International News

CASCADE – Community Areas of Sustainable Care And Dementia Excellence in Europe

An innovative new EU project called CASCADE, has successfully received €9,295,278 funding to find creative ways of enabling communities to live well with dementia in the United Kingdom, Belgium, the Netherlands and France.

In the EU, the number of people over the age of 65 with a new diagnosis of dementia will rise from 18.2% to 28.7% by 2080, creating an explosion in demand for elderly care services, which is not being met. Currently, patients are often ‘parked’ in expensive hospital beds due to there being no suitable local alternative. In total, dementia services cost the EU €113bn per annum. Three of the four countries in the CASCADE partnership have higher than average dementia rates. To avoid overwhelming the current health services in place, new approaches are needed for elderly/dementia care across all ages that apply to different cultural and social settings, which crucially must be financially sustainable.

So far, new developments have focused on removing people living with dementia to a safe place, rather than providing free continuous care that enables them to stay in their own home for as long as possible. The challenge then is to provide sustainable programmes of care support in local communities centered around people.

Uniquely, this will be tested via existing state owned buildings. The facilities created will provide short-term respite and longer-term care which will fully engage with the local community. They will also be the basis for passing shared learning and cross-border excellence in dementia care for the future.

This approach will be applied widely and play a significant role in addressing the increasing demand for care. The outcome will be a step-change improvement in elderly/dementia care in the 2 Seas area, allowing people living with dementia to stay in their homes for as long as possible. CASCADE will recognise that dementia is long-term and that a person’s needs, on day one of diagnosis, will be very different to their needs 20 years later and it will create a model that provides appropriate care at every point.

In the first instance, 50 new beds across two countries for older people and people living with dementia, will be created and freely available. Instead of having elderly/dementia care villages, it will look at more community based care houses in residential streets. These will maximise their independence and be responsive to their changing needs.

So far, small scale ‘guesthouses’ have been trialled in the Netherlands, which has established a market need. These will be expanded further as part of the project. Guesthouses provide short-term care for the elderly in a hotel-type setting as a step-up to, or step-down from, hospital stays.

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CASCADE will evaluate this model where currently there is only anecdotal evidence showing high patient satisfaction with 85% to 90% occupancy rate. CASCADE will combine and scale up these pockets of excellence, to create new methods of service delivery for the provision of elderly/dementia care and support people to live well in therapeutic communities rather than hospitals.

Carolyn Jackson and Dr Stephen O’Connor from the England Centre for Practice Development are the evaluation leads for this project. Carolyn, Director of the Centre said: “This project provides an excellent opportunity to learn from the best practice across partner European countries. It will help us to develop new models of care and new systems and business models for an inclusive approach to care, to enable communities to live well with dementia.

“This social innovation project aims to develop a financially sustainable approach to elderly/dementia care that can be replicated across the 2 Seas area and potentially further across Europe. We will be using existing state owned facilities to provide short term respite and longer term care, which will fully engage with the local community.

“This approach should also help reduce the strain on hospital beds and increase the quality of care, making it more appropriate to their needs. At the same time, it will also create a better living environment and give them more independence. The learning gained from delivering this approach will create a centre of excellence, which could ultimately improve people’s lives and save healthcare authorities money.”

The programme will see the construction of two new facilities for the elderly and for people living with dementia in East Kent and Medway, and will create a Centre of Excellence for people living with dementia across the partner regions. It will provide training for 2500 people, care for 2700 people and an anticipated cost saving of €11.6m based upon the reduction of bed blocking in hospitals.

