



EACH BREATH IS VALUABLE

An evaluation of an arts in care homes programme

by Alan Dix, Tracey Gregory and Jenny Harris of 509 Arts

509 Arts



Betty at Nottingham Carnival. Photo courtesy of City Arts/Kate Duncan

Cover photo: Care home resident meeting Mrs Brewster. Photo credit: Pam Raith.
Courtesy of City Arts/Kate Duncan

Foreword

On the behalf of the Baring Foundation and the Arts Council England as the funders of this report and programme, I would like to thank 509 Arts for this wide-ranging and thought-provoking evaluation.

*Each Breath is Valuable*¹ gives a helpful typology of the models for arts in care homes: commercial; consortium; care home-led and artist development, which underpinned the four major grants we awarded after a highly competitive tender process. It is realistic about the intense challenges of working in the care home sector, which is facing desperately severe financial pressures and an ever more frail population. The report is emphatic about the benefits which the arts bring to residents, family and staff, as well as the stimulation and satisfaction that this work brings to artists.

As funders we are aware that this programme is one part of a broader recognition by arts organisations of the importance of work with older people in general and with care home residents in particular. There is a whole array of work which lies outside this report, such as the cARTrefu residencies in care homes in Wales and the programmes run by numerous arts organisations such as Entelechy Arts, Equal Arts, Ladder to the Moon and Green Candle Dance, to name but a few. Our new joint programme Celebrating Age has made 32 grants across England, many of which involve work in care homes or supported living. The Baring Foundation is supporting Live Music Now in an initiative called 'A Choir In Every Care Home'. Beyond professional arts organisations, there are care homes which are adept at drawing in, sometimes very skilled, amateur artists, or finding resources and training for their own staff. This includes work by the National Activity Providers' Association and the arts resource pack produced by the Care Inspectorate and Luminare in Scotland. Much of this work and many resources are now showcased online by the Social Care Institute for Excellence.

However, as this report implies, so much more needs to be done to extend the reach of the quality arts into many more care homes. All residents, like the rest of society, should have the right to live in creative homes.

David Cutler

Director
Baring Foundation

1 Quotation from artist in residence on *Making of Me* project (Page 17)



A murder mystery drama session run by the Making of Me project. Photo courtesy of The Courtyard Hereford.

Table of Contents

Foreword	1
Summary	4
1. Introduction	5
2. Why Arts in Care Homes?	9
3. The four projects	12
4. The pilot year	18
5. The programme in numbers	20
6. Creativity in the care home	22
7. Artists and arts organisations	32
8. Workforce development	37
9. Sector leadership	40
10. Value and cost	41
11. Learning from the programme	45
Appendix 1: Programme aims	52
Appendix 2: Literature review	53
Appendix 3: Consultees	54
Resources on creative ageing	55

Summary

The £1m, three year, national Arts in Care Homes programme, jointly funded by Arts Council England and the Baring Foundation was established at a time of great change in the care sector. Whilst there had been considerable historical investment in arts with older people by both funders, the care home population had not significantly benefitted from their funded projects. The Arts in Care Homes programme was therefore designed to explore and stimulate high quality creative practice with older people in care and demonstrate the value of collaboration between the arts and care sectors. It aimed to build creative and organisational capacity and secure long term support from senior care home managers to create a sustainable platform for the future.

Four projects were selected from an open application process: *Imagine* in Nottingham, *Making of Me* in Gloucester and Oxford, *Home Service* in Cornwall and the Southwest and *We Do* in West Yorkshire. Each of these took a different approach in order to test different methodologies and all were built around a care home – arts organisation partnership.

Over the three years of the programme, the project generated 2267 hours of creative activity, 49 training and development sessions, 800 care staff attendances and 8868 resident attendances.

The Arts in Care Homes programme was developmental. It involved learning that was at times challenging and practice that was always evolving. It required considerable change in perspective and practice for both artists (many of them new to the care sector) and care home workers. Participative work with older frail people, many of whom have dementia, requires an approach that is more person centred and rooted in the moment. Issues of identity, community and belonging became a common theme throughout the programme.

Our citizens have done things that they never imagined they could do. It has built up their confidence and they've been made to feel valued and needed.

Care worker.

The programme had a profound impact at both organisational and individual levels. There are now artists, activity co-ordinators and care workers who have the skills to work confidently in the care home setting. Care home groups have benefitted for the first time from a sustained programme of work that

demonstrates how exceptional creative activity can achieve cultural change across the organisation. A number of arts organisations that were new to working in care homes are developing strands of work specific to older people.

Whilst the cost of providing the programme is substantial, it is an essential demonstration of inclusive practice. In the words of one interviewee: "The project may seem expensive, but its value is priceless". It has shown that the work of artists should be an essential element of a person-centred care home culture that has the wellbeing of every resident at its heart. If the growing army of older people with significant care needs are to have a meaningful place in society, their imaginative, creative and playful potential must be recognised, resourced and celebrated.

1. Introduction

The Arts in Care Homes programme was jointly funded by Arts Council England and the Baring Foundation. Launched in 2013, it was designed to explore models of professional arts practice with and for older people in a care home context over a period of three years.

From the outset the Arts in Care Homes programme was seen as a unique opportunity to develop a national body of work and explore mechanisms for creativity in an historically under-resourced setting. It was designed to build upon the pre-existing body of knowledge, some of which had been articulated in Creative Homes, the 2011 Baring Foundation report commissioned with the National Care Forum (NCF) and the National Association of Activity Providers for Older People (NAPA)². Creative Homes recognised how extensive this area of work had become and provided examples of good practice. Most of the examples were one-off projects, whereas the Arts in Care Homes programme aimed to develop a more embedded cross-sectoral approach.

The programme came into being at a time when the number of older people in care was rapidly increasing and the economic models that underpinned the service were becoming increasingly uncertain. The impact of local authority and health service budget cuts together with difficult market conditions were increasingly challenging the economics of care home operation. Pressures on core services and internal competition for resources were becoming intense at a time when arts activities in care homes were demonstrating their quality of life and health benefits. The Arts in Care Homes programme was an apposite response to these factors. Its approach sought structured longer-term partnerships between arts and cultural organisations and care home providers, with the explicit intention of creating a more informed and collaborative approach to the work.

When launched by Arts Council England and the Baring Foundation, the scheme elicited a significant response and 44 applications were received, the majority with a partnership commitment from arts organisations and care providers. Following an intensive selection process, four programmes were selected for funding of £250,000 over three years, these being:

- **@Home:** A commercial model. We Do in Huddersfield led this project, which aimed to develop a subscription model with care homes across West Yorkshire. Care homes were to be offered subsidised package of arts programmes with a view to building sector demand and a market that was self-sustaining and economically viable in the long term.
- **Home Service:** A consortium model. Originally led by Arts in Health Cornwall and the Isles of Scilly (AHC) and subsequently by Creative Kernow, the project covered Cornwall and parts of Devon and Somerset. A consortium of arts organisations planned to use a commissioning model to create a bridge between the care sector and local cultural infrastructure. AHC's previous experience of working with older people provided a basis for professional development through training of care home staff, artists and cultural partners.

² *Creative homes*, Baring Foundation, 2011.

- ***Imagine***: A care home led model. Led by the Abbeyfield Society, a national care provider, in partnership with City Arts, Nottingham and Nottingham City Council. City Arts worked with a consortium of Nottingham arts organisations to develop the programme and the local authority was an active and engaged partner. *Imagine* planned to work in care homes in a wide variety of ways, including arts partner and artist commissions. Training for care staff and artists was planned to explore, develop and embed practice.
- ***Making of Me***: An artist development model. Led by the Courtyard Theatre Hereford, working with a single care home provider, initially Shaw Healthcare, then the Order of St John in their care homes in Gloucester and Oxford. A primary focus was on artist development using a mentoring and structured training approach. Dance, drama and literature were the primary art forms.

The selection of the four successful programmes was in part driven by the desire to pilot different routes to achieve the programme aims. The three year time-frame was to give adequate time to road test and allow for evolution, progression and change.

Following the initial selection, each successful applicant began a process of programme refinement in early 2014 with Arts Council England and the Baring Foundation. In early 2016, 509 Arts was commissioned to evaluate the national programme, with a particular brief to compare the outcomes, achievements and challenges of the four regional projects.

It should be noted that the *@Home* project was not completed. After 18 months the delivery partner We Do ceased to trade and the project was closed down prior to the commencement of the national evaluation. Those closure circumstances that are relevant to the Arts in Care Homes programme are analysed elsewhere in this document. The majority of the national evaluation has therefore focussed upon the remaining three programmes.

Each of the four Arts in Care Home approaches had their strengths and weaknesses. No single model should be identified as providing the best approach. Comparison of these models lays at the heart of the approach to this evaluation.

ARTS IN CARE HOMES PROGRAMME: PURPOSE AND AIMS

Arts in Care Homes was a natural progression from the extensive body of older people's work that had been developed and supported by Arts Council England, the Baring Foundation, the public sector, trusts and foundations over many years and was specifically devised to enable a step change in this area of work. The requirement for a partnership between an arts organisation and a care home provider at the point of application was designed to replace the historical purchaser-provider model with a process that was more collaborative and involved senior level buy-in from both the arts and care sectors. The corollary to this requirement was the expectation of high quality creative practice that had depth, was mutually relevant and had the potential for longevity.

The key aims of the programme can be summarised as follows³:

- to encourage genuine partnerships and co-investment in high quality arts activity by arts organisations and care home providers;
- to develop and showcase a series of exemplar models and approaches for joint working, with accompanying tools and resources for use by both other care home providers and arts organisations in the future;
- to provide professional development for artists, cultural organisation and care staff to increase confidence and skills in delivering arts engagement activities with older people in care home settings;
- to share learning and encourage debate.

The programme guidance made it clear that these aims could be achieved through a variety of models and delivery mechanisms. A sister – but quite different project – took place in Wales over a similar timeframe. A partnership between the Baring Foundation and Age Cymru resulted in the highly successful cARTrefu – a care homes programme using an arts mentoring model for artist development.⁴

EVALUATION METHODOLOGY

The 509 Arts team has engaged with the Arts in Care Homes programme in multiple ways over a 15 month period from April 2016 to July 2017. The evaluation research has included the following.

- A review of national programme documents including applications from each of the four Arts in Care Homes projects, quarterly monitoring reports submitted to Arts Council England, local evaluation and research reports produced for each of the projects, and promotional and project resource materials.
- A literature review of arts and older people to put the evaluation in context. (See Appendix 2 and footnotes.
- Focus groups with each of the programme partners and participation at project meetings, events and activity sessions.
- One-to-one interviews with a range of national programme stakeholders including Baring Foundation, Arts Council England area leads and programme leads.
- One-to-one interviews with artists, care home managers and activity co-ordinators, evaluation and research partners working on the individual programmes. (See Appendix 3 for a list of interviewees.)
- Participation at events relevant to the national programme, including Baring Foundation Arts in Care Homes Conference, May 2016; Older People's Theatre Symposium, West Yorkshire Playhouse, September 2016; Magic Me – Artists Residencies in Care Homes Sharing the Learning event, April 2017.
- Three online surveys for artists, care home staff and arts/cultural organisations.

³ The full aims taken from the original programme guidelines can be found in Appendix 1.

