

Count us in!

social inclusion for people living in residential aged care

Report on the 2006-07 pilot projects



Count us in!
social inclusion for people
living in residential aged care
Report on the 2006–07 pilot projects

Published by the Rural and Regional Health and Aged Care Services Division, Victorian Government Department of Human Services, Melbourne, Victoria.

May 2008

© Copyright State of Victoria, Department of Human Services, 2008.

This publication is copyright. No part may be reproduced by any process except in accordance with the provisions of the *Copyright Act 1968*.

Authorised by the State Government of Victoria,
50 Lonsdale Street, Melbourne, Victoria, 3000.

This document may also be downloaded from the Department of Human Services website at: www.health.vic.gov.au/agedcare

A socially inclusive society is defined as one where “all people feel valued, their differences are respected, and their basic needs are met so they can live in dignity”. Social exclusion is the process of being shut out from the social, economic, political and cultural systems which contribute to the integration of a person into the community (Cappo, 2002).

Social inclusion for an individual means access to supportive relationships, involvement in group activities and civic engagement. Social networks can provide social support, social influence and opportunities for social engagement and thus create meaningful roles, resources and opportunities for intimate one-on-one contact.ⁱ

Cementing meaningful social engagement for residents in aged care services with their community is a challenge to be taken up by all members of society. Through the development of local community partnerships and support networks, building community and workforce capacity and strengthening community infrastructure individuals, services and groups can work together to provide social opportunities which are meaningful and add value to the lives of our isolated frail elderly. Throughout their lives, older people have been active contributing members to their community and should continue their involvement and contribution as valued members of society to access social, economic, recreational and family aspects of their local community.

Acknowledgements

The Department of Human Services thanks the people involved in the *Count us in!* projects for their significant contribution to the *Count us in!* initiative and to the contents of this report.

i Quoted in a Report of the World Health Organisation, Department of Mental Health and Substance Abuse in collaboration with the Victorian Health Promotion Foundation and The University of Melbourne (2005).

Contents

Introduction	1
Purpose of this report	2
<i>Count us in!</i>	3
Aim	3
Objectives	3
Pilot projects	4
Results	5
At the project sites: connecting community with residents	5
Across the community: promoting the image of residents and residential aged care	5
Strategies and resources developed	6
Key themes and findings	7
Achievements	7
Challenges	7
Sustainable changes and social inclusion options for the future	8
<i>Count us in!</i> project profiles	10
SkillsConnection formerly Colac Community Development Association Inc.	11
Lyndoch, Warrnambool Inc.	15
Resurrection Parish and Keysborough Learning Centre	18
Eastern Access Community Health (EACH) and Healesville & District U3A	20
West Gippsland Healthcare Group	24
The Old Van Ltd.	26
Moirā Healthcare Alliance Inc.	28
Upper Murray Health and Community Services	30
Cobram District Hospital	32
Bendigo Health Care Group and La Trobe University	36
Kyneton District Health Service	38
Maryborough District Health Service	41
Russian Ethnic Representative Council	43
Thornbury Women’s Neighbourhood House	46
Infoxchange Australia and St Vincent’s	49
Brotherhood of St. Laurence	51
References	54
Appendices	55
Appendix 1: <i>Count us in!</i> list of resources	55
Appendix 2: <i>Count us in!</i> list of recommendations for future social inclusion projects	57

The meaning or lack of meaning that old age takes on in any given society puts that whole society to the test.

Simone de Beauvoir

Introduction

The Victorian Government considers that older Victorians should be supported and encouraged in all aspects of their lives and not only be defined by their health and care needs.

Key policy directions in Victoria include:

1. Enabling senior Victorians to lead independent, active and healthy lives for as long as possible.
2. Encouraging communities to value, listen to, and learn from senior Victorians, and understand and appreciate the diversity of the ageing experience.
3. Creating opportunities for senior Victorians to fully participate in economic, social and community life.

The Department of Human Services *Count us in!* initiative was launched in 2006 to promote social inclusion for people living in residential aged care. The initiative provided \$306, 872 in grants to community organisations and Public Sector Residential Aged Care Services (PSRACS) to implement sixteen pilot projects across metropolitan and rural Victoria. The action phase of projects was completed in August 2007 with final reports provided to the department in late 2007.

These projects focused on breaking down barriers to inclusion, providing positive examples of strategies to improve social inclusion for people living in residential aged care and supporting the move towards a more inclusive life for people in residential aged care.

Purpose of this report

This report has been developed to draw together the achievements, challenges and learnings arising from the sixteen projects.

It provides both a broad overview of common themes that emerged across multiple projects as well as individual profiles for each project. The profiles offer more detailed information about the various stages of each project and its outcomes, as well as the learnings along the way. These profiles are based on information provided by the project organisations and in most instances are not the result of a formal evaluation.

This report will be of interest to people working with residents in aged care services, family members, friends, visitors and others interested in providing opportunities for people living in residential aged care to maintain and strengthen their community connections.

Count us in!

Aim

The aim of the *Count us in!* initiative is to promote and facilitate community inclusion, good health and quality of life for people living in residential aged care.

The funded projects aimed to:

- Give current residents the opportunity to be involved in some positive activities;
- Identify and break down barriers to social inclusion;
- Produce positive examples of approaches that work;
- Build networks and establish resources to support inclusion; and
- Change behaviours, attitudes and cultures.

Objectives

The projects sought to have impacts at both the project sites and across the broader community, recognising that improving social inclusion for residents is a shared responsibility.

At the project sites the objectives were to:

- Increase engagement between the local community and residents in aged care;
- Improve access for people in residential aged care to the local community social supports and activity infrastructure;
- Improve the health and well-being for people in residential aged care;
- Increase the expectation that it is usual for people in residential aged care to be involved in their local community; and
- Provide opportunities for local residents of all ages to spend time with and learn from older people and to contribute their skills, time and energy to make a positive difference to the residents' quality of life.

Across the community the objectives were to:

- Change the image and attitude towards residential aged care and residents; and
- Provide resources in the form of
 - Project reports (including information on how the project was conducted, impact on residents, the service and the community).
 - Identified champions (individuals and agencies who have completed projects and are available to pass on their expertise and support others).
 - Create networks with individuals and organisations.

Pilot projects

The table below lists the sixteen *Count us in!* pilot projects.

Project Name	Lead Agency	PSRACS
Social Inclusion Project	SkillsConnection Formerly Colac Community Development Association Inc	Corangamarah Nursing Home – Colac Area Health
<i>Count us in!</i>	Lyndoch, Warrnambool Inc.	Lyndoch Hostel Koroit District Memorial Services
The Men’s Shed	Resurrection Parish and Keysborough Learning Centre	A G Eastwood Hostel – Southern Health
Social Inclusion for People in Residential Aged Care	Eastern Access Community Health and Healesville & District U3A	Monda Lodge Hostel – Eastern Health Healesville
Internet Café – Pen Pal Program and Community Outings	West Gippsland Healthcare Group	Cooinda Lodge Nursing Home
<i>On the Red Carpet</i>	The Old Van Ltd.	Daylesford Nursing Home – Hepburn Health Service Heywood Nursing Home – Heywood Rural Health
Social Inclusion for People in Residential Aged Care	Moira Healthcare Alliance Inc.	Numurkah District Health Service Yarrowonga District Health Service Nathalia District Hospital
Volunteer Based Social Integration Project in a High Care Setting	Upper Murray Health and Community Services	Upper Murray Health and Community Services
<i>Count us in!</i> Social Inclusion for Residents with Dementia	Cobram District Hospital	Irvin House
Changing Faces: Across The Ages, Across The Generations Intergenerational Portfolios	Bendigo Healthcare Group and La Trobe University	Joan Pinder Nursing Home Stella Anderson Nursing Home Golden Oaks Nursing Home
Rural Rescue	Kyneton District Health Service	Thomas Hogan Wing Nursing Home
<i>Count us in!</i>	Maryborough District Health Service	Avoca Nursing Home Dunolly Nursing Home Maryborough Nursing Home
Social Inclusion for Russian (Speaking) People in Residential Aged Care	Russian Ethnic Representative Council	Engaged with Russian speaking residents across various PSRACS
On-Line Learning for Older Learners	Thornbury Women’s Neighbourhood House	Boyne Russell House – Melbourne Health Darley House – Austin Health
Reflections	Infoxchange Australia and St Vincent’s	Cambridge House – St Vincent’s
<i>The People, The Places & The Pleasures</i>	Brotherhood of St Laurence	Jean Turner Nursing Home and Lotus Hostel – Peninsula Health