The partners include:

- The Health and Europe Centre (Lead Partner - UK)
- East Kent Hospitals University NHS
- Zorgnet Icuro (BE)
- University of Lille 3 (FR)
- Tourism Flanders
- Residential Care Holy Heart (BE)
- ZorgSaam (NL)
- La Vie Active
- Flemish Expertise Centre on Dementia (BE)
- Flemish Minister on Wellbeing, Public Health and Family Care
- Medway Community Healthcare CIC (UK)
- Foundation Trust (UK)
- England Centre for Practice Development, Canterbury Christ Church University (UK)
- ZorgSaam (NL)
- Emmaus Elderly Care (BE)
- HZ University of Applied Sciences (NL)
- University of Lille 3 (FR)
- La Vie Active
- Flemish Minister on Wellbeing, Public Health and Family Care
- Flemish Agency Care and Health
- Tourism Flanders

Further details can be found at:
- www.interreg2seas.eu/en/CASCADE

New International Dementia Care Publication Includes Contributions From Centre Staff

A new publication for those caring for people with dementia in nursing homes edited by Dr Sandra Schüssler and Professor Christa Lohrmann from the Institute of Nursing Science at the Medical University of Graz (Austria) contains three chapters written by Faculty staff and associates of the England Centre for Practice Development at Canterbury Christ Church University. The book, Dementia in Nursing Homes, has been specifically written for care home staff and has contributions from leading experts in the field from a large number of countries. Dr Stephen J. O’Connor has contributed a chapter on end of life care in dementia and a second, co-written with the owner of local domiciliary care provider Inchwater Home Care and Fellow of the England Centre for Practice Development Dr Paul Watts focuses on communication in dementia. Senior Lecturer John Gilmore from the School of Nursing has also co-authored a chapter on delirium in dementia with Dr Kathryn A. Weigel from the Cecily Martin Luther University in Halle-Wittenberg (Germany), The NHL University of Applied Sciences (Netherlands), The Chamberlain College of Nursing in Illinois, The Santa Rosa Junior College in Sonoma (USA), and the German Centre for Neurological Disorders in Bonn (Germany).

The book is available to order now direct from the Springer website:
International Fellowship Scheme Continues to Grow

The international fellowship scheme which was launched in the spring of 2016 continues to grow with 36 individual fellows and six organisational fellows to date.

This international community of practitioner researchers enables us to focus on collaborative participatory research, development and innovation that directly benefits person-centered safe and effective care for patients and service users. Collectively this scheme enables thought leaders and social entrepreneurs to be more influential in how we demonstrate and measure these improvements in a way that has the greatest meaning to patients, carers, healthcare providers and commissioners, shaping the quality of future health and care services, influencing policy and informing professional practice. The fellows have held a series of meetings and workshops in various formats allied to project work and many will be supporting the VibrantHealth17 Summit this summer.

Details can be found at:

This scheme complements the Visiting Scholars network comprising Visiting Professors, Readers and academic lecturers.

Visit To Limerick – Experience Based Co-Design Masterclass

Kim Manley has been invited by International Fellow Deirdre Munro to facilitate a workshop in Limerick in May.

The visit to Limerick University involves a presentation about how to co-create shared directions and a short workshop modelling this approach with midwives who are interested in exploring how to take forward support for socially excluded mothers to help them with breast feeding.

The workshop is built on the success of a world café event supporting innovation in midwifery practice with mothers and grandmothers who are recognised as influential in supporting good breast feeding practice.

Supporting The Development Of Nursing Curricula At Berlin Charité University, Berlin

ECPD staff members Professor Kim Manley CBE and Dr Stephen J. O’Connor will be paying a visit to the Institute of Health and Nursing Science at Berlin Charité University from the 7th to the 9th May 2017 to deliver a masterclass to PhD and MSc students on ‘Practice Development in Health Profession’s Education’ as part of an ongoing project to support the development of a national pilot undergraduate nursing curriculum in Germany.

The masterclass will cover questions such as ‘what is practice development?’, ‘what is the difference between practice learning and practice development?’, and ‘how can faculty staff, clinical teachers, practice mentors and preceptors help to develop awareness of practice development approaches in undergraduate nursing curricula?’

The masterclass builds on a successful curriculum development workshop delivered by Dr O’Connor in 2015, and the successful application by the Institute of Health and Nursing Science at Berlin Charité University for federal funding to develop and deliver one of Germany’s first undergraduate nursing programmes.
Olive O’Connor is a social entrepreneur whom has undertaken extensive national research with patients, carers and a wide range of health providers to develop an innovative personal health record system, called the MediStori.