⁴ <https://www.ageuk.org.uk/cymru/health--wellbeing/cartrefu/>

In addition to the national evaluation, each project commissioned research projects to evaluate certain aspects of the work. *Imagine* worked with University of Nottingham to specifically research and evaluate the impact of the programme for people and *Making of Me* worked with University of Worcester to explore the impact of the mentoring model on care home staff, mentors and artists delivering the programme. Elements of both evaluations were supported through the Alzheimer's Society fund, TAnDem Doctoral Training Centres for Arts and Dementia. *Home Service* in Cornwall worked with University of Falmouth in Year 1 of the programme. For the final phase evaluation they employed independent researcher Eleanor Jubb. Dr Annie Raw was the independent evaluator for *@Home*, which due to its early closure could not be fully analysed but a summary document was produced using available data.

Not all reports from the Universities of Nottingham and Worcester have been finalised at the time of writing. However, all available reports have been reviewed.

Our aim with this national evaluation report is to identify the key factors that promote success, identify why they are significant and, where possible, what their impact has been. The report also outlines challenges the programme has encountered and the ways in which these have been tackled. It is a document that describes a shared learning process featuring success and challenge, creative achievement and managerial imagination in equal measure.

2. Why Arts in Care Homes?

THE COHORT OF PEOPLE BORN BETWEEN 1926 AND 1935, OFTEN REFERRED TO AS THE “GOLDEN COHORT”, HAVE EXPERIENCED IMPROVEMENT IN MORTALITY THROUGHOUT THEIR LIFETIME THAT NO COHORTS PREVIOUSLY OR SINCE HAVE EXPERIENCED.⁵

A CHANGING DEMOGRAPHIC

The changing UK demographic has been a major driver in the search for solutions to the needs of an ageing population. This, however, has not been a straightforward process. The UK care home population between 2001 and 2011 was almost static, but the average age of residents increased significantly. By 2011, nearly 60 per cent of care home residents were over 85 and this trend of an ageing care home population, has continued. A 2014 study estimated 75 per cent of care home residents in the South East of England had dementia⁶ and the Alzheimer’s Society estimate that one in three people over the age of 65 in the United Kingdom will develop the disease and this could double in the next 40 years.⁷ Care home staff interviewed for this evaluation consistently reported how much the care home demographic has changed in recent years – with increasing levels of frailty and higher incidences of dementia and multiple care needs.

“People are coming into care at an older age now; they are less active with more health problems. It is an ever changing, fluctuating environment and Activity Co-ordinators have to be flexible.”

Care Home Manager, *Making of Me* Evaluation Meeting

This is reflected in a change of nomenclature: where there were ‘retirement homes’ we now find care and nursing homes. The duties of staff have changed as a consequence – the immediate personal needs of residents are paramount and time consuming. Care home staff we interviewed consistently identified high workload levels as an issue.

A CHANGING ENVIRONMENT

Alongside questions of basic care requirements (nutrition, hygiene, health and safeguarding) and their cost, quality of life issues have become increasingly significant. Many care homes are responding with a more informed approach from managers and

⁵ Office of National Statistics. *National life tables, UK: 2013–2015*. <http://bit.ly/2uKm4Cl>

⁶ Stewart, R., Hotopf, M., Dewey, M., Ballard, C., Bisla, J., Calem, M., Fahmy, V., Hockley, J., Kinley, J., Pearce, H., Saraf, A., Begum, A. (2014) ‘Current prevalence of dementia, depression and behavioural problems in the older adult care home sector: the South East London Care Home Survey’. *Age and Ageing*. 44 (5), 1-5.

⁷ *Dementia 2014: Opportunity for Change*, Alzheimer’s Society

staff, often in dialogue with residents' families. In addition the regulator (Care Quality Commission) expects care homes to provide 'socially and **culturally relevant activities**⁸.

The Baring Foundation's own review of evidence in 2011⁹ found that '*engaging with participatory art can improve the wellbeing of older people and mediate against the negative effects of becoming older*'. For older adults with dementia the benefits of participating in arts activities are manifold. They include improvement in cognitive functioning and communication, increased self-esteem, enjoyment of life, and improved memory. Most recently, the key findings in the report of the All Party Parliamentary Group for Arts, Health and Wellbeing¹⁰, published in July 2017 following a two-year study were:

- the arts can help keep us well, aid our recovery and support longer lives better lived;
- the arts can help meet major challenges facing health and social care: ageing, long-term conditions, loneliness and mental health;
- the arts can help save money in the health service and social care.

“ Research demonstrates that arts and other cultural activities can help to delay the onset of dementia and diminish its severity. This not only makes a huge difference to many individuals but also leads to cost savings. If the onset of Alzheimer’s disease (which accounts for 62 per cent of dementias) could be delayed by five years, savings between 2020 and 2035 are estimated at £100bn... but this isn’t just about money; the arts can play a powerful role in improving the quality of life for older people and their carers.”

Lord Howarth of Newport, co-chair of the All Party Parliamentary Group for Arts, Health and Wellbeing, July 2017.

THE FUNDING PARTNERS

The complementary ambitions of Arts Council England and the Baring Foundation provided the basis for joint investment in the Arts in Care Homes programme.

Despite the increasing evidence of the benefits of participatory arts, figures from Arts Council England show that people aged 75 and over have significantly lower rates of arts engagement than the other age groups¹¹. And for those who are less able to be proactive and self-determining, cultural isolation can be a very real feature of their lives. It seems that whilst there has been a growing acceptance that creative opportunities offer an alternative kind of medicine, the ways in which it could be most effectively administered are still uncertain.

⁸ A key Care Quality Commission care assessment characteristic is: how are people supported to follow their interests and take part in activities that are socially and culturally relevant and appropriate to them, including in the wider community, and where appropriate? From: *Key lines of enquiry, prompts and ratings characteristics for healthcare services*.

⁹ *An evidence review of the impact of participatory arts on older people*, Baring Foundation, 2011.

¹⁰ *Creative health: the arts for health and wellbeing*, All Parliamentary Groups on Arts, Health and Wellbeing, July 2017.

¹¹ *Taking Part in the Arts survey*.

Exclusion from civic life is an ongoing problem for people living in a care environment. Their domestic circumstances often mitigate against many of the things that for most will have featured in their previous lives: social networks, freedom of movement, access to information, personal choice and a sense of self-determination. All can become severely restricted when compounded with frailty, illness, cognitive impairment and confusion.

The Arts in Care Homes programme was specifically developed to explore mechanisms that would maintain creative opportunities for people living in care homes and facing the prospect of cultural exclusion. As a jointly funded programme it had its roots in a shared desire to push forward an area of work that had been historically under-resourced.

One of Arts Council England's five core goals is that: *“Everyone, everywhere, has the opportunity to experience and to be inspired by the arts, museums and libraries”. This goal is dependent upon the creation of opportunity: “Participation in the arts should not be dependent on where people live or their social, educational or financial circumstances. To encourage more people to take part, we will support artists, organisations and the public to help shape local arts provision in order to increase choice and opportunities for people to experience and be inspired by the arts”¹².*

In parallel, the Baring Foundation has focused its programmes on participatory arts with people over 60 since 2010, with an emphasis on those facing disadvantage or discrimination. The Foundation prioritises participation in cultural activities, which brings benefits in terms of citizenship, personal health, well-being and community development. As a consequence it has funded work with older people in a range of contexts and the Arts in Care Homes programme was a natural development from its previous schemes and projects.

¹² <http://www.artscouncil.org.uk/areas-low-engagement>

3. The four projects

The four Arts in Care Homes projects were selected from 44 applications following an open grant application process. The guiding criteria for selection of the four projects were:

- a track record of engagement;
- excellence of artistic practice and opportunities to develop that practice;
- person centred approaches which safeguard vulnerable individuals;
- processes that enable residents to shape the activity and be involved as decision makers;
- involve and support Arts Council funded organisations to develop their practice in these contexts;
- have scale of impact – priority for those with a significant geographic reach across England.

Grants were awarded in December 2013 with projects starting in January 2014. The four projects were selected on their individual strengths in meeting the guiding criteria. Their contrasting models enabled comparison over time of their strengths and weaknesses in achieving the aims of the Arts in Care Homes national programme. They varied considerably in the ways in which they planned to work creatively with care home residents. Whilst *Making of Me* engaged in a detailed process of artist development and a replicating residency programme from the outset, the other projects adopted more varied programmes that required artists and arts organisations, often with somewhat limited experience of working in care home settings, to respond and adapt accordingly. The variety of art form and approaches was considerable. All the programmes included artist and care staff development days and training.

***Imagine, Nottingham* <http://imaginearts.org.uk>**

Lead arts partner: **City Arts**

Lead care provider partner: **Abbeyfield Society**

Other participating care home providers: **Eastgate Care, Nottingham City Council, Nottinghamshire Hospice, Radford Care Group.**

Imagine has consisted of two broad strands of artistic work: artist commissions and commissions from Nottingham's leading cultural organisations including Nottingham Contemporary, Theatre Royal and Royal Concert Hall, Nottingham Museums, Nottingham Playhouse and Lakeside Arts. There has been a strong digital focus in the work of *Imagine*, enhanced through a partnership with University of Nottingham School of Computer Science Mixed Reality Lab and We engAGE, a digital creativity project for older people.

Over the three years of *Imagine*, 573 care home residents have been involved in 3,491 individual attendances, in over 300 workshops and visits (over 650 hours of activity), led by 70 artists, with attendances by 342 care home staff, 217 volunteers and 124 family members.

A few *Imagine* commission highlights include:

- **Participation in Carnival:** Pandora, a huge parrot puppet was built through work with residents at Radford Care Group, Nottinghamshire Hospice and Millbeck House. Pandora has toured care homes with films and music bringing the carnival atmosphere to those not able to take part themselves.
- **Nottingham Contemporary** associate artists Gill Brent and Jo Dacombe have worked alongside activity co-ordinators from The Abbeyfield Society and Eastgate Care helping develop skills in confidence in taking groups on visits and running activities to engage residents before, during and after the visits. Eastgate are now exploring future visits to the gallery which generated real excitement among the residents able to attend and a talking point in the homes:

A really special moment was when a resident came back from The Contemporary Art Museum and went to see another resident who at the time was bed bound and would have loved to have come on the trip – he told her in great detail about the trip and she in turn the next day told me all about it.

Care home survey respondent

- **Armchair Gallery**, bringing the experience of visiting and exploring galleries and collections directly to older people living in care homes through virtual visits using an iPad app. A series of short films and virtual tours of Chatsworth House, Dulwich Picture Gallery and Newstead Abbey have been produced and shown in *Imagine* partner care homes across the city and county of Nottingham. The artworks are shown using the specially designed Armchair Gallery App accompanied by movement, music and visual arts workshops, to bring the artworks to life. The successful pilot of the Armchair Gallery App has attracted a further £99,980 of investment from the Nominet Trust and the Baring Foundation to further develop and roll out the app through the network of Age Friendly Cities.
- **Live streaming** of Ingrid Jacoby's piano concert, from the Royal Concert Hall's Sunday Morning Piano series, into Millbeck Care Home was another digital innovation, the first time any performance has been live streamed into a care home setting. The residents were made to really feel part of the concert as they were welcomed from the Concert Hall by Music Programme Manager, Neil Bennison. The residents really appreciated the opportunity:

Today has meant a lot to me, especially as I am no longer able to attend events such as this.I would certainly welcome more events like this and with it being live you really felt part of something.

Betty, Millbeck resident¹³

Training for artists and care home staff together has been an important element of *Imagine*. This joint approach has allowed for sharing of experiences and understanding of practical issues from the perspective of care staff and artists. Training in using apps for creative work and in understanding dementia have been highly valued by artists and care staff alike, with the latter course heavily oversubscribed each session.

