



From **CARE** to **CONTRIBUTION**

Leading with
the residents' *perspective*
as the primary focus,
by using '7Cs'
to develop strategic pathways
to a fulfilling life.

PRESENTER: Judy Greenidge DT

Our golden moment

Aged Care Royal Commission RECOMMENDATIONS:

- 1 A new Aged Care Act** by July 2023. *‘assist older people to live an active, self-determined and meaningful life.’*

[Objects part a) sub-item (i)]

- 13 Quality and Safety** *‘Support the person to participate in recreational activity and social activities and engagement.’*

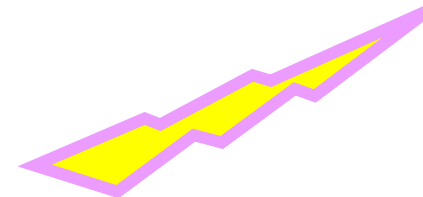
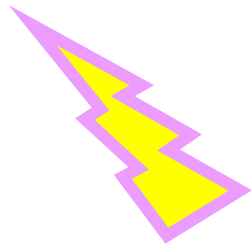
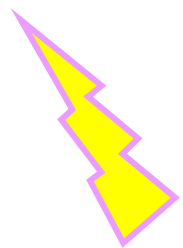
[Chapter 3/ 2e]

- 17 Regulation of restraints:** (enacted) *...only as a last resort, after alternatives have been explored, applied & documented* [p 221]

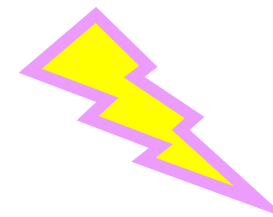
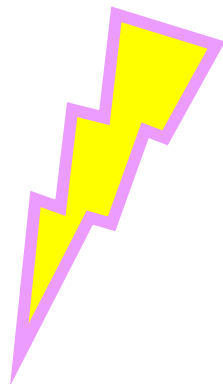
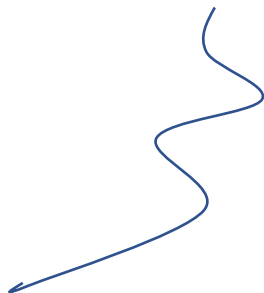
These can include using ‘diversional individual or group activities’

[Aged Care Quality & Safety Commission Dec 2020]

Objects part a) sub-item (i)



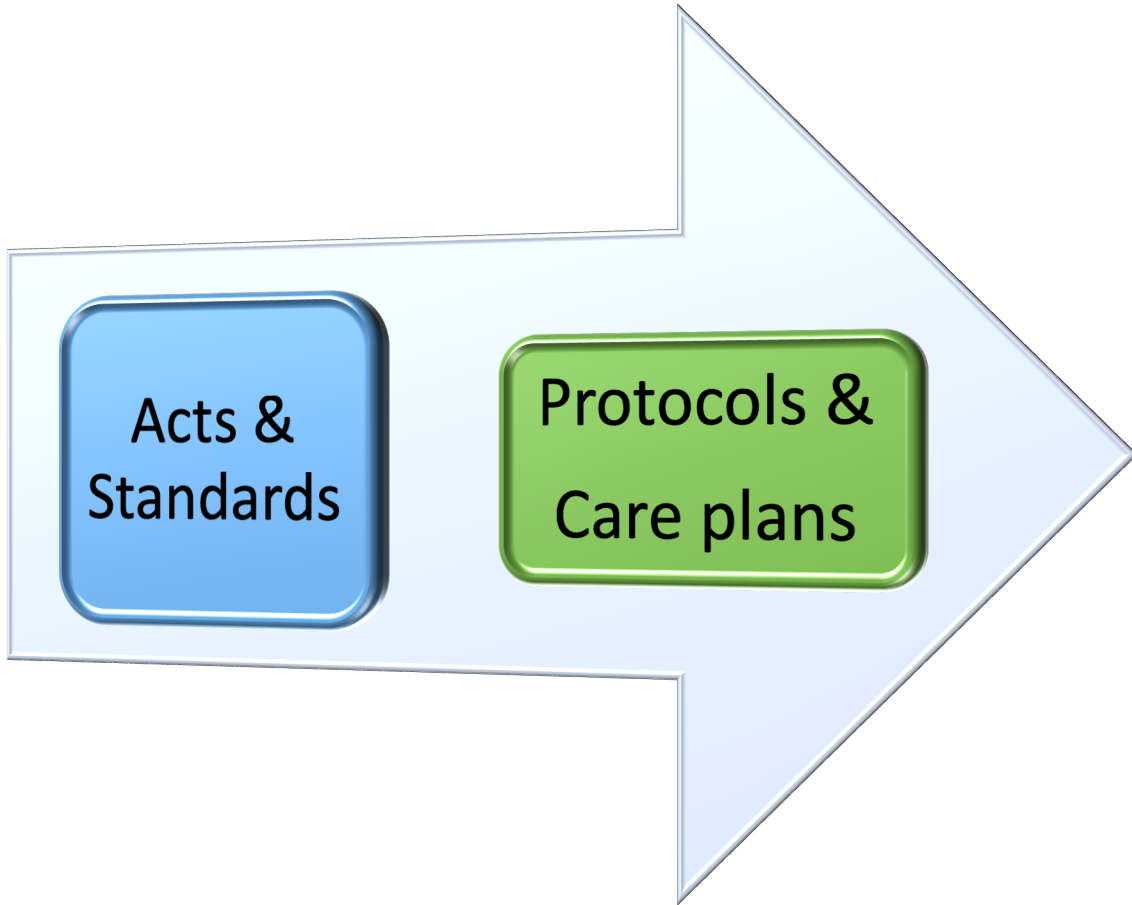
A meaningful life !