MediStori is a diary for patients and their carers to keep track of medical history, treatments, appointments and medications all in one place. It aims to provide the sustainable monitoring of a person’s health throughout life and aims to connect the gaps in healthcare, which exist mainly because of people working in unsustainable silos in design, development and implementation of health care services.

Her innovation has been driven by her practical need to manage complex chronic conditions at home in the family, as both a patient and carer - through caring for her three children each have had complex conditions, her father who had 22 different prescribed medications, her husband who had a stroke at the age of 42, and her own complex cardiac and arthritic conditions.

This collaborative project has been supported by the Health Services Executive in Ireland, the Irish Pharmacy Union (IPU), An Taoiseach, Mr Enda Kenny and the Clinton Global Initiative in the USA, to name but a few.

The key to the success of the positive outputs of the research, were not just through it as a product – but through the way in which it was given to patients at the point of care. This approach has paid off when she won the backing of the Dragons Den Ireland which aired on RTE on Sunday evening to deliver her MediStori nationally to patients in a wide variety of settings through local pharmacies, which will enable people who are looking for access to similar support to manage their long term conditions more effectively and independently at home. It is also available online.

Olive is an international fellow of the England Centre for Practice Development in recognition of her passion to drive, promote & educate all stakeholders on the importance of proactive health and effective sustainable collaboration in health care environments, using practical tools and training.

She has won recognition for being one of JCIs 10 most outstanding young people in Ireland, was shortlisted for the Virgin VOOM business awards in 2016 and selected in the top 10 out of 10,000 women to showcase her work at the Clinton Global Initiative by Aroyga World

Olive has qualified through Stanford University as a Self-Management Facilitator of Chronic Disease and trained with NALA in literacy.

Olive is a patient reviewer with the British Medical Journal and has recently been awarded as a Fellow in Quality Improvement & Patient Safety in Healthcare with ISQua as well as starting a degree course in Community Leadership. Olive has sat on over ten national projects within the HSE, and is currently the team ethical governance lead of the globally recognised World Health Innovation Summit Federation.

You can read more about Medistori at:

www.medistori.com
https://youtu.be/FDXfO5v3YdA
www.linkedin.com/today/author/0_0zpkEi4x2Fl2gzzpGCzqgI

Read about Olive’s ECPD fellowship at:

This scheme complements the Visiting Scholars network comprising Visiting Professors, Readers and academic lecturers.
ECPD Director becomes Global Ambassador for Education and Research

Carrie Jackson, Director of the ECPD, has accepted a role as ambassador for Education and Research with the World Health Innovation Summit Federation (WHIS).

WHIS provides a global platform for countries to openly share ideas and work together to discover solutions that improve health care for all. The initiative was launched in March 2016 and now has programmes running for WHIS Kids (Health & Wellness for the next generation), WHIS Seniors (Caring for older people to improve quality of life) and WHIS at work (healthy workplace cultures that manage workplace stress). All the programmes support communities, while looking for solutions to ease pressure from our health and social care services through prevention.

Carrie said: “I am delighted to be an ambassador for Education and Research with WHIS. The ECPD shares a commitment to WHIS values. We are committed to working collaboratively with people to co-produce sustainable solutions to some of the health and wellbeing challenges we face in society today. We achieve this by working directly with the public, practitioners, commissioners, policy makers and a wide range of stakeholders to connect people’s experiences, creativity, ideas and resources; to co-create a blueprint for quality improvement and change in our communities.

“We our research is underpinned by a commitment to action, working with questions that are derived from everyday experiences about what matters most to people. The approaches we use are very systematic, and our work is underpinned by a commitment to sustainable change and transformation so that people and services are developed from within as part of the research journey.

“Facilitating the learning and development of the current and future workforce is a very important part of this journey through empowering the development of clinical and systems leaders who will be capable of promoting integrated ways of working in the future to deliver services that look very different to those we are familiar with today. This means that people need to really understand and become skilled in creating the conditions for effective workplace cultures where everyone can flourish and be the best they can be in order to deliver high quality care and services that make a difference to people’s lives and experiences”.