¹³ From *Imagine's* quarterly report.

Making of Me, Gloucester and Oxford

Lead arts partner: **The Courtyard**

Lead care provider: **Initially Shaw Healthcare, subsequently Order of St John**

Making of Me has focused on an artist mentoring and residency approach working with one care home partner to embed practice and form deep relationships. In the first year they worked with Shaw Healthcare, in years two and three with the Order of St John. The two years working with Order of St John has seen eight homes participate each year. Ten-week residencies in dance, drama and poetry have been held in the 16 participating homes.

Across the three year programme, 973 care residents have been involved in 3,670 individual attendances across 578 sessions in homes, (1,156 hours of activity) led by 23 artist practitioners.

Practitioners were matched with artform mentors who supported them throughout the project. Training for artists at the start of each year provided opportunities to investigate the wider context of care for older people and the variety of needs and situations that potentially would need to be accommodated.

The initial two days was great. It reaffirmed a lot of what I would do naturally but also gave me the confidence to tackle some of the other issues you have in care homes (particularly with staff). The on-going mentoring and meetings with mentors has backed this up.

***Making of Me* artist survey respondent**

Making of Me also worked closely to introduce the artist residencies to the care homes through a launch event at the start of each year and training for care home staff in the three art forms, led by the artist mentors. These sessions were positively received and helped to lay the groundwork for the necessary support and engagement with staff. They helped staff know what to expect and explained the reasons behind particular approaches and practices.

Talking through why things are done (was helpful). I feel I now understand our artists better. ””

Order of St John Care Home worker feedback after training

The residencies:

- Dance residencies included activities to engage residents either seated or standing. Practitioners were ever mindful of the limited mobility of many participants and of safety being paramount. This did not limit creativity, with sessions including music and songs, ribbons, balls and feathers to stimulate engagement of residents and staff and encourage maximum movement.

There were smiles, laughter, toe tapping, singing along, banter... and participants joining in with most of the activities... There was also significant interest from staff members – both those in the session and those who were looking in through the window.

Making of Me dance mentor observation of practitioner session, February 2016

- Drama residencies took the form of 'creative storytelling'. Themes were based on the participants' interests or time of year with objects used to stimulate ideas and the creation of group stories.
- Poetry residencies involved the creation of new poetry works from words collected from residents, often with a reminiscence theme.

I handed out Carol Ann Duffy's poem 'Prayer' and read it out. One man had been reading and re-reading Duffy's poem. He likes to read aloud and he considers each line carefully, possibly because he's a bit short of breath and so each breath is valuable. I began to feel as though I was hearing Duffy's poem for the first time. When we finished the group poem he suddenly began to speak very clearly and this is what he said: "We have a prayer that offers itself. We have a lovely group that meets together. It's very important that we're able to sit together, hear one another, listen to one another and be thankful. I think it's lovely to sit together and appreciate one another. Even if we don't say a prayer, it is actually a prayer.

Making of Me artist survey respondent

Home Service, Cornwall and the surrounding area

Lead arts partner: **Arts in Health Cornwall (2014-2105), Creative Kernow (2016-2017)**

Care provider partners: **Anson Care, Cornwall Care, Swallowcourt Care Homes Group**

Home Service in Cornwall adopted a consortium approach. Arts for Health Cornwall and the Isles of Scilly were the lead partner, with Hall for Cornwall, The Works, Creativity Works, Wren Music, Kernow Education Arts Partnership (KEAP), Newlyn Art Gallery and the Exchange the arts partners. The arts organisation commissioned artists to work in care homes, delivering activities involving a wide range of art forms. After the first eighteen months, Arts for Health Cornwall closed due to uncertainty of future funding. Creative Kernow took over the lead of the final stage of the project, with the original project manager/director from Arts for Health Cornwall contracted on a freelance basis by Creative Kernow.

Thirteen care homes were involved in the project and over 460 hours of activities were delivered. These activities were led by 15 artists with 30 artists involved in total, attracting over 1,600 attendances by 324 care homes residents, over 250 attendances by care home staff and over 150 attendances by family members¹⁴.

Examples of activities include the following.

- Hall for Cornwall commissions included 'Lent Ears' – a radio revue style programme. The

¹⁴ *Home Service* evaluation, Eleanor Jubb and Jayne Howard, 2017

artist worked with residents and their families to collect stories which were recorded with a community radio station and broadcast. A project on a theme of holidays and seaside involved dance activities, performances, a fabric dyeing workshop, film and a garden design.

After the Artistic Director of Scary Little Girls had performed at Pengover, one of the residents came over to thank her and then sang Trelawny to her, which was a beautiful moment.

Hall for Cornwall respondent to arts organisation survey

- KEAP devised a project based on residents' stories of their lives. One called 'Trading Tales' was based on the stories of residents' working lives. New stories and poems were created and then performed to residents by KEAP's Story Republicans. A textile artist also ran sessions to encourage conversation and to literally 'weave with words', creating a lasting piece of artwork for the home.

When people realised it was their story being performed – sense of pride and delight was so great to see.

KEAP respondent to arts organisation survey

- Newlyn Gallery and Exchange commissioned an artist to work in a specialist dementia home. They took an immersive approach, initially just spending time with residents and staff. The result was a set of cups, saucers and plates, each printed with a different word designed to stimulate conversation. A similar set were developed in a second home. An artist was also commissioned to work in the first home on paintings and films.
- Wren offered two sessions in five care homes. The first session was a hands-on music workshop with a range of instruments and a singing session delivered by two musicians. Residents were encouraged to discuss their experience of music, favourite songs and tunes, and the second session then featured a repertoire informed by those discussions. In the second phase, Wren worked intensively with one home, running a series of weekly workshops and produced a 'talking book' that was left as a resource for the care home.
- Creativity Works: Two artists worked with two different care homes using crafts to develop relationships with residents and staff. The importance of mealtimes was recognised and place mats and other tableware was created with residents. In the second home painting and collage techniques were used to create radio-shaped boxes to house the stories of residents in a variety of forms. Poetry activities and community events (for families associated with home) were run in phase two.

@Home, Yorkshire

Lead arts partner: **We Do**

Care provider partners: **Anchor Homes, Kirklees Council**

@Home led by We Do in Huddersfield aimed to develop a subscription model with care homes across West Yorkshire. Care homes were to be offered a subsidised package of arts programmes with a view to building sector demand and a market that was self-sustaining

and economically viable. Care homes signed up for an annual fee of £625 per year which included a free activity with training for care home staff and additional activities available to purchase at subsidised rates in the first year. At the end of the first year, following much direct promotion to care homes, only five had signed up, three from Kirklees Council, one from partner chain Anchor, and one individual private home. A further year of promotion did not secure any additional sign ups. In early 2016, We Do closed and with it the *@Home* project.



These cups were created by Jonty Lees, in response to working with residents of Crossroads Care Home in Cornwall. Photo credit: Joint Effort Studios.

4. The pilot year

The first year of the programme was effectively a pilot/modelling phase. The structures, budgets and plans outlined in each application were developed in more detail and tested with the funders. The bidding partnerships were tested as the projects started to put their written plans into action. This first phase highlighted some of the challenges of partnerships between organisations with different cultures and priorities.

Key issues that emerged were:

GEOGRAPHY

The four projects had very different geographical footprints. *Making of Me's* original footprint covered a huge area that stretched from the Midlands to the south coast. It became clear at an early stage that this was impractical and, in conjunction with a change in care home provider, was significantly reduced to much smaller areas in Oxford and Gloucester. *Home Service* similarly found that a large footprint can lead to issues around face-to-face meetings, travel times for consortium members and artists, and lower levels of engagement for the more distant partners. A more compact footprint for partnership projects of this nature is clearly preferable, although this can be challenging in rural areas such as the South West.

LEAD PARTNERS

A particular strength of the *Imagine*, Nottingham programme was that the lead partner was a care home group (Abbeyfield Society – a national provider). Whilst this promised to ensure a more embedded project with greater non-arts ownership, a change in key staff resulted in reduced support for the project at a strategic level. This was further exacerbated when the level of monitoring required for the project by Arts Council England, and the resources and expertise necessary to undertake this, became apparent to Abbeyfield. After negotiations between Abbeyfield, City Arts and ACE, it was agreed City Arts would take over the management and reporting for the project with Abbeyfield remaining as the contractual lead. This hybrid model was successful and Abbeyfield has become a committed champion of the project.

Making of Me was also required to review its operation when the lead care partner – Shaw Healthcare – withdrew once the scale of their required contribution became clear. Lead partners for creative projects should be conversant and comfortable with the systems and processes of arts funding.

DIFFERENCES IN CULTURE

Arts organisations and care homes do not have easily compatible cultures. Their structures, economics, employment practices and professional languages do not make for easy collaboration. All four projects initiated processes designed to ensure shared development but all experienced difficulties of one kind or another. The care home environment is one that demands a specialist approach to individual needs, safeguarding, age-related illness (particularly dementia) and comfort. Experience of creative practice is not always a priority and the informal, improvisational and/or iterative approach of the artist can be viewed as disruptive or complex. Arts organisations, even those with experience of working in other institutional environments (schools, colleges, prisons), can easily underestimate the challenges of working in a care home environment. Collaborating organisations with very different operating cultures need time to build mutual and shared confidence and an understanding of each other's working methods.

GOVERNANCE, FINANCE AND CAPACITY

Two of the four projects experienced difficulties that stemmed from the relatively small size of the lead arts partner. Neither had core funding and company costs were primarily met from a portfolio of time limited projects that supported a positive cash flow position. In different ways, the impact of public sector budget cuts coupled with the uncertainty of arts funding created vulnerability for both, resulting in a difficult trading position. Despite significant support and intervention from Arts Council England and the Baring Foundation both organisations' Boards eventually decided to cease trading, with collateral impact upon the position of the projects they were leading. One of the projects – *Home Service* – was eventually novated to Creative Kernow and the project restarted after a period of dormancy with the same creative partners and a new care home group. The other – *@Home* – was closed at the end of year one.

An assessment of the organisational capacity and long term viability of companies engaged in extended programmes of work should be made at the outset.

The first year of the Arts in Care Homes programme was clearly unsettled. All four projects experienced significant changes to their original plans and three were required to redefine their approach to the work. Whilst regrettable, this outcome is understandable. Arts in Care Homes was built on a desire to forge high level partnerships between care providers and arts professionals and to see novel mechanisms for the placing of work in the care home environment.

With hindsight it could be argued that a more cautious approach, with longer lead-in times, reduced expectations for the first 18 months and a limited roll-out might have been more effective. It would, however, have also resulted in higher costs and a programme that extended beyond the planned three years.

5. The programme in numbers

The Arts in Care Homes programme has involved more than 50 care homes, 10 care home groups and over 20 arts organisations. More than 2,000 care home residents have participated in nearly 2,300 hours of activity. More than 320 care staff and nearly 130 artists have received a whole range of development training, from dementia awareness to using an ipad for creative activity.

There are a few gaps in the figures provided by the different programmes, which means the numbers presented below are lightly to be slight underestimates of the overall numbers involved¹⁵. Figures provided at the time of writing show the following. (It has not been possible to check the detail of the few figures provided by We Do so numbers for the few months of the Yorkshire programme are not included in the summary below.)