Facilitating a *meaningful life* ... is this possible?

Striving for a *satisfying life* ... an easier target.

Both relate to each individual's *PERCEPTIONS*



But what happens when the resident says NO?

Why would a resident say NO?

Because the suggested lifestyle activity is ***perceived by the resident*** not to meet their need or desire.

A prime desire is to feel safe.

This extends beyond physical safety to our psychosocial desires*

- The desire to be taken seriously

- The desire to connect

- The desire to belong

- The desire for control

- The desire for something to happen

- The desire to be useful

* from Hugh Mackay's 10 desires in his fantastic book: *What Makes us Tick?*

7Cs - sequenced framework:

- for **all residents** of aged care
- specifically targeting **a satisfying lifestyle**

C1 CARE

C2 COMMUNICATION

C3 CONNECTION

C4 CONTROL

C5 CHALLENGE

C6 CREATIVITY

C7 CONTRIBUTION

Are these 7Cs suitable for people with dementia?



C1 CARE

The resident ***learns from our actions*** that we really care about them.

Leading the lifestyle team:

- Demonstrate compassion for all resident concerns/behaviours
- Be available for collaborative support.
- Meetings- regular agenda items.
 - Selected resident -perspective, needs & support ideas.
 - New activity ideas - discuss resident relevance
- Educate new staff/volunteers – eye contact/ listening/ touch
- Maintain 1-on-1 **options lists** and **resources** for
 - *Acts of kindness*
 - *Activities: e.g.* massage, cognitive & physical activities, facility familiarity, relaxation etc



C2 COMMUNICATION

The resident ***learns from our actions*** that we value their viewpoint and we take them seriously.

Leading the lifestyle team:

- Promote team education
 - Sense impairment conditions
 - Language impairment conditions
 - Psychological impact of impairment
 - Support interventions
 - Personal aids & lifestyle equipment
 - Really listening – an imperative.
- Equipment practice & competence
- New device trials with residents
- Mandate use of prescribed aids.



C3 CONNECTION

The resident ***learns from our actions*** that they are valued members of their community and have caring friends both old and new.

Leading the lifestyle team:

- Promote team education
 - Importance of belonging & identity
 - Memories: making and holding them
- Protocols to
 - Engage all family members
 - Maintain old friends
 - Promote and maintain new friends
 - Promote ongoing connectivity to the wider community
 - Maintain resident's identity
 - Show care & respect after death of residents



C4 CONTROL

The resident ***learns from our actions*** that we offer worthwhile choices and are keen to uphold their own activity preferences, applying ethical decision-making processes to any risk-laden desires.