Developing And Implementing An Integrated Approach To Facilitation Across The University And Partner Organisations

The only international interdisciplinary facilitation standards that integrate learning, development and improvement in health care were developed from a Delphi study conducted by the England Centre for Practice Development (Manley et al 2016). There is an increasing focus on how these standards can support integrated working and new models of care and roles. Facilitation in this context is used to embrace all related roles such as clinical supervisor, preceptor, mentor and coach. The Faculty of Health and Wellbeing in response to the needs of workforce partners is committed to ensuring that there is a single facilitation framework to support the development of workplaces for learning, development and improvement as well as supporting facilitators of new roles such as apprenticeships, advanced level practitioners and clinical systems leaders. The facilitation standards provide an ideal opportunity to build an integrated approach across the university and partners. To support staff working in the faculty a number of workshops on facilitation are being provided by the centre.
New Collaboration Supporting Implementation Scientists In Germany

The team will be visiting the Hochschule, University of Applied Sciences in Osnabruck, Germany in May to work with Professor Andreas Buscher and a team of implementation scientists in The German Network for Quality Development in Nursing. The collaboration supports the implementation of national quality standards for nursing care in all care settings in Germany. The focus of the collaborative workshop will be on Practice Development and Implementation Science. The team have been working together to develop a commentary on the field which will appear in the International Practice Development Journal in May 2017.

Vibrant Health Summit 17 - Building Sustainable Community Health And Wellbeing Together
Thursday 20th & Friday 21st July 2017 – Augustine House, Canterbury

Summit Themes:
1. Celebrating examples of where co-production for new models of care and community health and wellbeing have been done well and why to inspire you to take action yourself.
2. Learning as a summit participant how to take action (learning to think and learn differently).
3. Mobilising to collective action (revolution) - Innovating the innovation collectively.

The summit provides the opportunity to generate knowledge from our own practices and lived experiences, sharing celebrating and appreciating where things have been done well, understanding what strategies for change work for whom, why and in what circumstances, and co-designing new models based on our experiences for the future.

It provides an opportunity to hear and share stories from the margins, often from invisible parts of our communities, focusing on what really matters to people. Understanding how people act individually or collectively as catalysts for change is really important as often this is driven out of adversity or experiences that have been life changing.

The space provides opportunity to listen, learn, and understand and action change.

Key features will include:
- Opportunities to network with a wide range of participating groups, individuals and organisations
- Inspiring presentations and stories by entrepreneurs and innovators
- Live Lab working groups to co-design creative solutions together
- Festival of Ideas to celebrate and understand impact of research and innovation in practice
- Panel discussions - your chance to ask important questions
- Opportunity to work with provocative questions around issues that collectively matter to audience participants
- Learning from the lived experience of others through film, stories, creative practices
- Evening social events and presentations
- Twitter Disco raising funds for three charities - Cavell Nurses Trust, British Lung Foundation and the Sepsis Trust

For full details and ticket sales please visit:
http://www.canterbury.ac.uk/health-and-wellbeing/events/vibrant-health-summit.aspx
National NHS Evidence Review Supports New NHS Improvement Guidance For Managing Safe Caseloads In District Nursing Services In England

An evidence review by the England Centre for Practice Development (ECPD) for NHS Improvement has helped to form a new improvement resource that aims to standardise safe, sustainable and productive staffing decisions in district nursing services in England.

All 16 recommendations made by the ECPD within the evidence review have been adopted. The recommendations aim to improve the way in which workforce planning, research, education and innovation work together, to create a workforce that is able to support the delivery of new models of care in community settings across the country.

The improvement resource is designed to support staff in district nursing services, from the team leader of the district nursing service to the board of directors that are involved in establishing the numbers of nurses needed to deliver care. It is closely aligned with Leading Change, Adding Value framework launched by the NHS England in 2016, for “every nursing, midwifery and care professional, in all settings, (to) use to ensure that we achieve the best quality of experience for our patients and people, the best health and well-being outcomes for our populations, and use finite resources wisely to get best value for every pound spent”.