Results

At the project sites: connecting community with residents

Projects used different approaches and strategies to strengthen community connections to residents. These strategies included:

- Connecting with community clubs and organisations, local primary, secondary and tertiary institutions, volunteers, service support networks, local recreation and leisure groups;
- Providing meaningful social activities and engagement for residents and community members;
- Utilising local media, radio and print to inform and promote social inclusion;
- Providing community members with volunteering opportunities to make a positive impact on residents' quality of life; and
- Developing creative approaches to improve resident access to transport and recruitment of volunteers.

Across the community: promoting the image of residents and residential aged care

Many projects observed a positive change in community attitudes towards residents and residential aged care services. The communities involved were more aware of life in aged care and the need for residents to remain connected to community life.

Residents, family and the broader community

Projects reported positive impacts on the attitudes of residents, their family members and visitors. In some instances, once residents were engaged in activities they were *ready and willing* to participate and looked forward to the days when activities and outings were planned *you could see the sheer joy on their faces* commented one staff member.

There was significant improvement in some residents' moods, with some happier and more motivated to continue activities within the facilities. Some residents communicated more, shared meals and had conversations together which they did not do prior to the project. Some dementia residents were reported to have improved cognitive functioning.

Staff

With access to information and education on the importance of social inclusion (particularly how it improves the resident's health and emotional wellbeing) changes in the attitudes of some staff was also noted. In some cases staff morale was lifted as the working environment was considered to be better and happier, and some projects reported enhanced interactions between staff, residents, community volunteers and group leaders.

Strategies and resources developed

A key focus for projects and project partners was influencing the community's image and attitude towards residents and residential aged care services. Strategies used included:

- Community consultation and development;
- Raising awareness of the social inclusion concepts, principles and practices;
- Provision of training and support to facilitate social inclusion;
- Acknowledgement of the value and contribution residents had to offer their community;
- Partnership development with aged care services and community groups; and
- Building capacity of staff in aged care services and community groups.

The *Count us in!* pilot projects also produced a range of resources that may be used more broadly across the sector, including:

- **Information and training resources:** Digital story telling DVD and CD-ROM of residents and staff and website forums at *My Connected Community*.
- **Community resources:** Accessing *senior friendly* venues DVD and Resource Guide and a book of resident and family member's favourite recipes.
- **Resident life chronicles:** A range of personal and collective photo albums and scrapbooks on the lives of residents and their community, resident intergenerational portfolio photo banners and photographic displays and various published articles on residents.

The individual profiles provide more detailed information on the tools and resources produced by each project to support and facilitate social inclusion for people in residential aged care. Refer to Appendix 1 for a complete list of project resources.

Key themes and findings

Achievements

There was a diverse range of achievements arising from the *Count us in!* projects which impacted residents, family, staff, volunteers, community groups and the community as a whole to varying degrees. These included:

- **Improved confidence and wellbeing of residents** to feel they are valued and contributing members to their community.
- **New partnerships and relationships developed** between residential aged care services, groups and individuals in their communities. Networks between aged care staff and community organisations were also developed building sector capacity.
- **New workforce development opportunities**, including education and training for volunteers, aged care staff and community groups to give them confidence and skills to independently manage residents on outings.
- **Increased community awareness** through the use of local media campaigns and community radio to promote the valued role residents can and do play in the local community.
- **A positive shift in community attitudes and behaviour** towards people in residential aged care.
- **Changes to organisational practices** of community clubs and organisations and the curricula of primary, secondary and tertiary education institutions, some of which incorporated themes of social inclusion for older Victorians into their regular activities.

Challenges

Like all projects involving change, many of these projects encountered challenges throughout their course. While a number of these were overcome through project participants, partners and community groups working together to apply flexible, responsive and innovative approaches, they highlight issues that require consideration in working to improve social inclusion of people living in residential aged care.

Common challenges encountered by the projects included:

Building confidence of residents and their families to participate in project activities. In some instances, residents and/or family members were reluctant to engage in the events (with factors such as physical limitations or lack of confidence commonly cited) and resident's interest and participation in the activities often changed from one day to the next.

Managing complex cognitive and physical disabilities. The limited mobility of some residents presented as a barrier to accessing community venues and transport, and the need for resources and training to support volunteers was raised particularly when assisting residents with complex needs.

Declining health status of residents and some volunteers affected commencement of activities and impacted on the resources and dynamics of the group. Residents with complex care needs were not always able to communicate with project staff.

Organisational procedures and requirements sometimes delayed implementation of project activities. Timelines to process police checks for volunteers and access to information on residents was a challenge for some projects.

Adapting to organisational and attitudinal change was a challenge identified by several projects, as some projects required different methods of working.

Supporting the needs of people from a culturally and linguistically diverse background was a challenge for a couple of the projects. Availability of suitable staff to work with residents from a culturally and linguistically diverse background was sometimes problematic and some residents found it difficult to engage and participate in activities due to the language barrier.

Effective communication between management and direct care staff in aged care services was a challenge for some projects.

Recruitment and retention of volunteers and community groups to support projects was a key barrier despite the use of media campaigns. Due to the short term nature of the project it was difficult to connect community groups to residential aged care services and match volunteers with residents.

Financial capacity was identified as a challenge for some residents as they had limited capacity to pay for activities, membership costs, transport, food and entertainment.

Availability of accessible and affordable transport options was identified as a challenge.

Sustainable changes and social inclusion options for the future

Count us in! projects identified several strategies that could be used to enhance social inclusion for people in residential aged care including:

Promote resources and outcomes from the *Count us in!* projects more broadly across the residential aged care sector to share the learnings and outcomes of projects. Suggestions included: publication and distribution to the aged care sector of a report compiling project findings and outcomes; a forum to share ideas, identify and address challenges and educate PSRACS on social inclusion; use of the DHS public sector Aged Care Quality Improvement Seminars to promote social inclusion; establishment of an online discussion forum for the sector to discuss issues and share information about social inclusion for residents; and state wide consultation with PSRACS to seek their views and identify strategies to improve social inclusion for residents in aged care.

Foster workforce and community development initiatives which provide information, education and training opportunities to support social inclusion and highlight the benefits for all. This could improve the skills and confidence of those working with older Victorians in residential aged care in providing social inclusion opportunities for residents.

