

# RIGHTS

Made Real in Care Homes

# Recognising, respecting and responding:

*promoting human rights  
for residents of care  
homes in Scotland*

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**North East Angus Care  
Home Improvement Group**

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## Introduction

# RIGHTS

## Made Real in Care Homes

**Rights Made Real in Care Homes** is an exciting project, funded by the Life Changes Trust and delivered in partnership with Scottish Care and the University of the West of Scotland.

The overall aim is to improve the quality of life of those living in a care home and to help support staff to not only recognise, but embed, human rights in their everyday practice.

The funding supported the development of seven creative and innovative projects and ways of working that will benefit people living with dementia and show others how to make rights real in care homes. All partners in the project are committed to ensuring that older people, including those living with dementia, have a right to maintain strong connections with family and friends, with their communities and with the things that matter to them regardless of where they live.

The Life Changes Trust invested £135,000 to support these seven projects across Scotland to promote the inclusion and participation of care home residents with dementia in a meaningful way. Scotland's new health and social care standards state that everyone in Scotland deserves to receive the care and support that is right for them. Each of the funded projects was designed to show how these standards can work in practice.

In order to showcase good practice in the care homes, particularly in relation to observing and promoting people's human rights, we have produced a collection of stories from the projects which show that adopting a human-rights based approach is not something people working in care homes should view with anxiety, but instead recognise that it is about building on many of the attitudes they currently possess and activities they currently practise.

The overall aim of the project and the stories is to inform and encourage workers in care homes across Scotland in their efforts to meet the new health and social care standards and provide care that recognises human rights, promotes people's dignity and demands only the highest-quality level of service.

**This story is from the North East Angus Care Home Improvement Group**

# This is normal life

## *North East Angus Care Home Improvement Group*

Ivan Cornford learned early in life that nothing should get in the way of aspiration.

*'I was brought up at the time of punk rock,' he says. 'So I believe you can do anything without the slightest bit of knowledge. I played in a band once and couldn't play guitar, couldn't even tune it, but that was our band.'*

Ivan brought this ne'er-say-die approach to a project focusing on promoting the human rights of residents in a group of care homes in northeast Angus.

Ivan works through Scottish Care and put the project together in the five care homes, all of which belong to different organisations within the North East Angus Care Home Improvement Group. Three remain with the project, two in Montrose and one in Brechin.

The project is looking widely at the human right of participation and how everyone can be supported to meet their full potential.

*'It's about assisting services to move towards developing participation and inclusion strategies that focus on individual needs,' Ivan explains. 'It recognises that no single process will provide a one-size-fits-all solution to the issues of participation and inclusion – a range of approaches will be needed.'*

A major part of the project will be to develop practices that do not require care homes to take on extra staff or bring in extra resources, or be asked to do anything unrealistic.

***'The focus is on changing the culture of care to embed the right to participation and inclusion in everyday work,' Ivan says. 'It will challenge the notion that participation and inclusion are add-ons to normal activities.'***

The project adopts the five headline outcomes of the health and social care standards as its principles.

*'We feel the principles about residents being included in wider decisions and recruitment and selection are particularly important for us,' Ivan says. 'We like those ideas, and we use them as a springboard to move into other areas.'*

An initial audit looked at how people were involved in all aspects of the homes, from activity to recruitment and selection, and in day-to-day and community decisions.

*'We found that levels of participation were quite limited and depended on individuals' abilities and capabilities,' Ivan says. 'All of the homes involved residents to some degree in recruitment and selection, for instance, but it was restricted to residents the staff felt had the capability to take part in interviews. Staff couldn't see how they could involve everybody in the process of recruitment and selection, or get beyond the issue of capability.'*

Based on findings from the initial audit, the project currently is drilling down to look at three specific areas for improvement – staff supervision, staff recruitment and care planning. Each care home is focusing on one of them, defining how they can support full involvement for as many residents as possible in that area. Ivan arranged workshops on improvement work to support the staff.