**8,868 resident attendances
by 1,970 participatin
residents**



**51 care homes
10 care groups**



**366 family attendances by
178 family members**



**2,267 hours of activity
with residents
1,112 workshops and
visits**



**800 care staff attendances
by 321 care staff**



**123 artists
21 organisations**



**283 volunteer attendances
by 74 volunteers**



**49 training and
development sessions for
artists and care staff**

Figure 1: Participation by numbers

The national scale of the Arts in Care Homes programme was reflected in the significant level of funding involved. Its geographic and numeric reach has ensured that, for a pilot, its impact has been significant. However, despite the levels of investment and the numbers of residents, care homes and artists involved, the programme remains dwarfed by the overall size of the care sector. There are over 16,000 care homes in England and the 1,970 residents who participated in the programme represent less than 0.65 per cent of the national population of over 300,00 older people in care.¹⁶ Given that the Arts in Care

¹⁵ For example, the figures from the final quarter of *Imagine*, extended to July-September 2017, were not available at the time of writing; some figures from phase 1 of the Courtyard's programme with Shaw are not available and figures from Quarter 3 2015 in Cornwall are not available.

¹⁶ *Changes in the older resident care home population between 2001 and 2011*, Office of National Statistics.

Homes programme was the largest level of creative investment in care homes ever seen in the UK, expansion of similar programmes will require considerable levels of support, from both the arts and care sectors coupled to a more universal policy framework.

Of course other arts provision in the care sector already exists, and recent investment by the Baring Foundation and Arts Council England in programmes such as Celebrating Age continue to develop this area of work. Additionally, there are any number of smaller companies and projects that are operating under the radar at local and regional levels, some subsidised and some more commercial. The care sector has traditionally drawn upon voluntary and amateur arts activity, and whilst this should not be belittled or misrepresented, it does not necessarily set high standards of creative practice or provide the development required to achieve and maintain them.

Arts in Care Homes delivered 49 training and development sessions that involved 321 care staff. Elsewhere in this document we explore the individual impact for care staff, but it is worth noting that never before have so many care staff been trained in arts practice through a single programme. Although tracking their subsequent career development would require an in-depth longitudinal study, feedback indicates that for some, the training received and the experience of involvement will have an impact upon the future career choices they make and their approach to creativity in the care home environment.

If we are to assume that an arts programme in every UK care home would bring substantial benefits in the health, welfare and wellbeing of residents, together with increased motivation for staff, we must also recognise that the determination to extend the offer must be written into a much longer term script. The Arts in Care Homes programme has provided a starting point from which to work. It must now be encouraged to proliferate. The process of tracking, monitoring and putting value upon the work and its impact will remain a challenge. A shared commitment between the CQC and the Arts Council England to monitor levels of provision and its quality could help to overcome this.

6. Creativity in the care home

Care homes come in many varieties: from the independent provider with a small number of premises (such as Anson Care in Cornwall) through to large national chains that count their premises in the hundreds (such as Abbeyfield) and one-off family run homes. The staff in each care home will contribute to its personality and determine the atmosphere that a visitor encounters when they enter the building. Some are charities and others are commercial; some small and intimate others large and imposing; some have a significant nursing component, others do not.

But there are many unifying factors that most care home managers can identify with. Care homes are labour intensive, their funding models can be fragile, wages are often low and staff turnover can be high. The work can be demanding and requires specialist training if it is to provide a quality service. A care home is a 24/7 operation that has to achieve standards of care that focus upon the needs and wellbeing of frail and often vulnerable individuals. The consequent pressures are intense and failure can have catastrophic consequences for residents. As the creative lead on one project put it: “the priority of care homes is care – health and care needs come first”.

It is unsurprising that the arts can sometimes struggle to find a purpose in an environment where an increasingly frail resident population has ever more complex medical needs and safeguarding is a priority. The artist may be seen as disruptive to the organisation and the precautionary structures that underpin care home operation. Artists thrive on risk, but this acquires a different meaning in a care home where risk mitigation and elimination is a daily task and an understanding of arts practice is not seen as operationally essential.

It is of course important to avoid generalisations – there are no universal assumptions that can be made as to the reception that artists may receive in any particular care environment. This section explores some of the issues relevant to arts practice in the care home environment that have emerged during the lifetime of the programme. Some will be recognised by practitioners in similar environments – hospitals, schools or prisons for instance – where arts and culture has a particular impact or purpose and where the role of the participant is rather different to that experienced in less institutional settings.

CULTURE AND COMMUNICATION

The Arts in Care Homes programme could be seen as action research with the aim of achieving long term cultural change for artists, arts organisations and care homes. One of the most pressing tasks has been to overcome barriers of perception, understanding and communication that prevent this. Whilst all four regional projects tackled this core issue in slightly different ways, they all sought to achieve vertical buy-in by care staff, activity co-ordinators, care home managers and senior executives and/or owners.

What has emerged is a patchwork of commitment that is primarily driven by individuals who are champions for the project and who advocate within their own care home or

organisation. Most frequently these champions have been activity co-ordinators, who understandably have a direct investment in the success of the project and who are most affected by it. There are examples, across the programmes, of activity co-ordinators who have become passionate about the project, and a small survey confirmed that for some it was life changing:

“It was absolutely the best project I have been involved with ever. It was beneficial in unquantifiable ways.”

Imagine programme Activity Co-ordinator.

To achieve the kind of transformation required, an ongoing commitment to care home staff is needed from the arts organisations leading the project. *Making of Me* had a very clear training and development programme for care home staff from the outset, providing a framework that generated confidence in the project and its methodology.

It’s not as much about delivering the arts as developing the staff.

Creative Lead, Regional Project

For *@Home* there was a clear understanding that the project was one that required radical change.

It’s becoming increasingly clear that what we’re involved in here is more a campaign than anything...

@Home Evaluation

Buy-in to the project was always a central requirement for the Arts in Care Homes programme, but for the first 18 months this was not easy to achieve. The regional projects found consistency of commitment problematic at times and changes in care home staff were identified by many as a particular source of difficulty. Workload issues militated against staff attendance at project meetings, particularly where this involved travel time.

Differences in culture hindered easy collaboration at the outset. *Imagine* experienced considerable issues of implementation because the project lead was a care home group with very limited knowledge of arts funding structures or reporting processes. Staff changes exacerbated this situation until City Arts took over the administrative and executive functions of the project. Whilst this put significant strains on the project, it resulted in a very strong and continuing partnership with the Abbeyfield Society that will persist beyond the life of the programme, with its senior management team taking a leadership role with the group.

The care sector has considerable staff turnover and this has implications for programmes such as Arts in Care Homes. This is felt at both a strategic level, as experienced by *Imagine* where the leading advocate left Abbeyfield in the early stages, but also at a delivery level:

The work is too reliant on the one individual, the activities co-ordinator, despite meetings with managers. Should that person retire or change jobs, there is no continuity as the understanding of the benefits of arts projects is not embedded into the care organisation’s ethos.

Arts organisation survey respondent

Strategic buy-in at a senior level which is then embedded across the organisations is essential. This takes time and needs to be part of a continuous process. It can never be delivered through a one-off process.

PLACES AND SPACES

Care homes are designed for a variety of functions – eating, sleeping, congregating, medication and bathing. Rarely have they been designed with creative activities in mind. Communal spaces are mostly carpeted and can have large amounts of furniture in them. Some are in converted Victorian buildings and others are purpose built, but few have areas that easily accommodate group creative activities. This can affect the working processes of artists, requiring them to adapt their practice to meet the care home conditions. Issues that emerged around suitability of the physical environment included:

- limited facilities for group activities;
- use of dining rooms and other communal spaces was often bound by time constraints;
- limited availability of ‘messy’ workspace;
- lack of storage space;
- the working environment was sometimes public and distracting.

Dance and drama could only have small groups. That’s difficult in open plan spaces especially as the activity progressed. It felt exclusive.

Activity Co-ordinator in focus group

When coupled with a broad spectrum of residents’ mobility, motor skills and cognitive capabilities, the working environment can be difficult to control. Artists are, of course, adaptable and on the whole responded to these challenges very well. They modified their practice to suit the circumstances and learnt quickly to adapt their plans as necessary. Care homes also learnt how to modify their environments to meet the needs of creative practice. Preparation is the key to this, and while the more organised homes were able to make reasonable adjustments, there were occasions when artists arrived for a session to find that little advance work had taken place.

Locations that were open plan and unobstructed by furniture were deemed better suited for hosting arts activities. Several artists implemented small changes that enhanced the participation of residents; removing physical barriers, such as walkers and rearranging the furniture and room layout. They used their initiative to meet the needs of different workshops.

Imagine Evaluation Research¹⁷

Work in open plan spaces often attracted the attention of carers, nurses, doctors and therapists, increasing awareness of the arts activities, and providing opportunities for informal participation. Whilst this was generally welcomed, it could also be a source of distraction for both artist and participants.

¹⁷ What factors influence the facilitation of high quality arts programmes in care home settings? Emma Broome, University of Nottingham 2016

Whilst workspace may be at a premium in many care homes, the provision of appropriate space for creative activities should be seen as a necessity rather than a luxury. Throughout the UK, care homes continue to be opened. Many of them are new builds, and others are premises that are being refurbished or upgraded. It would therefore be appropriate for Arts Council England, the Baring Foundation and possibly the Care Quality Commission to prepare advice for the care sector on the provision of multi-use creative space within care homes that provides guidance on basic issues such as access to cleaning facilities, flooring, storage, appropriateness, suitability for particular art forms, need for networks and wifi, temperature control, ambience and lighting.

ACCESSIBILITY

Accessibility is a major consideration in every care home, but primarily within a domestic or personal context. The introduction of creative practice into the care home environment will inevitably have access implications that vary with different art forms. Sensory impairment, mobility and motor issues, frailty and cognitive impairments are common among many care home residents, and these need continual consideration.

It is worth referencing the social model of disability in this context, which states that a person's disability is a product of society and is therefore a social responsibility. This is in direct contrast to the medical model of disability that places responsibility upon the individual to respond to and 'deal with' their disability. Care homes originated (in part) as a medical response to the health-related issues of older people and the need for medical solutions. The subsequent medicalisation of older people in care has historically hidden their capabilities and individual preferences. Whilst much has changed in the culture of some care homes in recent years, there is still much that can be learnt. Many disability arts organisations, such as Graeae, Shape and Unlimited have been at the forefront of the access and inclusion debate and their practice is well developed.

It would undoubtedly be productive if opportunities to share learning and explore common themes between disability arts practice and arts with older people in care were made possible.

Artists recognised the need to be responsive and to make appropriate adjustments in the preparation of content and being open to adaptation to meet the capabilities and preferences of the residents.

It's so important to be flexible in these situations, so we abandoned our plans as they were clearly not suited to the needs of the group.

Theatre practitioner, cited in What factors influence the facilitation of high quality arts programmes in care home settings? Emma Broome, 2016

In feedback, creative arts programmes were felt by many care homes to cater particularly well to groups of with differing abilities, as long as the artist remained open to adaptations.

CREATIVE RESIDENTS

In recent years many care homes, encouraged by the CQC, have moved away from a medical model of care to a more personalised approach that considers the welfare of residents holistically¹⁸. Personal history, preferences, taste, choice and opportunity all figure in this mix. The anonymity of the care home is a challenge to the maintenance of individual identity – the clutter of everyday life is what defines us and tells the story of who we are and how our lives have been shaped.