Raising community awareness of the importance and benefits of social inclusion for residents and the community as a whole. The use of local media, community radio and peak advocate organisations could be encouraged wherever possible to promote social inclusion opportunities for residents in aged care.

Support development of networks and partnerships between aged care services and their communities to integrate social inclusion into business or organisational plans and practices. Such partnerships could also support sharing resources, organisation of joint activities for special events and outings, and joint funding applications to support social inclusion opportunities for people in residential aged care. Encouraging community organisations to increase their volunteer capacity for PSRACS to provide meaningful social connection for residents was also suggested.

Embed social inclusion principles in residential aged care services, through practical strategies such as including social inclusion as a regular agenda item at meetings, encouraging services to be active members on community networks and groups and taking up other opportunities to share resources and learn about community events and activities that might provide social inclusion activities for residents.

Explore future opportunities for funding social inclusion: A range of suggestions was made such as continuing funding for *Count us in!* projects over twelve months to ensure greater success of sustainability, promote greater likelihood of social inclusion for residents and the community, and provide sufficient time to undergo a comprehensive evaluation of the project. Greater utilisation of community funding to provide for material and equipment to progress activities such as the photographic banner display, resident profile productions using web development and information technology equipment. Explore other government funded programs to promote and enhance social inclusion for residents in aged care e.g. planned activity groups and telelink.

Frameworks, policies and programmes that promote social inclusion and active participation hold the key to realising the potential of our ageing society.

Cobram District Hospital
and Irvin House Residential Aged
Care Service

Count us in! project profiles

Each *Count us in!* project profile provides detailed information about the approaches used to implement social inclusion for residents in aged care, the challenges experienced, the steps taken to address and overcome these barriers, the range of activities undertaken, the highlights of each project and the practical recommendations provided for services interested in implementing social connection and engagement for residents.

Count us in! pilot projects

Project Name	Lead Agency	PSRACS
Social Inclusion Project	SkillsConnection Formerly Colac Community Development Association Inc.	Corangamarah Nursing Home – Colac Area Health
<i>Count us in!</i>	Lyndoch, Warrnambool Inc.	Lyndoch Hostel Koroit District Memorial Services
The Men's Shed	Resurrection Parish and Keysborough Learning Centre	A G Eastwood Hostel – Southern Health
Social Inclusion for People in Residential Aged Care	Eastern Access Community Health and Healesville & District U3A	Monda Lodge Hostel – Eastern Health Healesville
Internet Café – Pen Pal Program and Community Outings	West Gippsland Healthcare Group	Cooinda Lodge Nursing Home
<i>On the Red Carpet</i>	The Old Van Ltd.	Daylesford Nursing Home – Hepburn Health Service Heywood Nursing Home – Heywood Rural Health
Social Inclusion for People in Residential Aged Care	Moira Healthcare Alliance Inc.	Numurkah District Health Service Yarrowonga District Health Service Nathalia District Hospital
Volunteer Based Social Integration Project in a High Care Setting	Upper Murray Health and Community Services	Upper Murray Health and Community Services
<i>Count us in!</i> Social Inclusion for Residents with Dementia	Cobram District Hospital	Irvin House
Changing Faces: Across The Ages, Across The Generations Intergenerational Portfolios	Bendigo Healthcare Group and La Trobe University	Joan Pinder Nursing Home Stella Anderson Nursing Home Golden Oaks Nursing Home
Rural Rescue	Kyneton District Health Service	Thomas Hogan Wing Nursing Home
<i>Count us in!</i>	Maryborough District Health Service	Avoca Nursing Home Dunolly Nursing Home Maryborough Nursing Home
Social Inclusion for Russian (Speaking) People in Residential Aged Care	Russian Ethnic Representative Council	Engaged with Russian speaking residents across various PSRACS
On-Line Learning for Older Learners	Thornbury Women's Neighbourhood House	Boyne Russell House – Melbourne Health Darley House – Austin Health
Reflections	Infoxchange Australia and St Vincent's	Cambridge House – St Vincent's
The People, The Places & The Pleasures	Brotherhood of St Laurence	Jean Turner Nursing Home and Lotus Hostel – Peninsula Health

Project name **Colac Community Development Association Inc
Social Inclusion Project**

Organisation **SkillsConnection formerly Colac Community Development Association Inc.**

PSRACS Corangamarah

Funding \$19,670

Aim To reconnect residents with their communities and to participate in activities that were once a part of their lives.

The project aimed to support social inclusion for a Colac society where people feel valued, their differences respected and their basic needs met so they can live in dignity. This would ensure the government's mission to enhance and protect the health and wellbeing of all Victorians, emphasizing vulnerable groups and those most in need.

Objectives To provide and share community education and strengthen relationships with local community, sporting and hobby groups.

To support and encourage community groups so they feel empowered to extend support to people from the Corangamarah Nursing Home at the completion of the pilot project and to promote the value of Colac mature citizens in the development of the Colac Community.

The challenge was to break down the barriers to inclusion, to produce positive outcomes, attitudes, culture and move towards an inclusive lifestyle for people living in state funded residential services.

Activities The activities undertaken focused on building social inclusion through providing support to residents in the Corangamarah Nursing Home to:

- Access places of their interest e.g. Cressy Dog Trials, Celtic Birregurra Festival, Baptist church ANZAC day service, Open Garden, live theatre, dining out, art and craft workshops, health and wellbeing programs and DoCare luncheons.
- Reconnect people to clubs where they were once active members e.g. Colac Football Club life members luncheon, Colac Football Club Tigers, Football at Gellibrand and the opening at the Otway District Club Rooms.
- Renew and maintain friendships.
- Support families to reconnect in social activities previously attended together.

Key achievements The project has been very successful and widely embraced by the community who recognise the need for social inclusion of residents in aged care facilities in Colac.

The project has educated and supported community groups and clubs to embrace elderly people of the Colac community.

Partnership development created opportunities to enhance quality systems, staff training and development opportunities and has provided a pathway for ongoing service partnership between the two organisations.

The project reflected the principles of person centred planning. These principles ensure individual's choices and needs are identified. Strategies were developed to enhance empowerment, valued status and inclusion, whilst maintaining a flexible model that evolved with each individual. We provided support and opportunity to residents from Corangamarah to access and participate in activities and places of

their interests, renew and maintain friendships, rekindle life dreams and aspirations and enhance their community involvement and valued status.

The Colac Football Netball club have changed their club policy to find and reconnect their past club life members. This was a result of the positive impact of the project supporting life members to attend the members luncheon and games throughout the season which has identified with the younger current members of the club that if it wasn't for these people they would not be enjoying the strong club they have today, and it is also important to ensure the history of the club is not lost.

The project has facilitated a strong partnership between SkillsConnection and Corangamarah which has highlighted both agencies' participants have similar life goals and outcomes. This project has opened the door for SkillsConnection participants to be involved in activities with residents of Corangamarah. The activities are run at Corangamarah and although this is inhouse it is very important as one of the projects is the development of vegetable and herb gardens. These gardens and landscaping of their home provides the residents with a sense of belonging and increases their valued status as family members and visitors can enjoy these areas, and buy produce grown.

This activity is delivered by SkillsConnection staff and the sharing of resources has made this possible to continue. The SkillsConnection participants also have great benefits as the residents provide a family like connection that some are not able to experience. It also builds self-esteem for both parties as they are doing an activity of choice and interest that value adds to people and community. The program will also facilitate opportunity for socializing and forming of current and new friendships. The program also has extensive benefits to participant's physical and mental wellbeing.