Leading the lifestyle team:

- Promote team education *including implementation methods*:
 - Informed choice
 - Motivation strategies to create a ***desire*** to participate
 - *Dignity of Risk* and ethical decision-making.
- Protocols for resident input to activity options, delivery, and future directions.
- Resident meeting -permanent agenda item for resident ideas
- Positive attitude to new ideas, discussions & trials.
- Independent activity areas –development & maintenance



C5 CHALLENGE

The resident **experiences** the satisfying feeling of successfully overcoming a challenge they consider worthy.

Leading the lifestyle team:

- Promote team education
 - Health benefits of being ***in-the-flow*** & achievement
 - Using **Activity Analyses** to devise tailored support
 - Incorporating **competition** with fairness & compassion
- Team brainstorm sessions
 - to modify game rules for a satisfying experience
 - to prepare tailored challenges and ‘rewards’ for success
- Promote projects – embed diverse challenges to be met by different residents in collaboration





C6 CREATIVITY

The resident ***experiences*** the freedom to be creative in their own way in variety of contexts.

Leading the lifestyle team:

- Promote team education
 - Methods to overcome the inner critic
 - Embedding creativity and playfulness in diverse activities
 - Creativity and dementia
 - Privacy in creative pursuits, and consent to display
- Seek skilled mentors
- Demonstrate and encourage flexibility that allows spontaneity in programming and during activities.
- Team discussions on strategies to publicise creative products



C7 CONTRIBUTION

The person ***perceives*** they are valued and able to make a contribution to the lifestyle team, activities, the service, their family, or the wider community.

Leading the lifestyle team:

- Promote team education
 - The value of feeling useful.
 - Types of contributions- in every activity and wider.
 - Tailoring to the individual.
- Team meetings- selected resident - brainstorm contribution ideas
- Formulate a variety of appreciation strategies.
- Schedule TIME to ensure big events have considerable resident consultation, assistance and recognition.



We need TIME for the team...

- To understand the psychological and physical impact of common health conditions in ageing.
- To garner expertise in 7Cs facilitation
- To think of supports to improve the resident experience.
- To consult the resident on prospective changes.
- To trial the changes

And we need a **WILLINGNESS** to **EMBRACE CHANGE** and to provide the team support they need to implement it.

Then we need the **courage** to seriously and open-heartedly, **critically analyse** the result.



Do we need more lifestyle staff?

Is funding in short supply?

What's the answer?

- START SMALL- each lifestyle staff member target one resident *who needs support*
- Prepare a tailored strategy for each (e.g. 7Cs framework)
- Use lifestyle meetings -10 minute brainstorm sessions
- Collect and document creditable evidence of effectiveness
 - Observations and resident perspectives, opinions and advice
- Decide a timeframe for reviewing results
- Rethink any ineffective interventions, and try again!

Let's prove we are professional members of the care team... 

and worthy of more staff!

EVIDENCE using OBSERVATIONS of wellbeing*

- ✓ Cheerful
- ✓ Relaxed facial expression and body posture
- ✓ Relaxed with social contact. (Eye contact or appropriate touch).
- ✓ Manages to communicate successfully (Words or body language).
- ✓ Engages with people and activities showing fitting pleasure.
- ✓ Shows affection and social sensitivity.
- ✓ Demonstrates playfulness, creativity or humour
- ✓ Helpful and cooperative with requests.
- ✓ Self respect- including refusing 'undignified' activities!

*Abridged list from Bernie McCarthy's compassionate and insightful book: *Hearing the person with dementia* and the Bradford Wellbeing Profile 2008.



Lets lead *Lifestyle facilitation*

by encouraging all **workers** and **volunteers**
in our teams to understand that their

coalface role

is

invaluable.

*These workers hold a potent opportunity to
build a resident's confidence to re-engage
with other people and personally appealing
activities ... and a life worth living.*



*I have learned that
people will forget what you said,
people will forget what you did,
but people will never forget
how you made them feel.*

Maya Angelou