In the care home these markers of identity are severely reduced and the consequences can be profound. We are all defined by our physical and social environments and when these become institutionalised the sense of self can suffer, particularly for people who have memory impairment or dementia. Loss of identity is a significant issue in the care home environment and the Arts in Care Homes programme was quickly seen to address this through the personalised and individual focus of much of the work. The artists understood very clearly that their job was not to infantilise or patronise the residents. As one focus group participant put it it: *It's about adulthood and having adult conversations with residents.*

Arts in Care Homes has introduced individualised person-centred activities that move away from a scheduled, systemised environment to one that is more open and rewarding for residents.

Having residents who have enjoyed a fulfilling afternoon and can have something to talk about is very important – it can lift the mood of the home including staff and it can help later in the day with relaxation and sleep. Our staff are starting to join in more with activities and this is really positive.

Care home survey respondent

Measurement of the impact of creative activities for residents is almost always based on observation, narrative reports and anecdote. Whereas in other areas of arts practice impact is often tested against outcomes such as access to training, exam success, employment progression for example, none of these are applicable to older people in care. Impact is a malleable term in these circumstances: residents with dementia may display limited responses to an activity and it is only through the trained eye of the carer, practitioner or sometimes family member that a benefit can be recognised and understood. To identify and interpret residents' responses requires familiarity and confidence with the creative processes involved and knowledge of the participants and their history. The three year timescale of Arts in Care Homes went some way to enabling this.

At the beginning of the programme there was a perception among staff that many residents would only have a limited ability to fully participate in some of the activities.

When I was first informed of the project I didn't know how it would work. I was excited but also intrigued and couldn't envisage how residents would engage.

Activity Co-ordinator at evaluation focus group

¹⁸ See the Care Quality Commission Fundamental Standards: <http://bit.ly/2xDCEiB>

But there has been a shift in perception and understanding:

A number of care staff reflected that at the end of the project they now know what to expect and what a positive impact it can have but they didn't realise this at the beginning.

Home Service Evaluation

The interviews and surveys carried out for this evaluation present compelling anecdotal evidence of the impacts of the programme for residents. Artists and care home staff identify a range of positive outcomes for residents emerging from arts activities inside and beyond the care home. The activities have made residents feel respected and valued for contributions they have made:

(The value is) priceless – our citizens have done things that they never imagined they could do. It has built up their confidence and they've been made to feel valued and needed.

Care home survey respondent

One of our residents was involved in an animation project where his fairy story was brought to life. He was so moved when he watched what he, himself, had achieved. He still talks about it today.

Care home survey respondent

The arts activities have provided inspiration and sparked memories of past experiences and abilities, even if only fleetingly, for some residents living with dementia:

Taking a lady to the art gallery – she loved art and painting in her younger years. And although she lives with advanced dementia and her communication is very muddled, she really studied the painting and made lots of comments about them – loudly at times!!!

Care home survey respondent

The delight in faces that played music on the ipad. One lady hadn't played a keyboard for 30 years and played us a tune.

Artist survey respondent

One resident who often sat with her eyes closed really came alive when we discussed Wales, where she had grown up. Playing Men of Harlech really stirred her and she became really animated and told the group some stories, including one about the local unemployed miners building a fountain in the town!

Artist survey respondent

Artists and care staff talk about the calming effect the music and dance activities, in particular, had on some of the more agitated residents:

... frail, tired, anxious people became animated and relaxed. People being in the moment with the movement.

Artist survey respondent

The sessions and activities gave residents the opportunity and ability to express themselves and their creativity, through making, singing, storytelling and poetry:

One man wrote a poem about the last time he saw his wife, it was very moving – I thought she may have died – but she hadn't she had been moved to another care home.

The poem contained so much love and grief – it was incredibly moving to bear witness to this – and to have enabled him to express his feelings, he was very frail with major speech difficulties.

Making of Me artist

It was so moving when one nonverbal resident began to sing to a much loved song, and found all her words!

Home Service artist

Such activities have dispelled the concerns of many care staff about the limited ability of residents to participate. Staff perceptions have changed as residents engaged in activities in ways never thought possible. With support and encouragement it is possible for many, even the most physically and mentally frail, to take part and get enjoyment.

I have learnt that no matter what the condition of the residents, there is always something that they can join in with and have so much joy achieving what we and they thought was impossible.

Care home survey respondent

The nature of the caring role sometimes had an unwanted effect, with care staff who were not familiar with creative processes providing more support than is necessary or desired by the artist.

I still find it difficult to communicate to carers how much to support the participant in the making part of the workshop. Often I feel they do too much for the participant, and don't allow them to do as much as they are able. This is important for the participant's sense of achievement.

Artist observation

Introducing the artistic approach and purpose of the activities to care home staff is essential for them to trust the artist and understand the potential and capability of residents that can be inspired through the artistic activities.

A SENSE OF COMMUNITY

A care home community is constructed and managed. People become residents primarily out of necessity rather than choice and their starting point can frequently be one of resistance or resignation. The average estimated length of stay for older people in care in 2010 was 2.5 years¹⁹, and the turnover of the resident population is consequently high. Choice of care home is predominantly made by a family member, and their priorities are more likely to focus on safety, security and quality of individual care. The concept of a care home as a place of community interest is relatively new and is bound to the CQC's expectation that care homes develop a sense of place and local connection²⁰. These values are deeply connected to opportunities for creative engagement. It is widely accepted that shared cultural experiences contribute to, and are an expression of, community cohesion and there is no reason why this should not apply in the care home setting. Arts in Care Homes provides ample examples of ways in which this has happened, including the following.

- Betty, a 96-year-old Nottingham care home resident was part of a Nottingham Carnival float troupe in 2015 and 2016.
- A care home in Cornwall “*overcame many barriers to take a group of residents on a trip to a gallery. This was the first trip the care home had ever done. They have subsequently done bus tours and held a garden party for residents away from the home*”. Home Service Evaluation.
- The *Imagine* programme has involved trips to various cultural destinations in the city, including a number of trip to Nottingham Contemporary and a performance in a large inflatable dome created by Architects of Air.
- Activities that have brought some of the more isolated residents into a community enabling new relationships to develop through the shared experience of talking, making and moving:

We have a male resident who in the three years I have been working here, never or very rarely joined in and never with “arty” activities. He started coming to Armchair Gallery, and joined in every week with all elements of the process including making something. ... It helped boost his morale and his confidence and has led to more residents talking to him and he talks back which is great.

Care home survey respondent

¹⁹ Length of stay in care homes, Julien Forder and Jose-Luis Fernandez, PSSRU Discussion Paper 2769, January 2011

²⁰ See the Care Quality Commission Fundamental Standards: <http://bit.ly/2xDCEiB>

- On a number of occasions storytelling and drama projects have revealed connections between residents that were unknown. In one care home, two men who had worked together some 50 years before were able to rekindle a lost friendship.

Many care homes strive to create a community within their home and there is strong evidence that the Home Service project contributed to the sense of community in some homes. Interviewees commented on how the Home Service activities brought staff and residents together within the home – sitting together doing an activity or enjoying a performance. Staff often enjoyed the opportunity to spend time with residents “in a different way”.

Home Service Evaluation

This sense of shared experience – something that is vital and which connects people in different ways – is an essential part of the creative experience. In care homes it breaks down some of the barriers that exist between staff and residents, enabling a deeper understanding of personal history, cultural origins and context. It should be an intrinsic element of care home culture, and there is considerable anecdotal evidence that the Arts in Care Homes programme has advanced this understanding.

LOCAL AUTHORITIES

It would be fair to assume that the role of local authorities – who have statutory responsibility in the provision of adult social care – would feature heavily in the development and support of the Arts in Care Homes programme. With one notable exception – in Nottingham – this did not prove to be the case. In all likelihood, the impact of austerity and local authority cutbacks is the cause. Local authorities generally act as the funders of care rather than the providers, and social services departments have high caseloads and focus predominantly upon the most urgent and critical needs of clients.

Nottingham City Council was a key partner in the *Imagine* programme. The City Arts Officer was actively engaged in all aspects of the project and assured vital connections between City Arts and the Council’s care homes. This raised the profile of the project across the Council and with elected members, but with limited resources there were restrictions on the number of Council run care homes that could become involved. Nottingham has ambitions to be seen as a dementia friendly city that recognises the value of older people, and *Imagine* fed into this aspiration. It provided concrete examples of the ways in which older residents could actively participate in civic and cultural life. For the local authority, *Imagine* demonstrated the value of investment in areas of special need and opened doors to institutions such as Chatsworth House and enabled the development of longer term relationships with the Abbeyfield Society.

Nottingham City Council was partner, with City Arts, in a national conference – Local Government, The Arts and Older People – at Nottingham University, which explored innovative approaches to the health and wellbeing of older people. This would not have happened in such a strategic and high profile form without the driver of the Arts in Care Homes programme. The first day of the conference was focused on sharing learning from *Imagine* and other arts in care home activities with other local authorities.

The role of local authorities was not significant throughout the rest of the programme. It may have been present at a more grass-roots level (through social workers and care funders for example) and therefore consequently not uncovered by this evaluation. However, a more explicit requirement to engage more fully with the public sector may have revealed opportunities and avenues that were poorly explored.



Three generations enjoying a performance of Mrs Brewster Moves House. Photo credit: Jo Wheeler. Courtesy of City Arts/Kate Duncan

7. Artists and arts organisations

ARTISTS IN THE CARE HOME SETTING

In this section we will look at the impact of the work for the individual artist; the impact of the programme for arts organisations is dealt with below. There are a set of specific challenges for artists working in a care home setting highlighted above – including the physical space, the physical and mental frailty of many of the participants and the ordered nature of the day. However, there is much in the way of shared experience – and a body of work that has developed over decades – that is contiguous between creative practitioners working in many different kinds of participatory settings, and the potential for shared dialogue that explores themes, achievements, challenges and methodologies can be very productive.

Whilst the work of the artist almost always involves planning and preparation, it is also dependent upon a degree of spontaneity and response. This can be seen as a contrast to the scheduled routine of the care home environment. For many artists the care home is not an easy workplace – the conformal and institutional atmosphere often encountered does not readily support the work of the artist unless the care home has particular sympathies or experience.

The three projects that were able to deliver a comprehensive programme took differing approaches to working in care homes and bringing artists into their programmes. *Making of Me* focussed on a relationship between the artist and the care home, brokered by The Courtyard in Gloucester and Oxford and had a strong mentoring element. In Nottingham, the artists were part of a structured programme developed by a city-wide consortium of companies that linked back to their core creative activities. In Cornwall, the consortium took different approaches to creative activity in care homes, but shared the experiences of the work widely with partner companies.

The artists involved worked across many art forms – drama, dance, digital media, the written and spoken word, painting, sculpture and music all featured, sometimes in combination. Some projects involved presentation and display, others had a personal or private outcome. Some were purely experiential and ‘in the moment’ whereas some were developmental and worked towards a definite outcome. Some were one-to-one, others involved group work. All were tailored and structured to meet the needs of the residents.

The artists involved came from many different backgrounds. Some considered themselves to be experienced in working with older people in a care home setting, for the majority it was a completely new experience. Whilst the national evaluators were able to observe only a small proportion of the arts activities directly, the team met and interviewed artists on many occasions through one-to-one meetings, focus groups and feedback sessions. Through these, and the review of evaluations and research from each programme, a number of common themes have emerged.

Flexibility

Many factors affect the ability of artists to deliver their planned programmes of work. Contagious illness in the home, staff absences, changes in schedules, the death of a resident can all impact work on the day. This can be linked to a failure to understand the level of preparation required beforehand and an assumption that cancellation or postponement is not a problem.

Within the home environment artists have had to respond to the challenges of working in spaces and places that are not entirely suitable for their art form. Simple steps such as closing off a space and preparing it beforehand can make a major difference to the quality of the creative environment.