The success of the project has demonstrated to other aged care service providers that by working together we can enhance opportunities for participants to achieve a greater quality of life. SkillsConnection retirement program are currently delivering five activities within the three age residential facilities in Colac. Also by sharing information with community groups we have increased partnerships, and education of their members that has resulted in an increase in volunteers. As a result, we have formed a Diversional Therapist Network that meets bi-monthly.

Agreed activities of the network are to: continue to support local clubs by forming collective monthly calendars of events to assist with their membership; to share resources, vehicles and staff to support residents to attend activities of their choice; organise joint activities for special events e.g. Melbourne Cup day luncheon, art and craft exhibitions; be an education and information point for community groups.

To form partnerships with community groups to apply for funding to support elderly people to be members of the group, whilst improving facilities and resources for current members, this is an area where the newly formed partnerships facilitated by the project can strengthen and value add to the community as the staff members have the links with funding bodies. SkillsConnection have the experience in submission writing and the community groups have the activity and membership that our residents may want.

Overall the success of the *Count us in!* project has provided a platform for open communication and has demonstrated through working together greater results can be achieved for people, business and community groups resulting in strengthening the community. The project has clearly provided encouragement and education that shows the sustainability of any activity or group no matter what size is determined by the forming of partnerships and working together.

Challenges

The project staff identified several barriers encountered with the project however these were overcome through the broad knowledge of the community infrastructure and good networks to develop other options with minimal impact on the project.

Participants were anxious about committing to the project initially as SkillsConnection staff were strangers. Staff then visited participants informally discussed activities, talked of past experience with other clients and developed trust. This reduced resident's anxiety.

Transport: unreliable access to wheelchair taxis. Residents were anxious waiting, SkillsConnection staff then secured the use of a vehicle from the Colanda residential service which had wheelchair access.

Communication: The importance of communication between staff was highlighted to ensure all participants benefited from project activities e.g. staff were informed of activities and outings, and residents were ready for these. SkillsConnection staff liaised with the diversional therapists and provided a detailed plan for each event which was provided to staff a day before the event and attached to the nursing report.

Resident's ill health: due to ill health some residents had to withdraw on short notice which impacted on the resources and group dynamics. A matrix of likes and dislikes of participants was developed and special needs were identified for participants for each activity. A couple of participants were nominated for each activity and if one participant could not attend the other was nominated to step in.

Community garden: the partner school did not secure funding to create the community garden. Another barrier to implementing the community garden was the inclement weather conditions. SkillsConnection arranged for their community garden group to attend the residential facility where members worked under cover with residents potting seedlings and developing gardens.

Sustainable strategies

The success of the project has been due to the flexibility of service delivery, the professional approach provided by staff and a high quality communication strategy with a focus on consultation.

The Diversional Therapist Network established the agreement of ongoing activities which included: a monthly calendar of events to assist their membership; shared resources including vehicles and staff to support residents to attend activities of their choice; organised joint activities for special events; acted as an initial contact point to provide information and education to community groups.

Development of new partnerships with the local football and netball clubs to reconnect life members and develop a policy to highlight the inclusion of elderly members.

Ongoing partnership development with the Baptist church to seek opportunities to continue supporting residents to attend and reconnect with congregation members.

SkillsConnection Disability Retirement program with the support of volunteers will continue to transport and support two participants to attend the weekly Colac Otway Shire Health and wellbeing program.

SkillsConnection will continue to provide transport to the Anglican Church Tea and Talk group whom in turn will support two participants to continue to join this monthly event that has been beneficial to both parties to bring together church members and rekindle old and form new friendships.

**Recommendations for
future projects**

The project recommends that this service delivery model should be ongoing. Other residential services have expressed interest in participating in any future projects.

For more information contact

Key project contact Marita Brady
Title Manager Community Connection
Telephone (03) 5231 2333
Email mbrady@skillsconnection.org.au
Project officer Liz Graham

Project name	<i>Count us in!</i>
Organisation	Lyndoch, Warrnambool Inc.
PSRACS	Lyndoch Residential Aged Care Koroit Health
Funding	\$20,000
Aim	To enhance the community's perception of Public Sector Residential Aged Care Services (PSRACS) through inclusion and promoting interaction between the community and people living in PSRACS.
Objectives	<ul style="list-style-type: none"> • To identify and implement ten social inclusion opportunities that include residents of PSRACS to be provided by community organisations and services. • Develop new and enhance existing links between community and residential aged care through inclusion of PSRAC representatives in five community interest groups. • Increase capacity of existing volunteer support programs through participation in two specific training sessions over the period of the project.
Activities	<ul style="list-style-type: none"> • Regular activities with local primary school children. • Local Scouts activities took place at the PSRACS facility, scout and school hall activities included craft making, poetry, reading, fishing and scouting activities. • Community radio interviews to raise community awareness of life in residential aged care and the importance of social inclusion for residents. • Regular monthly library discussion groups with community members and residents who share a common interest and love of reading and developing new friendships. • Art and card group activities for two residents.
Key achievements	<p>This project has enhanced the organisation's capacity to meet the Accreditation Standard of resident lifestyles, with emphasis placed on continuous improvement, regulatory compliance, independence, leisure interests and activities, and choice and decision-making. Resident's privacy, dignity and confidentiality was respected and recognised.</p> <p>Media coverage promoted the project and social inclusion for residents of PSRACS for the future.</p> <p>Having residents participate in the community radio programs was a key achievement. Residents' voices are heard reflecting what it is like to live in residential aged care and the importance of being included in the community. Koroit and Lyndoch residents participate in a Sunday Seniors Program every Sunday night. The radio presenter conducts 'live' interviews with residents over the telephone. Interviews outlined life in residential aged care, personal opinions, and types of leisure activities and community involvement.</p>
Challenges	Transport: organisational policy restricts volunteers or community members from transporting clients. Residents did not want to catch public transport due to frailty, vision impairment, and unfamiliar transport type. Some residents (Lyndoch) use public transport and are happy to do so. Taxis are expensive. Residents were transported by staff, taxis, family members and the RSL provided a wheelchair accessible bus to their venue. Other activities were held at the facilities.

Financial restraints: residents have limited money to spend on activities, memberships, transport, food and entertainment. Activities without fees were popular whilst activities with fees were popular with those who could afford them.

Attitudes and assumptions: residents were reluctant to leave the facilities or participate in activities because of their frailty, lack of motivation, disabilities, vision and hearing impairment, lack of confidence, too difficult to leave and some did not want to socialise any more.

Community groups did not have the time to contribute (e.g. participating in reference groups meetings due to other competing priorities) and were concerned about residents' special needs. Many did advise they wanted to participate but it would be a slow process to commit.

Staff attitudes varied, some were concerned about limited time and resources, health issues and special assistance needed with some residents, duty of care etc. Other staff were very involved and supportive of the project viewing it as beneficial for residents and the community.

Resident's confidence, self-esteem, health issues and cognitive awareness: residents were reluctant to attend community groups alone because they were afraid. They were encouraged by staff, family and community group members with provision of transport to attend in the future. Cognitive awareness and health issues were a challenge for resident participation with changes in participation and interest changing due to health issues. Residents did not want to inconvenience staff, family members, and community group members.

Engaging isolated residents: for some residents engagement was not successful due to non-interest in participating in activities or the project in general.

Wheelchair or walker access to venues are limited in community interest group venues. There is a lack of comfortable amenities such as disabled toilets, comfortable furnishings, heating and limited size of rooms.