The review and recommendations by the ECPD focused on one of the commitments of Leading Change, Adding Value, that states: “we will have the right staff in the right places and at the right time” to achieve the triple aim of better outcomes, better patient and staff experiences, and better use of resources.

Carrie Jackson, Director of the England Centre for Practice Development said: “We have been delighted to work with NHS England and NHS Improvement to develop evidence based resources that can inform the strategic work of the National Quality Board.

“In particular working collaboratively with Professor Alison Leary at London South Bank University, Dr Jane Ball at Southampton University, Professor Vari Drennan at Kingston St George’s University and Dr Crystal Oldman, Chief Executive at the Queens Nursing Institute.

“It has been a pleasure to develop some practical resources that can be useful to district nursing services, managers and policy makers across England. We hope that this resource will enable high quality evidence informed care to be delivered by a well skilled workforce that is supported to develop and lead the future models of care required to underpin the 44 Sustainability and Transformation Plans across England”.

You can read the resource to help standardise safe, sustainable and productive staffing decisions in the district nursing service here.

www.improvement.nhs.uk/resources/safe-staffing-district-nursing-services/


Contributions To The Kent & Medway Sustainable Transformation Plans

The research undertaken by the England Centre for Practice Development about how to transform the urgent and emergency care workforce, funded by Health Education England, Kent Surrey and Sussex between 2014 & 2015 is now being rolled locally to inform the Sustainable Transformation Plans across Kent and Medway. Following a successful pilot of a clinical systems leadership post in rheumatology in Deal and the development of a new model around three tiers of care, service competences have been identified to reflect the contribution of all to the service across the health economy. The approach used has been one of co-creation with stakeholders. The three Tiers will enable health care need to be more closely matched to the skills of the workforce with Tier 1 led by General Practitioners (GPs) and their practices, Tier 2 led by consultant specialist nurses, midwives, Allied Health Professionals (AHPs) or paramedics (as appropriate) and Tier 3 led by medical consultants who will focus on the most unstable and complex patients. The patient pathway rather than the setting is at the heart of the competence framework. The competences resulting identify the skillset required from the service linked to the level of the NHS career framework at which these skills would be expected rather than the discipline. These competences together with support from clinical systems leaders (another key recommendation in the research) will enable an integrated approach to care across the health economy to be embedded with opportunities to support the development and growth of the workforce up and across a career ladder through systems wide appointments and learning and development rotations.

Since the successful pilot in rheumatology the process of co-creation of tiers and competences within agreed shared purposes and implementation frameworks have been completed with respiratory and cardiac care and is currently being undertaken with emergency ambulatory care, Children’s services and Diabetes Services.
#HARTSofthepossible is a group of like-minded individuals with a common purpose to drive health research through and using social media.

HARTS stands for Health And Research Through Social-media

We believe the ultimate purpose can be achieved through seven strategic priorities:

1. To create social movements for change through building virtual communities and strong collaborative networks for researchers, practitioners, social media leaders and wider audience to enable the sharing of ideas, creativity, academic rigour and adaptability.
2. To develop and use swift analytics to engage all stakeholders to both achieve consensus and demonstrate impact at scale (Learning how to do it).
3. To use ambassadors, strong leadership and role-modelling to ensure communication and understanding through sharing our purpose and stories of impact.
4. We create tools and resources that can be used in multiple contexts over time (We review, adapt, change and adopt).
5. To link the social media research strategy to other national strategies and enabling endorsement and recognition by policy makers and professional bodies.
6. To use focused events to enable, inspire and educate others about the contribution, role and impact of social media in research.
7. To develop a funding strategy.

Our core values are that Social Media research through the #HARTS community should promote:

- Accessibility
- Collaboration
- Commitment/SERVICE
- Flexibility
- Critique/Critical Review
- Inclusivity
- Sharing

Visit the HARTS blog at www.hartsofthepossible.wordpress.com
Search and follow #HARTSofthepossible on Twitter – we would love to hear about your thoughts, your work and your experience.
This research study aims to identify the impact of a Patient Safety Collaborative model, developed by Kent Surrey and Sussex Academic Health Science Network (KSSAHSN) on safety culture, leadership, and quality improvement capability at the frontline. Eight acute NHS Trusts applied to be part of the project and four acute trusts were successful across the three counties. Each site acts as an independent case study and is supported by a principle investigator from the ECPD who works with local facilitation teams as they take forward safety initiatives.