Be prepared for anything...

Artist in evaluation focus group

Understanding process

Whilst all projects attempted to communicate the nature of creative work with the care homes and their staff beforehand, there remained an experiential gap that the artists had to close before the nature of their work in the care home was fully understood. Over time, and with continuity of contact, this gap was closed and care home staff became more comfortable and accustomed to the presence of an artist in the care home. A number of artists reported that early on in the process the care home staff were not able to differentiate their work from more leisure and entertainment based activities. Only over time was there an understanding of the participative nature of the activities delivered through the Arts in Care Homes programme and the quality and standard of work that this implied.

Planning and preparation

The nature of the work in care homes requires some considerable planning that includes the need for contingency consideration. A number of artists identified that this took longer than anticipated.

Consistency

The bedding-in of projects can only be achieved over time. A regular and consistent process will generate resident recognition and create a comfortable welcoming atmosphere in the care home. Staff have emphasised the value of the expectation and 'buzz' that the impending arrival of the artist often generates. Even amongst residents with advanced dementia, artists report a sense of recognition and response when return visits are regularly spaced over short periods.

Staff engagement and working together

The most significant factor to impact upon success was the engagement of staff in the creative processes. Care staff, activity co-ordinators and care home managers can all contribute to the success of a programme. Most frequently the artist had the closest relationship with the activity co-ordinator. Care staff (as opposed to activity co-ordinators) would sometimes become involved in the creative sessions, but primarily as carers to the

participating residents. Care home managers commitment tended to be more problematic, although this was not universal.

The manager did not 'buy in' and didn't get it; the activity co-ordinator was not a strategic thinker.

Artist in a focus group

The process is at its best when it is shared and mutual – a collaboration between all the professionals involved in the care setting.

The activity co-ordinator made planning so much easier by dealing with spaces and communication. She let [us] artists get on with it, but was engaged with and introduced us to the residents.

Artist in a focus group

Understanding signals and responding to prompts

Creative engagement requires a sharing of experience and process. For some older people, particularly those with dementia, this can require a degree of familiarity, both with the resident and of their history. Residents who have limited speech may be able to signal in other ways – the smallest of eye movements can represent significant communication in certain circumstances. It is important therefore to know when a sign – a gesture or smile – is out of the ordinary and is indicative of a response that has been triggered by the creative activity. The experience of care home staff is a vital part of the process in these circumstances – it is their experience that can identify when a positive impact, no matter how small, has occurred. For many the programme has changed their perceptions of what can be achieved.

Reflection and review

The Arts in Care Homes programme was developmental and for at least half of the artists involved it was their first experience of working in this area²¹. For many more it was the first time they had worked in a consistent way in such a setting over a period of weeks or months. Time to reflect upon successes and challenges and opportunities to share analysis of these with others was critical. For *Making of Me* this was an intrinsic part of the process (see Workforce Development below) – every artist had a mentor and one-to-one reflective sessions were regularly scheduled. *Imagine* and *Home Service* had a rather more mixed model that involved feedback via the consortium of arts organisations as well as the lead partner. All projects employed round table sessions where practitioners shared experiences on a regular basis and which enabled both formal and informal dialogue.

It is very clear that without some sort of structured approach to reflection and review a number of artists would have found the creative process less than satisfying. A relatively small number of arts practitioners have extensive experience of working with older people and consequently there are limited benchmarks against which to assess the quality of one's contribution.

²¹ The artist survey for this evaluation showed 46 per cent (n=31/57) had no experience working in a care home setting.

Time constraints meant that many of the artists were unable to receive formal feedback from the care home at the point of delivery or soon after.

PARTICIPATING ARTS ORGANISATIONS

Two of the projects – *Home Service* and *Imagine* – worked closely with a range of arts organisations to deliver the programme. For *Home Service* this created a new network of seven organisations whilst *Imagine* drew upon the existing county-wide Open Arts Forum.

Home Service was spread over a wide geographical area, and for Wren Music and Creativity Works – based in Devon and Somerset respectively – the journey time to meet with other partner organisations in Cornwall was a significant challenge. Consequently their role in the partnership was not as full as it could have been and was primarily based on quarterly meetings and dialogue with the programme co-ordinator.

Imagine worked with a geographically tighter group of companies across Nottingham. Whilst they were all connected via their relationship and the commissioning process with City Arts, the Open Arts Forum was not always easy to manage. Collaborating on a new project takes time and confidence to establish, and the feeling in Nottingham was that there was little time to enable this.

You can't just get a consortium up and running straight away. It needs a period of planning and development.

Lead partner

The Arts in Care Homes programme has seen arts and cultural organisations reach new older audiences with many working in care home settings for the first time. (Only two of eight surveyed had previously worked with residents of care homes.) None had previously worked in such a consistent way and for most of them the programme was an opportunity to explore new audiences and new ways of working with communities.

For the Newlyn Gallery, the Programme enabled the placement of artists in care home settings which were quite new to them but which presented an aesthetic challenge. The artists were given an open brief and were effectively asked to respond following a period of reflection.

Take a group of people, add an artist, leave for given length of time, see what happens. Experience has taught us that something rather magical and organic will result.

Newlyn Gallery feedback

The first result of this process was a remarkable porcelain tea service made in consultation with, and to be used by, residents. It proved hugely popular, and the Newlyn Gallery proceeded to guide the next artist in a similar way.

The aim for us was to see how an artist would interact with the staff and residents of a care home. We made it clear that there were no expected outcomes. We were interested to know how they viewed that environment and discover what effect their presence might have.

Newlyn Gallery feedback

Having a project run over three years meant the arts and cultural organisations have been able to learn from and adapt their approach to engaging residents.

Our first project was a genuine experiment and we learned as we went along. Not everything we tried worked – but this was expected.

Arts organisation survey respondent

The understanding that for the activities to really work and have some legacy it was essential to develop relationships with care home staff at all levels, also became clear.

In Phase Two we met with care home staff at the outset to create a project that responded to their needs for the residents... To an extent we were able to achieve the aim of staff feeling more confident to commission, but there is still a gap in terms of staff at the care home who have the capacity and/or ability to fundraise effectively in order to support the work's commissioning.

Arts organisation survey respondent

The participating organisations have welcomed the opportunity to expand their work and reach new audiences beyond the confines of their buildings, a key priority for many. But the increasingly tight financial situation that care homes find themselves in means additional resources are likely to be required for quality arts activities. The lack of skills and capacity of care home staff to fundraise, even if this was in collaboration with arts organisations, is a real challenge.

The programme has clearly been an inspiration for the staff of arts and cultural organisations involved. They have developed their skills and understanding of working with an older audience, many with dementia. One member of staff from a Nottingham arts organisation was so inspired by the work she left the organisation for a job with the Alzheimer's Society.

8. Workforce development

Whilst lead arts organisations in the programme had experience of working with older people, both in care homes and in other settings, the scale of the project meant that it would inevitably involve both artists and care professionals for whom this would be a new venture. Partnerships with care homes and care home groups, with little or no track record of arts practice, would also require induction and training of staff at all levels, particularly with activity co-ordinators and managers.

Throughout the lifetime of the programme the projects provided care home training that was designed to familiarise staff with its aims and to explore:

- the intended impact of the work;
- its value to the care home and the residents;
- project management, record keeping and what would be required of the care home;
- benefits, opportunities and outcomes;
- creative processes and their impact on the day-to-day running of the home.

The beneficiaries of this training were, in the main, activity co-ordinators rather than care home managers. There was considerable variation in their capacity to participate in this training and the lead arts organisations were required on many occasions to repeat meetings or reintroduce programmes of work because of staff changes, sickness or unavailability.

The paperwork that came out as a result of the training made such a difference. The planning document in particular, was extremely effective and something that I would use again in the future.

Making of Me artists survey respondent

Making of Me developed a very coherent training and development programme for both artists and care staff that was scheduled throughout the lifetime of the project. This enabled care homes to plan months ahead and for The Courtyard to provide prompts at regular intervals. The Courtyard also developed comprehensive induction and reporting training materials that provided care homes with a sense of structure and purpose. Everything about the project was explained and ‘fear of the unknown’ was tackled from the outset. Training sessions were designed to put care home staff at ease with particular art forms, to make the tasks associated with the project achievable and to reduce anxieties around staff workloads. The success of this strategy was clear from year two onwards (following a refocus of the project and the partnership with Order of St John): meetings were well attended, staff were clearly confident and the sense of collaboration and partnership strengthened.

I learnt to try anything and everything – a variety is important – there are always loads of positives (even a negative response from some residents is a positive).

Care home survey respondent

The mentoring was also a significant workforce development element of *Making of Me* and the basis of the model. Three mentors, one for each art form – dance, drama, literature, led the training for artists, attended some of their early sessions and advised on approaches and practice. This cascade model, where a mentor effectively acted as a gatekeeper of best practice, mostly resonated well with artists. In only one particular instance did an artist feel as if their practice was being controlled and directed in ways that they disagreed with.

In the *Imagine* programme, artists and activity co-ordinators mainly trained together, for example in training on dementia awareness and on the creative use of ipads and apps with older people. This allowed for sharing of different perspectives and experiences, helping to enhance the overall understanding of work with older people in care homes among both groups. The *Imagine* training was opened up to care home staff and arts practitioners not directly in the Arts in Care Homes programme, building the capacity of a wider group of practitioners and extending the legacy of the project across the city.

I have built a big network now and also I have learnt loads of techniques – so this project will carry on as much as possible in our home.

Care home survey respondent

I have learnt that no matter what the condition of the residents, there is always something that they can join in with. [They experience] so much joy achieving what we and they thought was impossible.

Care home survey respondent

In Cornwall, workforce development was delivered initially by Arts and Health in Cornwall and the Scilly Isles and latterly by Creative Skills. This was formally delivered through a programme of project development meetings attended by arts organisations, artists and care home staff. Due to the lengthy travel time involved, sessions spanned a full day and were designed to cover many areas of the work plan. Time for reflection and feedback was always included in these sessions and care home staff benefited from the opportunity to understand the purpose of the project, its practical implications and the best ways to ensure effective delivery.

Arts in Care Homes has been a significant professional development opportunity for artists, with a legacy of a group of artists with better understanding of the skills and approaches that are most effective with this group of older people, a high proportion of whom are living with dementia. 58 per cent of artists surveyed for this evaluation had some previous experience of working in a care home setting; over a quarter did not have any experience of working with older people in any setting.

I learnt A LOT but mostly I realised the importance of older people being encouraged to try new things and being exploratory in a creative manner.

Imagine artist survey respondent

Artists learnt the need to be flexible in their work adapting to the care home environment and often the limitations of the spaces:

One of the big challenges was responding to the space as there are buzzers and alarms to enable care assistants to do their job but this could be disruptive in workshops and performances so we looked at how best to incorporate these into performances.

Imagine artist

Despite the many challenges some of the artists faced of working in a non-familiar setting, they largely remained positive and inspired by the unknown:

Every week was a challenge. Just when you thought you had it sussed, then something would happen e.g. difficulties with care manager, change of room, sickness, etc. This seems to be the nature of the work and what keeps it fresh and spontaneous!

Making of Me artist survey respondent

The programmes have led to a much more person-centred approach to the artistic work and a greater sense of personal investment on the part of care home staff. Whilst a national programme of workforce development may not be feasible, Arts Council England should consider looking sympathetically upon applications from care homes that support the longer term development of care home staff.