Family and friends support networks: resident reference group members were reluctant to involve family members to help with participation in community interest groups as they would not have the time. Some residents do not have family or friends to support them as they live away from the local area or are no longer involved in their lives.

Sustainable strategies

- The Scouts and Primary School have implemented social inclusion and capacity building as part of their curriculum.
- RSL is committed to including all residents in their social activities.
- The Corangamite Library has included residents in their book discussion groups.
- School and Scout activities run weekly or fortnightly depending on children's commitments and resident's participation. Children's ages are between 6 to 15 years with adult scout leader and school teachers also participating.

Reference groups will be incorporated into monthly PSRACS meetings. Social inclusion will be an agenda item and the possibility for activities to be weekly. Feedback can be obtained weekly and activity staff can use information.

Staff and community groups were educated about the importance of social inclusion in aged care and this will ensure staff and community groups keep social inclusion of residents in PSRACS in mind for the future.

Media coverage raised the profiles of the community groups which is likely to add membership.

Information and contact details for community interest groups have been given to activity/lifestyle officers, diversional therapists and the facilities and vice versa.

Recommendations for future projects

Education for all age groups about PSRACS and social inclusion.

PSRACS to work with a variety of community groups that encourage and include resident participation.

Conduct a wider needs assessment of all residents in relation to social inclusion and how this can be achieved by both the PSRACS and community groups.

Increase capacity of broader community, PSRACS staff to support, encourage and empower residents to participate in the community following entry to residential aged care.

Interests and individual preferences must be provided on entry to the aged care facility so that these do not get overlooked and are included in the residents care plan and lifestyle profiles. Action plans with goals and actions for staff, family and resident to continue their involvement in the community. Intake procedures can be enhanced to promote an expectation that participation in the community can continue post entry to residential aged care.

Provide staff or volunteers to attend community interest groups with residents who wish to participate but need support to do so.

Fund community interest groups to upgrade disabled access and toilets.

For more information contact

Key project contact David Keilar
Title Director of Community Services
Telephone (03) 5561 9394
Email link@lyndoch.org.au
Project officer Kellie Beard

Project name **The Men’s Shed**

Organisation **Resurrection Parish and Keysborough Learning Centre**

Funding \$11,970

PSRACS A G Eastwood Hostel Southern Health

Aim To investigate approaches for involving public sector residential aged care residents in existing Men’s Shed activities.

Objectives To provide an environment for male residents to feel valued for their contribution, to make worthwhile decisions and feel appreciated.

Encourage resident ownership of the project, one resident took the lead role of organising other residents on Tuesdays reminding them the bus would arrive soon so to be ready. Men wanted this activity to be theirs and not another aged care facility run activity.

Engage residents with the community. Being surrounded by community volunteers was of great benefit to residents having an interested pair of ears and the opportunity to engage in one to one conversation about their life experiences and skills.

Activities Residents (males) were transported to the **Men’s Shed** every Tuesday morning. Morning tea was provided and the day would start with a general *catch up*. The discussion focused on current affairs and the football results. There was lively discussion and debate on topics.

Introduction of **chronicles** was of great interest to the men which stimulated conversation and provided an opportunity to share life experiences. Topics included the Depression years, War services and working life, there was very little shared about their marriage, raising a family or family life except for one resident at 96 years who was very outgoing, full of life and enthusiastic.

The group was invited to bring in items of interest to the shed to share with the other men.

Craft activities were initially organised and as confidence grew residents expressed a need to participate in more *hands on* experience with tools including hammering, sawing and sanding.

Attended the **Mornington Market** to walk around, look and buy items, followed by lunch at the Pub.

Adult Learners Week celebrations: residents participated in this event through attending displays on art, Tai Chi and belly dancing.

Key achievements The great benefit to the men obtained from the company and engagement from community volunteers. Residents were given the opportunity to engage in conversation and be treated with respect, having the ability to meaningfully contribute, make worthwhile decisions and be appreciated were all valuable experiences for the men.

Through their engagement with staff and volunteers at the Men’s Shed the residents grew in confidence which reflected their ability to provide input into what they wanted and requested more hands on activities.

One resident donated his tools to the Men’s Shed. His generosity was acknowledged and more importantly it was the sense of being a part of the Keysborough Learning Centre’s Men’s Shed community which for him was *life giving*.

It was of great importance to the residents to attend and show their interest in the Adult Learner’s Week celebrations. Throughout the project some important changes were observed in the men. Prior to the *Count us in!* project the men shared nothing more than a *hi and goodbye* and spent most of their time between meals in their rooms. Now the men communicate and eat together at the aged care facility.

Challenges The key challenge for the project was the need for more volunteers to assist with the one to one conversations with the men.

Sustainable strategies The Keysborough Learning Centre intends to seek support and funding to create a sustainable *Count us in!* program with the men from the aged care facility.

Dissemination of project products One of the men Mr John Mosely had articles published in the local newspaper about his life and memories of building his first home in East Oakleigh with his wife Frances.

Recommendations for future projects To continue funding of the project as it *has rekindled the light and spirit of these men*.

For more information contact

Key project contact Denis Minogue
Title Manager
Telephone 9798 7005
Email denis@klckeyes.com.au

Project name **Social Inclusion for People in Residential Aged Care**

Organisation **Eastern Access Community Health (EACH) and Healesville & District U3A**

PSRACS Monda Lodge Eastern Health Healesville

Funding \$19,893

Aim To assist older people in residential services to stay connected with their local community.

Objectives

- To provide access to quality, fun activities in aged care facilities and within local community venues.
- To involve people with a variety of community groups and their members and to offer safe and caring environments, facilitation and enjoyment for all.

Activities

- Completion of information sessions at both aged care facilities.
- Consultations with individuals to discuss residents' interests and maintenance for future classes.
- Completion of individual assessments in consultation with aged care staff.
- Implementation of U3A classes within facilities to allow greater participation levels and cater for resident needs.
- Sourcing of assistance and volunteers from Aged Care Cert. III students at Swinburne TAFE to help with classes.
- Networking with community groups to provide activities.
- Establishment of partnerships.
- Use of promotional publicity for the project and development of a *Count us in!* brochure.
- Increased volunteer participation through recruitment strategies.
- Sourcing of funding opportunities for future sustainability.
- Gentle Dance program and Wool Works activities working with wool to engage residents cognitively, spatially and interpersonally with others. Residents unpick woollen garments, wash the wool and wind it into balls, and use these to knit squares which are sewn together into blankets. The first blanket was sent to Africa as a baby's blanket. Many others have since followed.

Key achievements **Increased resident participation:** due to the revised strategy to hold classes at the aged care facility the participation number had increased from 4 to 15 participants.

Impact on different groups:

- **Residents:** Implementation of U3A classes within facilities has positively impacted the health and wellbeing of older adult residents. Some have had their medications reduced and many have been sleeping better at night. Family members and carers also report increased awareness and interactions.
- **Staff:** nurses, dieticians and physiotherapists drop in whilst the dance classes are operating and many have had a quick dance or a sing along with the residents and then return to work. Thus promoting interaction between staff and residents, having a very positive impact on morale for all at the Holmwood aged care facility.
- **U3A Members** are becoming more involved with staff, residents, carers and family members. Leaders discuss their role with other U3A members, the wider community

and their families. The leaders organised a dancing exhibition and brought in other U3A members thus promoting increased interaction between residents and community members.