Realistic evaluation and critical ethnography is being used to develop insights into what strategies are effective at developing a safety culture, quality improvement and leadership capability at the frontline.

Data collection embraces a number of methods that are used in practice development approaches, namely emotional touch points, observations of practice and claims, concerns and issues exercises associated with stakeholder evaluation. Data analysis is shared en-route with the project facilitators in the spirit of collaboration, inclusion and participation so that learning can be shared and acted upon throughout the project.

The project is at its midpoint and tentative theoretical insights emerging from the literature and the case study sites have recently been shared with participants in the project at a consensus conference.

Findings and insights from each case study will eventually be synthesised with themes emerging from the literature in July and the final report is due to be submitted in November 2017.

The need to grow advanced level practitioners across all disciplines was identified as a key recommendation research undertaken by the Centre in the Transforming Urgent and Emergency Care Together project and the SCQIRE project. Inconsistent expectations and practice across different disciplines and contexts was previously recognised in the region. Local transformation groups, commissioners, Health Education England, Kent Surrey and Sussex and the England Centre for Practice Development, as well as education colleagues in the university are working together to ensure that there is a single shared understanding about what advanced level practice is to guide ongoing developments and opportunities across different disciplines. Advanced level practitioners are recognised as being Masters prepared, and independent prescribers, with the full range of holistic assessment and diagnostic skills to make autonomous decisions consistent with the Tiers of Practice identified in the new Sustainability and Transformation Plans. A Master’s programme supporting advanced level practice across a number of disciplines is planned to commence in September at Canterbury Christ Church University informed by the work that Centre leaders have undertaken with the national advanced practice credentialing working party led by the Royal College of Nursing.

This action research study aims to reduce admissions to hospital and improve the quality of life for residents by focusing on polypharmacy, the culture of residential care homes and also system support. The project is co-led by Professor Kim Manley and Dr Yvonne Morrissey (Consultant Older People Physician) with Pharmacists, General Practitioners (GPs), community nursing staff and staff and residents in a residential care home in Romney Marsh in Kent. The project has a number of action cycles based around a series of workshops. The first workshop focused on helping all staff understand the number and range of medications that residents were on and how this influenced their quality of life positively and negatively. A number of quick reference resource sheets are being developed to support staff as a result of this workshop. A second workshop for staff as well as a workshop for residents and carers is planned to take place in May.
Canterbury Christ Church University Mentorship programme

ECPD Administrator - Anna Humphreys to undertake the Canterbury Christ Church University Mentorship programme.

Anna says;

‘CCCU support growing their staff by Organisational & Staff Development for both Academic & Professional Service Staff.

As part of my professional career development, I have chosen to undertake a mentorship programme in-house which begins with a workshop entitled ‘Introduction To Mentoring’, the aim being to introduce the knowledge and skills required to become an effective mentor.

Following the session, I hope to gain vital skills to help provide ongoing support to new staff when they are inducted into the institution by gaining an insight into the following areas:

- To recognise the skills & key features needed for establishing an effective mentoring relationship, and how this differs from coaching.
- To understand the diversity of mentoring roles at CCCU, and be granted access to the peer mentoring community by registration to the network.
- To learn to differentiate between models/styles or mentoring and know how to put these into practice in individual mentoring relationships/situations using Equality & Diversity principles.’
Latest Publications


- Bruty, L., Haas, M., Le Feuvre, E., Peisley, T., Royal, L., Wright, K. & Wright, T. (2017) ‘I would have been/ could be amazing: a social justice oriented visual art rejoinder to Whole Earth?’, Sustainability in higher education: challenges and opportunities, conference proceedings, Canterbury Christ Church University.


In Press


Symposium


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www.canterbury.ac.uk/ecpd