9. Sector leadership

A time limited programme that provides a heavily subsidised intervention may have limited viability in the longer term, unless the changes it has brought about have affected strategic thinking and policy. For this to happen there must be high-level adoption of the principles it embodies. Evidence of this in the Arts in Care Homes programme is patchy. In Gloucester and Oxford, The Courtyard worked closely with the regional manager to bring the individual care home managers on board. Despite careful pre-planning and induction, one care home manager claimed to have no knowledge and little interest in the programme. This was an exception, however, and other managers expressed how the advance training and introductory paperwork and ongoing professional contact with Courtyard staff and artists, had changed their perception of what arts in the care homes could achieve.

Imagine in Nottingham has seen greater shift in strategic support with some of the care home groups, yet this has varied. Among the smaller care home groups such as Eastgate Care there has been close collaboration with the owners. With some of the other, even smaller, care home groups, it has been much more of a challenge to bring care home managers on board.

The early stages of *Imagine* experienced considerable challenges when the lead advocate from Abbeyfield Society left the organisation. The resulting leadership vacuum remained until a Head of Dementia Innovation joined the society some considerable time later. Since that time, a number of significant developments have taken place. Abbeyfield have included creative ageing as part of their national dementia strategy, potentially meaning that care home managers have a template for their strategic thinking, and activity co-ordinators meet on a regular basis for training and skills sharing.

Leadership in this context should not be singular. Organisational ownership and a visible policy framework are necessary to ensure that commitment to arts in care homes is embedded throughout the organisation. This now seems to be the case for Abbeyfield. Senior staff have recognised that ‘there could have been more buy in from the beginning’ with ‘a willingness to allocate resources differently’. With a stronger commitment to maintaining programmes of work – but with the caveat that there is no ‘new’ money – Abbeyfield has maintained a strong partnership with City Arts.

The realities of care and the costs of a service will be a fundamental influence on any investment decision. Despite changing attitudes, areas other than the arts may be of a higher priority. This will be reflected in the perspective of senior managers in the care sector. The future champions of this area of work are likely to be artists and arts organisations and this reality, together with the responsibility it brings, should be accepted by project funders and managers. Realistic expectations will create more realistic partnerships and a sympathetic approach will, in time, reveal those individuals and organisations in the care sector who truly value and support the work of artists – as has been made evident by the Arts in Care Homes programme.

10. Value and cost

There is no doubt that delivering high-quality arts practice in a care home setting is not cheap, and the Arts in Care Homes programme conforms to this expectation. The narrative below reflects the cost of building a three year arts programme within a non-arts sector, particularly one that has a limited history of engagement with professional artists and arts activities and therefore requires significant time for set-up and partner development.

COST PARAMETERS

As action research (which this Arts in Care Homes programme was) there were a number of additional factors that impacted upon total cost, these being:

- start-up and implementation costs
- initial trialling costs (primarily in year one)
- ongoing training and development programmes
- core costs and overheads
- evaluation and research programmes.

It is difficult to place an accurate figure upon these areas, but if we apply the full cost recovery estimates that exist in similar projects²², it is likely that collectively they account for at least 30-35 per cent of programme costs.

ENVIRONMENTAL FACTORS

In addition, we should consider those unique or special factors that impact upon the cost of arts work in care homes, which include:

- small group sizes, and the frequency of one-to-one sessions
- short session times, often geared to the capabilities of residents
- a significant care staff presence at sessions
- planning and travel times of artists and arts organisations
- unavoidable cancellation and/or postponement of sessions at short notice.

²² See the Big Lottery Fund's Full Cost Recovery guidance: <http://bit.ly/2ic010S>

CALCULATING COST

Given the caveats above, we are in a position to consider the costs as indicated in the table below. We have not included the *@Home* data, as this would have distorted the picture somewhat. The costs have therefore been derived from data supplied by the three projects that were completed. We have calculated a net cost by discounting 30 per cent from the gross cost to account for the cost parameters above. For completeness, gross cost is included in square brackets. Key numbers that emerge from these findings are:

Resident costs

Average net cost per resident across the programmes – £257 [£368].

Cost variation per resident across programmes – Highest: £366 [£523] (Cornwall); Lowest: £186 [£266] (Oxford/Gloucester)

Note: Many residents were involved in multiple activities and this figure does not reflect the number of projects any particular resident may have been involved in.

Attendance costs

Average cost per attendance – £57 [£82]

Variation in cost per attendance – Highest £69 [£99] (Cornwall); Lowest: £49 [£70] (Oxford/Gloucester)

Note: These figures indicate the cost of resident participation in a single workshop or event.

Sessional costs

Average sessional cost – £461 [£659]

Variation in sessional cost – Highest £721 [£1029] (Nottingham); Lowest £313 [£447] (Oxford/Gloucester)

Note: The length of sessions varies considerably, as can the number of artists and residents involved.

OTHER FINANCIAL OBSERVATIONS

There are implications of working with arts organisations as intermediaries, as opposed to the artist-led model developed by *Making of Me*. The former introduces additional management costs in addition to those of the lead delivery partner.

It is interesting to note that the high costs associated with *Home Service* in Cornwall confirm the anecdotal evidence of higher costs associated within a sparsely populated region across a large geographical area. *Home Service* was also required to restart its programme after the disruptive effect of the Arts in Health in Cornwall closure.

	Number of individual residents	Number of resident attendances	Number of sessions in care homes
Cornwall – Home Service			
Total <i>Home Service</i>	324	1707	230
Gross cost per	£523	£99	£737
Net cost per	£366	£69	£516
Oxford and Gloucester – Making of Me			
Total <i>Making of Me</i>	973	3670	578
Gross cost per	£266	£70	£447
Net cost per	£186	£49	£313
Nottingham - Imagine - City Arts			
Total <i>Imagine</i>	673	3491	291
Gross cost per	£440	£85	£1029
Net cost per	£308	£59	£721
Total across three programmes			
	1970	8868	1099
Gross cost per	£368	£82	£659
Net cost per	£257	£57	£461

Figure 2: Cost breakdown

FINANCIAL COMPARATORS

When considering relative cost, comparison is a useful tool to gain some measure of value. The University of Nottingham study of *Imagine* calculated social return on investment (SROI) of £1.63 for every £1 of expenditure²³. This study used existing health and wellbeing activities for older people as proxies. The financial proxies used were:

- The unit cost of the attendance at local authority day care (seven attendances): £59 per client attendance.
- Cognitive stimulation therapy: £105.00 per client (based on a package of 7 sessions,

²³ *The social value of the arts for care home residents in England: A Social Return on Investment (SROI) analysis of the Imagine study*, Alessandro Bosco, Justine Schneider, University of Nottingham, 2016.

£15 per session, two sessions each week).

Whilst the proxies may seem relatively inexpensive, they are based upon (a) a partially subsidised service and (b) interventions that require limited additional resources (c) activities already up and running. They do not include the training and development costs of professionals.

Perhaps more realistically, the annual cost of dementia memory service in 2005/6 was estimated by the NHS²⁴ as being in the ranges outlined in the following table.

Service	Mild dementia, community	Moderate dementia, community	Severe dementia, community	Dementia in residential care setting
NHS	£2,508	£2,430	£2,639	£1,334
Social services	£4,935	£6,224	£7,738	£378
Informal care	£9,246	£17,223	£27,096	£938
Accommodation	£0	£0	£0	£28,646
Total cost	£16,689	£25,887	£37,473	£31,296

Figure 3: Comparator costs

These figures illustrate the high level of costs associated with programmes for older people. Whilst no one can argue that absolute direct comparison is possible, the cost of the Arts in Care Homes programme per resident would, by contrast, seem to be relatively modest. Similarly, the Dementia Memory Service in London has been estimated to cost between £1,000 - £1,200 per client per annum²⁵.

In the view of the evaluation team, the Arts in Care Homes programme has offered good value for money. Its findings have established a baseline for further work, created a nationwide body of knowledge, and assured that a generation of care workers and artists involved with three of the projects have benefited from the acquisition of new skills and experience at a very high level. The benefits to residents, whilst difficult to associate with numerical value, have clearly been described positively through the narratives we have collected. In the words of one interviewee: “*The project may seem expensive, but its value is priceless*”.

²⁴ NHS Healthcare for London, Dementia Services Guide: <http://bit.ly/2id1B4R>

²⁵ *Unit Costs of Health and Social Care 2016*, University of Kent, Personal Social Service Research Unit.

11. Learning from the programme

We learnt so much about our residents and their families. The whole programme from start to finish was memorable and something that will continue to be talked about for many years.

Care home survey respondent

Whereas the many excellent examples of the arts improving health and wellbeing suggest a resoundingly positive picture, it is essential to stress that good quality arts activity within health and social care is far from universal in England or the UK.

All Party Parliamentary Group on Arts, Health and Wellbeing, July 2017

ARTS IN CARE HOMES AS ACTION LEARNING

It cannot be said that any of the Arts in Care Homes models presented a best approach. Each had different strengths and these were applied in ways that worked effectively for the particular partnership. Whilst it was unfortunate that one of the projects closed before there was a chance for full implementation, it at least identified the weakness of a market-led model at a time of austerity and revealed that such models require considerable development before care homes see the value of investment in arts programmes.

There is little doubt that the Arts in Care Homes programme has contributed significantly to a body of arts knowledge that embraces residential living, ageing and dementia. Although training and induction was a necessary part of the programme, the experience of hands-on delivery and working in partnership with people who had a different perspective on the sector was invaluable. On a practical level it allowed for the development of strategies and approaches that were of maximum benefit to residents and which were shared and reviewed with peers and other professionals. This created a culture of support and sustainability – the programme provided a structure that enabled artists and care workers to learn through process. Mentoring, evaluation and feedback sessions were the places where experiences were shared, problems discussed and solutions found.

In this respect, the Arts in Care Homes programme has been both an influencer and intelligence provider for future funding and investment by both the Baring Foundation and the Arts Council.

CAPACITY AND GOVERNANCE

Arts organisations are small and sometimes vulnerable. Their funding base may be precarious and their business planning skills can be limited. The ability to recruit skilled

board members is a known issue in the arts, and where projects take place over a long period funders would be advised to more rigorously assess company structure (particularly in the areas of risk and liability) and experience of board members of recipient organisations.

Learning point: governance structures of organisations participating in major programmes should be scrutinised, with advice and support provided to address any identified areas of risk.

LEGACY PROJECTS

A critical measure of success for any programme is evidence of development beyond its planned lifetime. The £1.5m Celebrating Age programme has already supported City Arts, and it is anticipated that other applications from partners will result in the near future. Conversations in Cornwall have made it clear that the Arts in Care Homes programme has enabled planning that has brought together a number of the partners to work together in the future.

City Arts have also successfully secured funding from the Nominet Trust²⁶ and the Baring Foundation for the development of the Armchair Gallery project, which will be rolled out through Age Friendly cities. City Arts have successfully bid for funding from Celebrating Age and their project can rightly be considered to be a legacy of Arts in Care Homes.

The Courtyard in Hereford, lead partner for the *Making of Me* project and contributor to cARTrefu in Wales, has indicated the benefits of developing a mentoring model for artists that can be further amplified through its in-house projects for older people.

Arts partners in Cornwall are committed to reviewing their key audience development plans and will maintain activity in this area of work. A new regional CIC – Arts Well – has emerged in response to the programme and will provide creative services in the arts, health and ageing sectors. The consortium established as part of the programme may well continue, but in a modified form.

Learning point: the value of legacy projects should be captured by tracking over time to provide evidence of long term impact within both the care and arts sectors.