- **Other service providers and community groups:** The *Count us in!* project is highly regarded in Healesville and surrounding areas. Many other service providers and community groups are aware of the project and its impact on aged care residents. Public awareness of aged care facilities has increased and many negative stigma are being redressed.
- **General community:** The *Count us in!* project has increased community awareness of the needs and issues of older adults in long term care and is helping to alleviate the negative stigma attached to aged care facilities.

Partnership development: Through the collaboration with the Swinburne TAFE (Croydon) and one of the aged care facilities, Certificate IV students offered up to 40 hours of training under the supervision of the diversional therapist to observe and participate whilst the *Count us in!*/U3A classes are held. Four students have commenced training to date. The collaboration is highly beneficial for organisations, students and residents and also increases awareness of the *Count us in!* project within the wider community. The project has also increased awareness of the U3A program and what it provides to older adults.

Increased membership and leaders for *Count us in!* was an outcome and achievement. With the project worker presenting the *Count us in!* report to the U3A annual general meeting three additional workers became leaders for the *Count us in!*/U3A project.

Blankets for Africa: The Wool Works class was the first time such an activity was accomplished in a high care facility. The project attracted media attention, increased public awareness of the facility and the *Count us in!* project and may bring in more community involvement.

Building networks: The *Count us in!* project provided the opportunity to help establish a network between the different aged care facilities, which had previously been difficult to attain. In particular this has meant both facilities on occasion attend community functions together using the Monda Lodge bus. Other projects are also in progress.

Challenges

Lack of volunteers: The initial project was to take residents to the U3A classes operating in locations in Healesville. Accessing volunteer drivers and carers despite consultation with volunteer agencies, use of media local and state-wide to secure a volunteer base was not successful. With a collective partnership working together to address this barrier it was decided to hold the classes within the residential facility. This re-think was very successful and also proved to be beneficial in that more residents could participate with an average of 15 participants per class. Originally it would have only been possible to transport 3 to 4 residents to a class.

Sourcing leaders for the U3A classes. If these classes were held at the U3A venues leaders would have been provided, however with the classes held at Holmwood the project did not have leaders to run them. Approaches to the U3A met with little

success however community leaders were found via *community word of mouth*. These volunteers became U3A members.

U3A input reflected a minority (5 out of 175 members) disapproval of the project indicating the programs should not be open to aged care residents. This matter has been discussed with the U3A committee who are strongly committed to the *Count us in!* project and will recommend supporting the project to their members at future events.

Sustainable strategies

With minor modifications the *Count us in!* project will continue in the future.

New U3A/*Count us in!* Project Coordinator: A U3A member will act as the *Count us in!* project representative on the U3A management committee. Two other coordinators have been recruited and together these three volunteers will oversee the *Count us in!* project in the future. These volunteers will coordinate classes, class leaders, residents and facilities. Training has been provided to the three members by the existing project worker. These members will be able to proceed independently by May 2008.

Ongoing commitment from aged care services: all classes at Holmwood were chosen for their independent and sustainable nature. If the *Count us in!*/U3A partnership does not continue the classes will not be affected and can be maintained by staff with the help of volunteers. The future sustainability was seen by management and staff as a priority as they were aware of the negative impact on residents if classes were to cease.

Monda Lodge is looking to increase its involvement in the *Count us in!* project in 2008, with the signing up of new classes and leaders. Both Monda Lodge and Holmwood have expressed their ongoing commitment to the *Count us in!* project in 2008 and beyond.

Reduced fees for residents: A negotiated membership fee for all residents has been made with U3A. This is a significant cost saving to residents and their families and to ensure continued patronage of the *Count us in!* program in the future.

Fundraising commitment from U3A: The U3A Committee recently expressed a commitment to promote future activities which would raise funds to cover the cost of resident membership fees.

Dissemination of project products

The *Count us in!* Brochure was developed and distributed to all stakeholders. The brochure provides information for prospective residents and their families regarding the *Count us in!*/U3A project, and will be used as promotional material and information for the community and community groups.

Recommendations for future projects

The model of implementing classes or programs within specialised facilities is simple and effective and can be applied to other organisations or groups such as special education units, English language schools, mental health services, public housing residents and so on. It could very easily be implemented within other U3A groups across the State and even Nationally.

The key is to promote community strengthening via community engagement using focused projects. This can be achieved easily but requires the input of a project leader to oversee the views and interests of many different organisations.

For more information contact

Key project contact Kaylene De Wacht
Title Manager Older Adult Services EACH
Telephone 9871 1856
Email kdewacht@each.com.au
Project officer Sue Malta

Project name **Internet Café – Pen Pal Program and Community Outings**

Organisation **West Gippsland Healthcare Group**

PSRACS Coinda Lodge Nursing Home

Funding \$20,000

Aim To increase the interaction between residents, their families, friends and school students participating in the Pen Pal and Community Outings programs.

- Objectives**
- To establish an Internet Café.
 - Establish partnerships with the secondary school and primary school students.
 - To increase opportunity for residents to socialise with members of the local community.
 - To provide opportunity to utilise both Drouin West Primary School and Coinda Lodge Nursing Home sites.
 - To improve access to mobility aids and to ensure the success and sustainability of *Count us in!*

- Activities**
- Morning Melodies.
 - Polyglot Puppets students performing the play with puppets.
 - Samba Session with residents and students playing percussion instruments which was a huge success with residents and students.
 - Community Outings a picnic lunch with children.
 - Joint art session with residents and students painting portraits.

Training of three residents to gain computer skills. This had encouraged residents to:

- Keep in touch with family and friends within Australia and overseas;
- Research and set up a family tree;
- Surfing the web to give new life to old interests e.g. *open gardens* which can be viewed; and
- Develop typing skills to stay in touch with friends and re-establishing connections with friends in America.

Key achievements The development of an *Internet Café*. The project had put residents in touch with family, friends and students through the use of information technology. The *Count us in!* funding was invaluable as it provided an opportunity to set up and develop networks which will ensure the continuation of the project whilst adding to the quality of life and care to residents in residential age care.

Relationships have been developed between residents and students which are beyond the initial expectation of the project. Students have bonded and consider their Pen Pal (resident) as being part of their extended family. The joy experienced by residents and students from visits and emails has been observed by staff and is an *overwhelming pleasure to witness*.

Feedback from the teacher and student families has been very positive, with added benefits of students having developed their own form of coping mechanisms to help them understand and manage grief when a *Pen Pal* passes on.

With the community outings to venues staff found it interesting to note that initial public interest and comments were made about the residents. After a few visits no

comments or attention was given regarding the residents who were now *accepted as part of the community* attending the venue/function.

- Challenges** The project identified some initial challenges in implementing the project however these were overcome.
- Installation of a webcam at the primary school was not done initially due to privacy issues and engaging a sponsor to fund the running costs of the webcam. After consultation with the school principal, teachers and IT department issues were resolved and the webcam was installed early into Term 4.
 - Staff leave impacted on cancellation of outings however a contingency plan was developed to ensure that outings went ahead.
 - Noise from capital development within the building with work due to cease in November.
 - Reorganising group outings from large numbers (e.g. 33) to smaller more manageable numbers.
 - *Pen Pals* have accessed students *home page* via the schools learning village site which allows residents to leave message for the student.

- Sustainable strategies** Information technology and training:
- Residents continued to be supervised by the occupational therapy staff;
 - Invited the local secondary school college students to continue computer training with residents;
 - Use and share skills learned from the community trainer.

