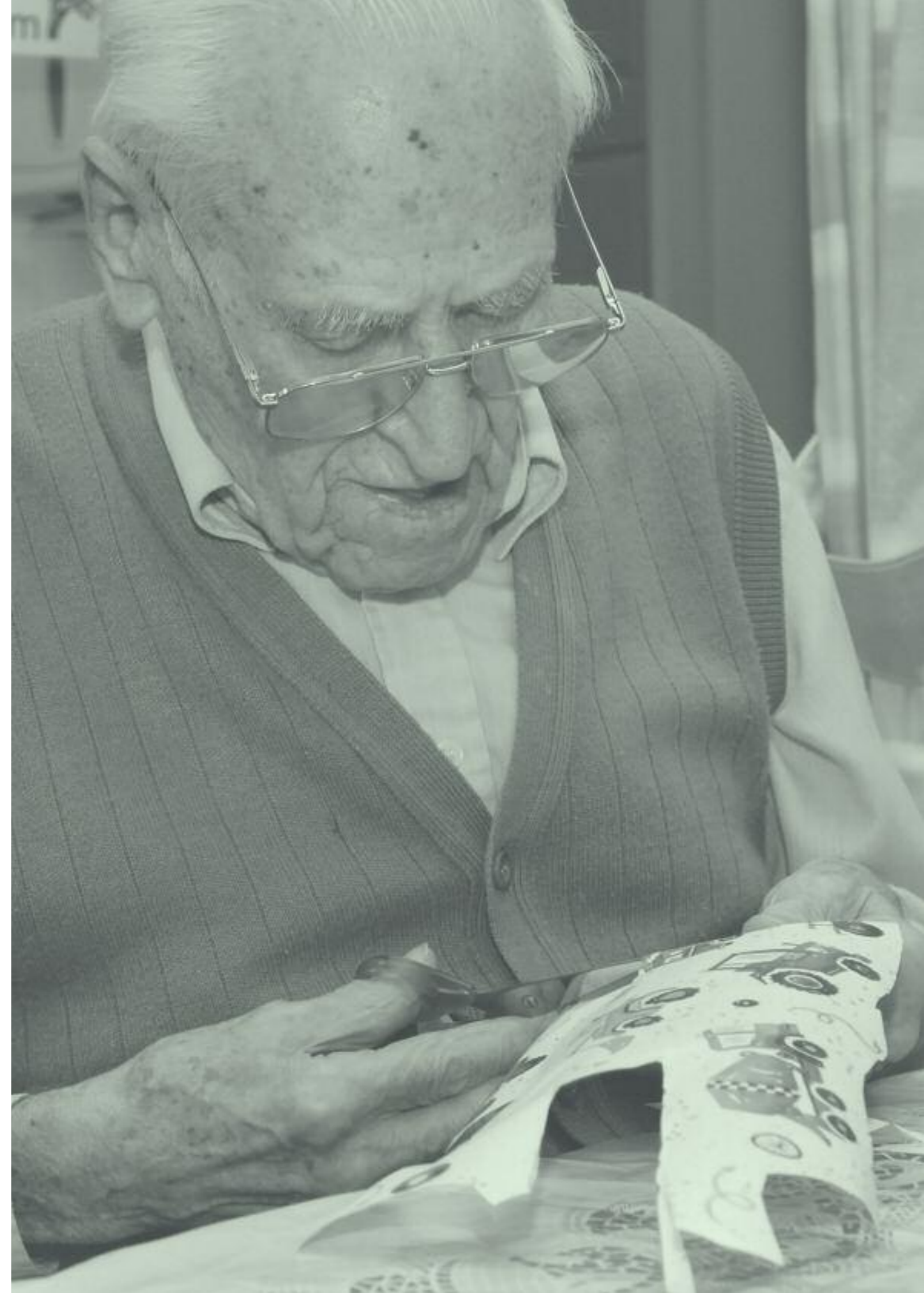
The residents at Beech House are a mixed group of elderly joined by several day participants/ partners who don't live in. One or two have mild dementia/in the early stages of dementia, but this was not severe and by the end of our session, with new found confidence we were able to experiment with developing our own seaside dance creation.

The group were responsive to ideas and welcoming to the experience. It was a pleasure to work with them.

Session with carers

Despite my initial surprise at finding the carers already involved in a dance session, I soon realised that this display had been an attempt to impress me with all they had already learnt from the open day and how committed they were to the scheme – I ended up being very touched by how committed they were to the work and to the residents.

I had a long session with the carers after the movement session. They were extremely keen to gather any additional information with me and keen that I confirmed what they were doing was appropriate. They displayed an imaginative and committed approach to all aspects of creative care with their residents and obviously see the sessions as an important role in enhancing the lives of those they care for. I have no doubt that they will continue to develop our work and feel very positive about our part in the scheme.





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