GEOGRAPHIC DISTRIBUTION

It has been apparent throughout the programme that the geographic spread of arts partners was in some cases too great. This created problems of collaboration and communication between partners and added significantly to the travel times and costs of

²⁶ The Nominet Trust was set up and is funded by Nominet, the world's largest country code registry responsible for managing and running over 10 million domain names that end in .uk.

artists working in care homes. There was a general recognition throughout the programme that regular face-to-face partner meetings were extremely beneficial, and that these were more difficult to arrange if the distances involved were too great. A consortium that covers a smaller footprint is likely to have a much higher level of shared interest and local sector intelligence, which in turn are likely to lead to longer-term projects and collaboration on joint funding bids.

Learning point: National programmes should identify the optimal geographic footprint for regional partnerships and networks.

SHARED EXPERIENCE

The arts partners and artists we interviewed generally considered their future approach to working with older people would not necessarily be confined to working in care homes. Transition to full time living in a care home may involve a number of agencies and organisations, and it was recognised that there are many approaches through day centres, health centres and work in participants' homes that could be fruitful.

Learning point: The connectivity of the programme with the wider areas of participatory arts practice and the relevance of the social model of disability have been noted in this evaluation. Opportunities for dialogue between artists and across art forms will undoubtedly be beneficial in this context.

Arts with older people, both within and outside care homes, should be considered porous. Expertise in this area is something that can be gained by artists from many different backgrounds, and every effort should be made to ensure all artists are welcome.

Learning point: The potential for a major national/international conference at which the learning of the Arts in Care Homes programme can be widely disseminated should be included in future planning

SUSTAINABILITY

A number of champions in the care sector have emerged in the course of the programme. April Dobson of the Abbeyfield Society is an advocate for creative work in care homes and has indicated she will seek to identify strategies and use of existing resources to continue with the work in some form. Witnessing the impact in practice is powerful, but arguing for and proving the value for money remains a challenge, particularly when overall care budgets are squeezed ever tighter.

Sustainability and geographic reach were two key aims of the Arts in Care Homes programme. The assumption was that working with larger care providers, with senior level endorsement would help embed practice and secure budgetary commitment across

a group of homes. In reality, even with creative champions, large care home groups with thousands of staff and residents and hundreds of properties, still largely see the arts as a minority interest or optional luxury. Where there are champions, budgetary constraints often restrict opportunities for well-resourced high quality arts and these still need to be funded by outside sources.

Learning point: The significant deficit in relevant skills and staff time within the care sector will require the arts sector to provide leadership on applications for external funding. The Arts Council could support further targeted capacity building of the care sector through Celebrating Age and other funding streams.

DATA

This evaluation is primarily based on narrative. The quantitative data we have analysed, whilst necessary and informative, does not fully describe the reality of the Arts in Care Homes programme. Consequently we have looked for trends and themes through experiential stories, impressions, qualitative feedback and survey responses. These have been invaluable in providing a true picture of programme.

Learning point: Quantitative analysis was at times frustrated by inconsistent data, which underlined the need for reliable and regular data collection throughout the lifetime of a major programme. Data collection processes should be transferable and not reliant on individual staff members or particular organisations.

The development of an evaluation framework at the outset of the programme is essential. It should provide clear aims and objectives linked to tangible measurement processes. Data collection should be structured to ensure it is not onerous or complex and appropriate training and guidance provided at the very beginning of the programme should be seen as essential. Given that the programme was national and involved many partners, a universal data collection tool coupled to a secure online platform would have been invaluable.

Learning point: Future programmes could identify key outcomes for measurement at development stage built into a headline evaluation framework, to be shared with partners and populated using accessible and transferable data collection systems.

LOCAL EVALUATIONS

The local evaluations have provided important insights into the individual projects. Their variation in approach and methodology has, however, resulted in a degree of incompatibility. In an ideal world each individual evaluation would have followed a similar format and produced data that could be integrated into the national evaluation. In reality, two of the evaluation programmes were, in fact, HE research projects that followed a particular line of enquiry. Whilst these were undeniably of value, they did not always read

through to the national evaluation.

The most comprehensive local evaluation was provided by *Home Service* in Cornwall, primarily because it did not use a specific research question and was focused on evaluating the outcomes of the programme overall, in line with the national evaluation.

Learning point: If national programmes are to use local evaluations, a common format, approach and methodology should be agreed from the outset and there should be a clear distinction between evaluation and research. Research programmes should be clear as to the proposed outcomes and the ways in which they connect to wider evaluation processes.

THE ARTS AND CARE SECTORS WORKING TOGETHER

The focus of the Arts in Care programme was to build partnerships between artists, their organisations and care homes. Whilst this approach has been validated by the project, there remains a strategic gap in policy and strategy. For future programmes to be increasingly effective, there must be a series of shared messages from the senior leadership of both sectors.

The Care Quality Commission has increasingly emphasised the importance of ‘meaningful activity’ and connections to the wider community. Demonstrating this person centred approach to improving quality of life by care home groups and individual homes can significantly increase their CQC rating.

There was a shift in understanding in the care homes that art isn't just occupational therapy.

Arts organisation survey respondent

High level discussions should now take place between the Care Quality Commission, the Baring Foundation and Arts Council England to explore the ways in which the experience and learning of the Arts in Care Homes programme can be disseminated throughout the arts and care sectors and embedded within care home practice in ways that impact upon CQC assessments.

Learning point: The value of the programme in creating a more person-centred approach to care was raised consistently throughout the programme. Development of this area presents an opportunity to strengthen cross-sectoral collaboration and embed creativity in measurements of success in the care home environment.



Print making during an Armchair Gallery session. Photo courtesy of City Arts/Kate Duncan.

PRAGMATICS

Whilst high-level policy-driven thinking is necessary in the longer term, care homes need practical strategies to engage with arts organisations (and vice versa). Resources, skills and experience are all relevant in this context, and these need to be accessible at the individual care home level.

Learning points: there is immediate potential for:

- Dissemination of funding guidance and information to care homes (initially those involved in the programme), with an explicit encouragement to build fundable, sustainable partnerships and programmes.
- A simple online toolkit of advice for care homes and activity co-ordinators – preferably hosted by the CQC or a national care organisation. It would provide basic information as to the best ways of working with artists and arts organisations and identify the resources, skills and spaces required to maximise the benefits.
- Support for skills development at a local level, delivered by care homes and artists working in partnership on a continuing basis. Current projects and programmes for work with older people have the potential to provide training and learning for care home staff and artists.
- The development of a voluntary mentoring network for both artists and care workers would allow for CPD on an individual basis.

IN CONCLUSION

The Arts in Care Homes programme was a major undertaking for both Arts Council England and the Baring Foundation. It demonstrated the urgent necessity for the development of this specialist area, revealing both its value and its challenges. The reach of the programme extended far beyond the immediate activities of the artist and the care worker to illustrate some of the deeply problematic social, health and demographic issues that the nation is facing in the 21st century.

The programme has shown that the work of artists in care homes should be considered a necessity not a luxury – an essential element of a person-centred care home culture that has the wellbeing of every resident at its heart. If the growing army of older people with significant care needs are to have a meaningful place in society, their imaginative, creative and playful potential must be recognised, resourced and celebrated.

Appendix 1: Programme aims

The original aims from the guidelines:

- encourage residential care providers in partnership with arts organisations to commit to and invest in on-going programmes that give residents access to high quality arts experiences;
- establish a series of sustainable, exemplar, programmes of arts and engagement activity giving older people in residential care access to a wide range of quality arts experiences as audiences and participants;
- showcase artistic excellence in residential care settings and stretch aspiration for the range of arts that residents can access and experience outside of the care setting eg visits to local arts venues and events;
- develop tools and resources for more residential care providers to adopt ongoing programmes of arts engagement activity and to provide practical support for them to identify appropriate artists and local arts opportunities;
- support the professional development of residential care staff to increase their confidence to deliver arts engagement programmes in their care settings
- support the professional development of artists to create collaborative arts projects with older people, their carers and the wider community;
- through documentation, evaluation and dissemination stimulate debate and share learning about approaches to engaging older people in care in the arts and inspire others to develop best practice;
- demonstrate the role of the arts in providing a voice for older people and bring local communities and people in care homes closer together.

Appendix 2: Literature review

An evidence review of the impact of participatory arts on older people, Baring Foundation, 2011.

Arts audience insight, Arts Council England, 2011.

Creative health: The arts for health and wellbeing, All Party Parliamentary Group on Arts, Health and Wellbeing Inquiry, 2017.

Creative homes: How the arts can contribute to quality of life in residential care, Baring Foundation, 2011.

Current prevalence of dementia, depression and behavioural problems in the older adult care home sector: the South East London Care Home Survey, R Stewart et al, *Age and Ageing*. 44 (5) (2014).

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Appendix 3: Consultees

Phil Cave, Director Engagement and Audiences, Arts Council England

Dave Cutler, Director, The Baring Foundation

Kate Organ, Creative Consultant and Co-ordinator of first phase of Arts in Care Homes.

@Home, Yorkshire

Anni Raw, Consultant Evaluator

Deborah Munt, We Do

Home Service, Cornwall

Jane Sutherland, Director, Creative Skills

Jayne Howard, Director, Arts for Health

Kirsty Cotton, Hall for Cornwall

Oliver Jones, Creativity Works

Cat Gibbard, Newlyn Art Gallery and The Exchange

Marilyn Tucker, Wren Music

Amanda Harris, Keap – The Story Republic

Eleanor Jubb, Evaluator

Imagine, Nottingham

Kate Duncan, Director City Arts

Sharon Scaniglia, Principal Arts Officer, Nottingham City Council

April Dobson, Head of Dementia Innovation, The Abbeyfield Society

Lesley Garrett, Business Manager, North Division, The Abbeyfield Society

Anne Marie Grear, Activity Co-ordinator, Millbeck House, Abbeyfield Care Home

Susan King, Director Eastgate Care Homes

Charlie Swift, Activity Co-ordinator, Sycamore House, Abbeyfield Care Home

Catherine Hocking, Nottingham Lakeside Arts

Fiona Buffini, Nottingham Playhouse

Zoe Sussmeyer, City Museums and Art Gallery

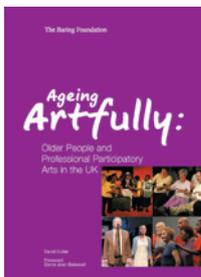
Heather Hollins, Relationship Manager, Arts Council England

Justine Schneider, Professor of Mental Health and social Care, University of Nottingham

Emma Broome, PhD student, University of Nottingham

Resources on creative ageing

All resources can be found on our website at www.baringfoundation.org.uk



Ageing artfully: older people and professional participatory arts in the UK (David Cutler, 2009)



Living national treasure: arts and older people in Japan (David Cutler, 2015)



A new form of theatre: older people's involvement in theatre and drama (Kate Organ, 2016)



West Yorkshire Playhouse Guide to Dementia Friendly Performances (2016)



Growing the creative ageing movement: international lessons for the UK (Alice Thwaite, 2017)



The role of local authorities in creative ageing (David Cutler, 2017)



Late opening: arts and older people in Scotland (Andrew Eaton-Lewis, 2017)



Dutch old masters – and mistresses: creative ageing in the Netherlands (David Cutler, 2017)



Towards the end: The Baring Foundation's Arts and Older People Programme 2010-2017 (David Cutler, 2017)



Creative ageing in Germany: the view from North Rhine-Westphalia (Harriet Lowe, 2017)

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