Plans commenced to enhance the *Pen Pal* program for 2008 with the students and residents writing to each other in a shared diary.

Continue community outings through increasing student involvement with community activities to enhance and share experiences and expand the Morning Melodies activities.

Educated teachers, students and families on life experiences of residents in aged care settings.

- Dissemination of project products** The project will develop a paper and submit it for publication in a professional association journal.

The recording of the school visits and photographs of community events and project activities have been developed and displayed at the school and residential aged care service.

- Recommendations for future projects** To install sound voice recognition software for residents with limited or restricted use of their hands to maintain connection to family, friends and the community.

For more information contact

Key Project Contact Shirley Gleeson
Title Manager Coinda Lodge Nursing Home
Telephone 5623 0769
Email shirley.gleeson@wghg.com.au
Project Officer Pauline Boorer

Project name *On the Red Carpet*

Organisation **The Old Van Ltd.**

PSRACS Daylesford Nursing Home Hepburn Health Services
Heywood Nursing Home Heywood Rural Health

Funding \$18,000

Aim To re-engage residents and community members to participate and perform in a short film production.

Objectives To produce a short film with resident's participation reflecting social engagement with a local arts production company.

Activities *On the Red Carpet* an Oscar's event for people aged 70 plus to be interviewed, walk the red carpet and take a bow. A home movie style presentation.

Inform residents about the project by attending regular meetings and social contact. Residents interviewed by local community members who are younger and are paired with residents for the recorded interview. Informal meetings occurred prior to the recording of material to gain trust and for residents to feel comfortable.

Contact with community groups in Heywood and Daylesford to identify participation in interview, writing or acting roles.

Held workshops to discuss the final performance and to prepare and develop scripting to ensure residents are actively involved and work-shop material.

Key achievements What has been significant is the longer term objective of this project to continue involvement and participation of residents in the company's future ventures.

Established partnerships between the company and the residential aged care facilities.

Challenges Challenges highlighted have been the difficulty in sustaining momentum of the project. The project has had a start and stop effect which has been difficult. Residents seem to have receded into themselves. There has been difficulties with health service protocols. Travel costs and accommodation for the production group has been an issue. Inconsistencies among residents about whether they would or would not be filmed when the time arrived was a significant challenge for the project.

Sustainability strategy *On the Red Carpet* is a highly flexible program which can be added to regularly. The film maker is willing to continue documenting interviews in Daylesford at regular intervals in the future and is willing to extend this service to Heywood.

The film maker is also willing to assist the local residents to continue maintain the project themselves.

Dissemination of project products *On the Red Carpet* a short film is still in production and is expected to be finalised in May 2008.

**Recommendations
for future projects**

- Engage a major media provider such as the Woman’s Weekly Magazine to do some profiles on people and places in residential care and re-knit them to the everydayness of the world.
- The company is attempting to develop a project involving residents and professional ‘elderly’ actors to develop a potential television series. This would be in-house but circulated to other residents with episodes of up to 20 minutes.

For more information contact

Key Project Contact Fiona Blair
Title Artistic Director
Telephone 0408 518 416
Email Fiona@theoldvan.com

Project name **Social Inclusion for People in Residential Aged Care**

Organisation **Moira Healthcare Alliance Inc.**

Funding \$19,304

PSRACS Numurkah District Health Service
Yarrawonga District Health Service
Nathalia Hospital

Aim To promote social inclusion for people in residential aged care across the service system and the broader community.

Objectives

- Build on existing community database and other resources to produce a resource for residents of PSRACS.
- Establish relationships between PSRACS and community organisations to support inclusion of people in residential aged care.
- Develop a communication strategy to disseminate information about the project to the community.

Activities

- Old time dancing.
- Attend a vintage car display.
- Attend monthly church lunch.
- Attend the local football games.

Key achievements The key achievements of the project was the acceptance and enthusiasm of the community who believed the project is a *wonderful idea for residents and the community*.

The acceptance of the project and recognition of the benefits for residents and their willingness to implement the project by individual PSRACS staff.

Provision of activities on weekends as weekend outings are the norm, there are fewer activities in facilities over a weekend.

Other key achievements highlighted by the project include:

- Key staff enthusiasm;
- Ideas and linkages generated;
- Residents enjoyment and waiting to participate; and
- The shift in culture and beliefs by the residents, community, volunteers and staff.

Challenges

- Staff philosophically being opposed to the project, but the challenge was overcome with enthusiasm, education, support and to enable the social inclusion process.
- Staff unable to attend meetings.
- Other challenges have presented on an individual basis but strategies were developed to overcome these. Strategies include increased communication, planning, addressing resident and staff concerns and funding participating PSRACS for coordination time.
- Distance between the participating PSRACS.
- Agreement on role of volunteers.

- Participating PSRACS culture and thinking around the residents abilities to access the community, their varied experience in linking and working with external services in regard to a project or activities outside their realm of control.
- Differing views by coordinators with some providing opportunities and others more focused on a risk management approach.
- The workers and volunteers ability to move the project together with the resident's increased enjoyment and participation overcame some of the barriers. *The project continues with great value to all.*

Sustainable strategies

- The development of a volunteer recruitment campaign to enable projects to be sustained.
- A commitment by community groups and PSRACS key staff to build on and sustain the project with the help of the Moira Healthcare Alliance Inc. (MHA).
- To communicate and share information and resources via a newsletter.
- To develop a community calendar of events for four communities to support the project post funded period.
- To provide feedback to all stakeholders with information on the lessons learned; project outcomes; knowledge gained; areas which need to be refined or improved; ongoing support requirements and commitment to continue the project.

Dissemination of project products

A communication strategy was developed to distribute information on the project. Media release on the project outcomes and future development to be distributed throughout the health service.

A quarterly newsletter to be the responsibility of the MHA. Provide information sharing on outcomes from the project between coordinators.

Recommendations for future projects

- Fund community groups to be inclusive of people in residential aged care.
- PSRACS to be funded for coordination of social inclusion outcomes that are not specific to social outings.
- Hold a forum to share ideas, challenges and educate PSRACS.
- Social inclusion is a health promotion approach.
- Broader community campaigns in regard to social inclusion for residents to be the norm.
- Deinstitutionalise residential aged care.

For more information contact

Key Project Contact Donna Richards
Title Chief Executive Officer MHA
Telephone 5743 3200
Email drichards@mha.cnl.com.au

Project name **Volunteer Based Social Integration Project in a High Care Setting**

Organisation **Upper Murray Health and Community Services**

PSRACS Upper Murray Nursing Home and Hostel

Funding \$20,000

Aim To develop sustainable community partnerships with existing community groups and individuals that would be willing to provide activities and social interaction for residents in a high care setting.

Objectives

- Explore social inclusion and what it means to residents, their families, the community and staff responsible for their care.
- Identify barriers for volunteers in a high care setting.
- Provide the residents with regular enjoyable social contact and activities that will enhance their quality of life.
- Explore any barriers or issues relating to social inclusion and volunteering in a high care setting.
- Develop community partnerships with groups and individuals to implement activities within the high care setting.
- Evaluate the success or failure of any of these activities, and address any issues or barriers.
- Establish sustainable activities and events that will continue beyond the life of the project.