Residents' involvement in staff recruitment is a particular source of interest for Ivan.

***'Residents need to be involved in appraising the people who'll be looking after them,' he says. 'They have the right to be able to size up people's levels of caring and compassion. That is our starting point.'***

*'We were talking to some of the residents in one home about what they felt about the staff there,' Ivan continues. 'They said they liked them because they all had good manners. So that home is now thinking that this will be part of their person spec for job applications. The person spec is going to be designed by the residents – they like it when staff say please and thank you, so that's a criterion future staff will need to meet. It's simple things like this that the project is helping us to learn.'*

Even though the project is very much about human rights, it has a strong link – at least metaphorically – to gardening. Gardens have become something of a vehicle in the project to enable the teams to look at culture change more generally. This was accentuated by the experience of a garden design company Ivan invited in to support the project.

*'We asked a group that specialises in creating therapeutic garden spaces to come and speak to us about culture change,' Ivan says. 'The company told us about how they had been paid a lot of money to create new gardens in care homes. When they went back to revisit the homes six months after completion, they found the gardens hadn't been used. The doors to the outdoor spaces were still locked, so no one could get into them.'*

***'They realised that all their carefully thought-through work didn't matter unless there was culture change within the organisation. Somebody had to unlock the door and let the residents into the garden.'***

On another occasion, the company had wanted to help out a care home whose garden was full of weeds.

*'They asked the home if they could help,' Ivan recounts. 'But the staff said no – they needed the weeds. Why, the company asked, a bit bamboozled? Because the residents like to do the weeding, was the answer – no weeds, no weeding. And sure enough, later that afternoon, a resident was seen to go out into the space and start weeding.'*

The lesson from all this, Ivan believes, is that it's the culture of the home that is the most important element in determining the possibility of change. This extends to all aspects of how a home functions.

*'It's as if we need to have someone to come into our homes to look at them completely differently, almost like an alien,' he says. 'And then start talking to residents about what they like and don't like about the home and the staff, and how involved they feel in how the home is run.'*

Ivan's project is still in its relatively early stages, and he does not expect to see the full results of what has been learned from it for some months yet.

*'It's taken us about eight months to get to this place, and hopefully we will have a clearer idea of the outcomes in about six months' time,' he says.*

***‘Key learning so far has been about engaging with and starting conversations with residents, which was the focus of our first improvement workshop.’***

A second workshop with the organisation Ketso, which specialises in helping people to work together more inclusively and effectively to develop creative solutions to the challenges they face, and staff from Health Improvement Scotland will take place shortly. After this, Ivan and his colleagues will put their new learning into practice across the three chosen areas of focus.

*‘The really interesting question is about what’s stopping us from getting people as involved as they can be in recruiting and selection’, Ivan says. ‘Then we want to apply what we learn as widely as possible to help people be involved in different ways. It’s about throwing things at the issue to see what works and trying different options. That’s the bit we will come to next – it should be quite exciting.’*

And gardens will continue to play a part in how the project develops.

***‘What stops residents going out to the garden when it’s raining?’ Ivan asks. ‘Is it because they don’t want to get wet? Or are staffing stopping them because, well, it’s raining? Rain’s never hurt us. We just put on a coat and wellies and off we go. Someone can pick up an umbrella, walk out that open door and go round the garden. This is normal life. This is what it’s about.’***

## **Rights secured:**

✓ **Right to liberty and security**

*Article 5, European Convention on Human Rights*

✓ **“I am supported to participate fully and actively in my community.”**

*Health and Social Care Standards, Principles*

✓ **“I can maintain and develop my interests, activities and what matters to me in the way that I like.”**

*Health and social care standards, 2.22*

✓ **“I know who provides my care and support on a day to day basis and what they are expected to do. If possible, I can have a say on who provides my care and support.”**

*Health and Social Care Standards, 3.11*

✓ **“I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.”**

*Health and Social Care Standards, 4.19*

