

Update from the QNOAMHS Project Team

Welcome to our first electronic newsletter! Those of you who came to our QNOAMHS Annual Forum in November may remember the QNOAMHS Project team setting out our goals for 2018. Making our newsletters shorter, electronic and more regular was one of them, and this will hopefully be the first of many.

The start of 2018 has been busy for the project team. As many of you will know we have two new members of the team, and therefore they've been busy getting to know our members and committees. We've had two Accreditation Committees, in February and March, where the committee accredited 7 services. We've also welcomed 11 new members.

In addition to this we have started development on a short set of 'trust-wide' standards. We hope this will improve consistency in scoring when multiple services within a trust are visited, especially relating the policies and reviewing documentation.

Finally, we are currently preparing for our QNOAMHS event, "*Psychology Best Practice in Older Age Inpatient Wards*" which is to be held at the College in London on 16th July. We have very limited spaces remaining, please email robert.low@rcpsych.ac.uk if you would like to attend.

Welcome to the QMOAMHS!

- Kershaw Ward, TOPAS, Oak Tree and Beatrice Place of Central and Northwest London NHS Foundation Trust
- Hevlfryn Ward and Cemlyn Ward of Betsi Cadwaladr University Healthboard
- Pembleton House, Woodloes House, Ferndale Ward and Stanley House of Coventry and Warwickshire Partnership NHS Trust
- Willow Ward, Cambridgeshire and Peterborough NHS Foundation Trust

Congratulations – You're Accredited!

- Hauxley and Akenside Ward (Northumberland, Tyne and Wear NHS Foundation Trust)
- Amber Ward (Oxford Health NHS Foundation Trust)
- Ward 6 and 7 (North Staffordshire Combined Healthcare NHS Trust)
- Holly Ward (Greater Manchester Mental Health NHS Foundation Trust)
- Oak Ward (South Staffordshire and Shropshire Healthcare)

Where have we visited?

We have visited services in London, Lincolnshire, Essex, Surrey, Manchester, Somerset, Sunderland and Dorset.

Further visits are already scheduled for the year in Cambridge, Coventry, Birmingham, and Northampton.

Hearts and Voices – A Singing for the Brain Group within Older Adult Dementia Inpatient Care.

Woodlands Hospital provides two in-patient assessment and treatment for individuals with moderate to severe dementia with complex presentation (Holly and Delamare Wards), and also an Older Adult Ward for older adults with Functional Illness (Hazelwood Ward) all of the wards are part of a large mental health trust, Greater Manchester Mental Health NHS Foundation Trust (GMMH).

Increasingly, there has been a focus on the value of using arts as a mode of therapy to help with communication and social interaction across all areas of mental health (Skingley and Vella-Burrows, 2010). Wall and Duffy (2010) provide a review of the effects of music therapy for older people with dementia advocating “music therapy” has a specific role in improving the quality of life and experiences of those living with the disease.

Music is often the source of reflection and pleasure in the absence of any disease or ill-health condition. Singing is an activity that can bring people closer together, it is integral to our everyday life and the source of inspiration, jubilation, memories and entertainment (remember how the world felt on hearing Susan Boyle for the first time).

It is not unusual for the person with dementia to have lost the skills of communication but retain the ability to sing and remember lyrics from familiar songs. Memory may fail in many ways, but often a melody will be retained as a means to weave memories into a fabric of reality and touch uninjured parts of the brain, enhancing communication and leading to a more social life (Sorrell et al, 2008).

Music has been shown to create positive caring environments in which people with dementia can experience a rich pattern of cognitive and emotional reactions, in turn leading to periods of lucidity, recall and reminiscence (Alzheimer’s Society, 2010).

Singing for the Brain is an established phenomenon that is simple but effective in dementia care. Pioneered by the West Berkshire branch of the Alzheimer’s Society in 2003, the initial project has since been successfully replicated across many parts of the UK (Alzheimer’s Society, 2010).

Singing for the Brain has both physical and mental benefits. It exercises all the muscles involved in communication, helps improve breathing, combats depression and reduces stress. It stimulates the brain and challenges those taking part by introducing unfamiliar material, simple part-singing, singing in rounds and singing from memory.

Groups are friendly and informal with the social aspect being every bit as important as the health and wellbeing element. Perhaps most importantly of all,

by helping people to focus on what they can do, rather than what they can't, Singing for the Brain boosts confidence and gives people a much needed lift.

Woodlands Hospital since 2011 been fortunate to host a weekly Singing for the Brain Group across our Dementia Wards. This was the first group in the UK to be held within an acute mental health ward and funding was initially provided by the organisations 'Dragon Den' then latterly sponsored through Zurich Insurance.

Each session lasts for two hours and includes a relaxed welcome with refreshments and time for interaction and socialisation at the end of the group.

There is the use of a "greeting song" to welcome everyone by name and promote a sense of inclusion and participation and a "goodbye song" to end each session and wish each other well until the next session. Each session incorporates some tried and tested vocal warm- ups and breathing exercises that aim to strengthen the voice, ease tension and increase lung capacity.

The Singing for the Brain Leader will have prepared the song list, which will have an identified theme. Popular themes have been weather-related songs, colours, love and romance and animals. Topics have also emerged based on the seasonal time of the year with the emphasis promoting orientation in relation to time and person. Well-known songs are used to evoke verbal and emotional responses and it is key that staff who know the patient are part of the session to support anyone who may become upset or distressed.

Therefore each session consist of a range of patients, staff, volunteers and carers/relatives, and the sessions are held in the main dayroom space of the ward to promote participation both directly and indirectly.

Impact on patients and their carers/relatives

From an anecdotal perspective, the Singing for the Brain Project has provided an uplifting and joyous afternoon for those who participate. It has brought the ward community together as it is one of the few activities that includes the majority of the patient population irrespective of level of impairment and psychiatric symptomology. The group has enabled the more introverted and withdrawn patients to "come out of their shell" and had a positive effect on the patients mood and motivation.

Recovery Focused Care is always a difficult concept with an illness such as dementia that is progressive and as such viewed as a palliative condition. This project reaches out to those who are at the most acute phase of their illness and engages them and their relatives in an activity that improves their mood and overall wellbeing – which is the very essence of the recovery model. Singing emphasises what the person with dementia can do rather than what they can no longer do and as such underpins the concept of recovery.

It has long been recognised by the service that visiting someone with advanced dementia and complex behaviour whilst they are in hospital can be difficult for carers and relatives. Imagine a visit where the person cannot remember even the events of a few moments ago, are unable to communicate their feelings and

recognise the environment and also may not recognise you as a close family member. How distressing must it be to know that once you leave, your family member will not remember your presence and the content of your visit – what do you talk about and how can we as a service ensure that meaningful visiting times are preserved and enabled to take place?

The Singing for the Brain Project has enabled the service to aspire to promoting a “good visit” by delivering the Singing for the Brain sessions in conjunction with visiting times and encouraging the patient and their family/friends to participate in the activity together.

There have been numerous occasions where the memories triggered by the singing have led to couples having a dance. The sessions have therefore provided the vehicle for couples to recapture some intimacy and just witnessing the sheer delight on the face of both the person living with dementia and their spouse or partner as they embrace and take the floor, has been both poignant and delightful experience.

It is very often an enjoyable experience for all those involved and the sessions offer an opportunity for both the person with dementia and their relatives to come together with others in similar circumstances and provide a mode for interaction that is essential for those who are touched by dementia.

Gillian Drummond – Clinical Improvement Lead Nurse for Dementia and Older People

Introducing Ben and Gerry



Langworth Ward is part of Lincolnshire Partnership NHS Foundation Trust's Older Adult Service. It is an Assessment Ward for people experiencing complex needs related to dementia. In March 2016, we started an Innovation Project: The Personalised Sensory Toolkit, aimed at engaging people with more severe dementia in personalised, sensory activities in order to:

- Promote person centred care
- Assist in managing behaviours associated with dementia
- Provide a physical link to positive events and memories to aid communication and promote positive reminiscence
- Offer long lasting benefits that can be transferred to any setting following discharge
- Give focus to visits, improving the carer experience
- Enable education of carers
- Address the established focus on the medical model and lack of staff engagement in activity programmes

Building on our existing Life Story work, we piloted a range of interventions including themed rummage boxes, our Therapy Rabbits, Ben and Gerry, and enhancements to the environment such as a 1950's Lounge and a Gentleman's Snug. This enabled us to observe how each patient reacted to different stimuli to develop their individualised sensory toolkit. The toolkit is transferable to any setting and we have promoted the project in local care homes, at nursing conferences and student workshops, receiving excellent feedback. Ward Staff have positively embraced the new interventions and the approach is now fully

embedded into our care pathways. The impact of the project has exceeded our expectations; the use of restrictive interventions is 57% lower than our sister ward, falls resulting in harm is reduced, staff morale has improved and the project has been shortlisted for national awards. We are continuing to develop the project and intend to support our sister Ward to implement the changes. This has been a positive team project, involving all staff grades from housekeeper to manager with the interests of the patient at its heart.



Ward staff supporting 'Going Places' – a virtual trip that includes the tastes, sounds and images associated with different places such as France and Spain.

Patient-led Chutney Project

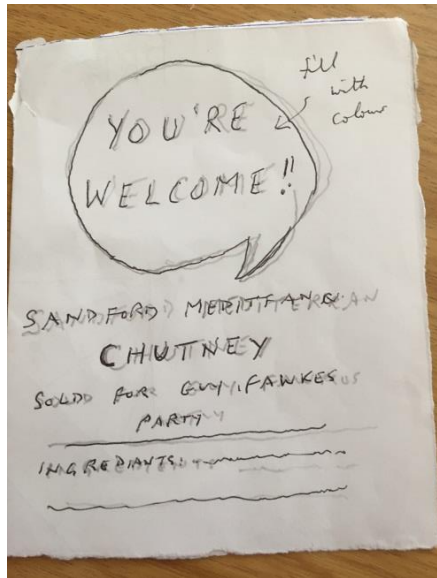
Sandford Ward at the Fulbrook Centre is part of Oxford Health NHS Foundation Trust and is a unit for male older adults with organic and functional illnesses. We follow the Vona du Toit Model of Creative Ability (VdTMoCA) which helps us plan and organise activities aimed at particular levels of abilities.

When we had three gentlemen who were assessed to be at the same level – passive participation - a 'chutney project' was planned which took place over four sessions. By using VdTMoCA as a guide, we were able to encourage the patients to lead a project and help improve their social skills by working together. During the first session it was explained that we wanted to raise funds for a ward firework party by making chutney. They were given a recipe book from which they chose a recipe and then decided they wanted to triple the recipe and wrote a shopping list.

Following shopping in a local supermarket to buy the ingredients, the third session was a morning of chutney making. This helped these patients to regain interest in the kitchen and to experience fun and enjoyment by working together.

We had a final meeting which was to decide how to promote and sell the chutney. The patients asked to have a stall at the ward's apple day and one of the group offered to design a poster which was used on the jars as well. The following day he came to the office with a poster he had designed which I typed for him, which he then edited before printing.

Through the project, the patients gained confidence in their own ability in the kitchen and they bonded as a group, continuing to spend time together until their discharge. They were very proud to have made a product which people wanted to purchase and were able to raise the money needed for the firework party.



Sandra Diesel, Activity co-ordinator