Activities

- **Red Cross Cosmetic Care Program** resumed on a weekly basis with volunteers coming in pairs. This provides the volunteers with support and company. There are fifteen members on roster who attend the PSRACS for one hour a week.
- **Country Women's Association** two members show residents their craftwork and discuss their knitting and handcraft.
- **Local school** – twenty-five grade five and six students attend the facility to talk and sing to residents building up a rapport with each other. The school saw the activity as an educational and mutually rewarding experience for residents and children. The students showed a keen interest to learn about the resident's backgrounds including their childhood, where they lived, what they did for a living, their hobbies and interests.

Key achievements The project was a very successful community development action research social inclusion project. It demonstrated the importance of genuine consultation with all stakeholders to seek their views, identify and overcome barriers. The project also demonstrated that simple activities are the most sustainable requiring minimal resources.

A designated project worker contributed significantly to the success of the project which enhanced the health and wellbeing of residents in high care settings through sustainable social inclusion activities.

Identified several issues that may have lead to poor retention of volunteer base. Once approached and provided with support and orientation volunteers were willing to participate which led to development of partnerships with the local school, the Red Cross and the Country Women's Association.

The use of the staff questionnaires provided a platform for nursing staff to provide input, identify barriers to successful volunteering and social interaction in a high care setting and provided solutions to overcome these.

Staff reported an improved confidence in dealing with volunteers, in that volunteers know what's expected of them. Ensure that volunteers are properly trained and informed of their role so they can work independently with limited assistance and direction.

Challenges Staff were interested in being part of the project team but due to workload and shift allocations were not able to participate.

Resident family members invited to join the project team found travelling to town for meetings difficult to manage.

Recruitment of volunteers was straightforward except for one group as a police record check became a barrier.

Sickness of volunteers was a barrier to commencing activities in the facility. A roster was created by a volunteer group to cater for the replacement of any ill members. The average age of volunteers was 60 years.

Sustainable strategies Activities are sustainable given the type and level of difficulty implementing them within a high care setting. Volunteers were consulted on what activities could be delivered on a regular basis, with simple activities requiring little setting up and organisation prior to activity.

The large number of Red Cross volunteers has allowed the group to commit to weekly visits to residents.

The school has made the project part of the school curriculum and an important part of the students learning and personal development. The school considers the project to be a sustainable activity for the future.

Activities were straightforward to implement in high care settings. Activities were implemented at the times suggested by nursing staff which enabled activities to be enjoyed by a maximum number of residents.

Dissemination of project products Information collected from the students on the residents was created in poster presentation and presented to residents to be displayed in their rooms.

Recommendations for future projects

- Consultations with key stakeholders to seek views, ideas, identify activities, barriers and solutions.
- Keep activities as simple as possible to ensure ongoing sustainability.
- Provide training and support to volunteers and staff to ensure all are aware of their roles, responsibilities and expectations.

For more information contact

Key Project Contact	Mary Hoodless
Title	Project Manager
Telephone	(02) 6076 3207
Email	maryh@umhcs.vic.gov.au
Project Worker	Lea Klippel

Project name *Count us in!* Social Inclusion for Residents with Dementia

Organisation Cobram District Hospital

Funding \$19,431

PSRACS Irvin House

Aim To facilitate social inclusion for residents of a high care facility including residents with dementia.

- Objectives**
- To educate the community on the need for volunteers to assist residents in maintaining community links.
 - To foster opportunities for residents and their families to reconnect with the local community.
 - To focus resident care on improving quality of life, spiritual and emotional wellbeing.

- Activities**
- A visit to the local antique fair.
 - Attend the Club Barooga hydrotherapy pool for weekly swimming activities.
 - Attend interdenominational church services monthly, attend a sacramental program and Confirmation Mass.
 - Town and bush walks.
 - Fishing trips.
 - Picnics.
 - Visit to a vintage car rally.
 - Attend the ANZAC day service and two up.
 - Visits to former workplaces.
 - Numerous visits to cafes and bakeries.

Key achievements The key achievements for the project was the implementation of successful social inclusion for residents with dementia, family inclusion and involvement in residents' lifestyle and increased volunteer support base through all forms of advertising.

The project achievements varied in nature ranging from an individual to organisational level. The greatest individual benefits were recognisable for residents whose dementia was not at an advanced stage. A marked increase in cognitive function for this group was observed by family and staff. On an outing to the local antique fair one resident initiated a conversation for the first time since admission to the aged care facility. She had recognised a face in the crowd.

The use of distinctive colourful shirts worn by staff made it easy for residents to recognise and relate to the activity days. The community were also aware of the colourful shirts which raised their awareness of the project and the importance of including residents in local community activities and events.

Visitors, staff and management to the centre commented on a photographic display of activities undertaken by residents. Many were amazed by the capacity of residents to participate in hydrotherapy activities. Families requested copies of the residents' photographs to send to family members. The local fitness centre sought copies of photographs showing residents enjoying the heated pool to display at the centre stressing no better advertising than a 94 year old maintaining an active lifestyle.

There was an improved level of physical ability and functioning of residents. One resident asked for assistance to increase her level of mobility through practising and mobilising greater distances daily. Buoyancy and support of movement in the hydrotherapy activities carried over into daily life, with residents displaying greater ranges of movement after participation in the project activities.

Residents and family members expressed joy at the variety of activities and the opportunity to reconnect residents to the community was a key highlight and outcome of the project. Residents and families provided information on past hobbies and interests.

Some comments made by residents and family included the following:

- *Why doesn't every nursing home do this?*
- The project manager asked one resident if she felt over tired from participating in the many activities in that week. The resident replied that she couldn't remember a more enjoyable week in her life and although she was tired it was *pleasantly so, just like over indulging at the Christmas table.*

Improved quality of life, spiritual and emotional wellbeing of residents became the focus of care in particular:

- A reduction of problematic behaviours such as wandering and sleep disruption;
- Demonstrated reduction in falls in residents participating in the project and decreased need for sedation; and
- The secondment of staff into activities within other roles gave project workers a more holistic and individualised approach to the delivery of care to residents.

A significant achievement was the shift in attitude and behaviour by the community towards residents. Retail and hospitality staff communicated more frequently with residents. This was a perceptible change noticed by the diversional therapy activities coordinator, only after the *Count us in!* media campaign.

Increasing community awareness of social inclusion and community connection for residents was another significant achievement. On outings project workers took opportunities to educate and raise community awareness about the project and encouraged members to volunteer to assist residents to maintain community links.

Staff development and confidence increased through working with another discipline and fostered better relationships and a greater understanding of roles between direct care staff and the diversional therapist.

Challenges

The main challenges faced was the lack of response from mail outs to local community groups seeking volunteer support and engagement. Appropriate transport was another major barrier identified during the course of the project. The *Count us in!* project provided concrete evidence of limitations imposed by lack of appropriate transport. The purchase of the commuter van during the project not only allowed a broader range of activities to be offered but the benefits continue well beyond the life of the project.

Residents who exhibited difficult, problematic or inappropriate behaviours was another identified barrier. Careful planning of venues and activities suited to their abilities and behaviours minimised these concerns. In most cases inappropriate behaviours were

not exhibited during the outings or activities. However, occasionally residents with advanced dementia demonstrated exacerbated behavioural problems on return to the facility, post activity.

Availability of suitably qualified staff was identified as a barrier. The decision to second nursing care staff into the activities role not only removed the obstacle, but provided the many benefits already discussed.

The reduction in staff satisfaction since completion of the project is seen to be the greatest negative impact. Nursing staff seconded to the activities role now struggle with the constraints of the task orientated, medical model of care.

Staff have witnessed the gradual decline in cognitive and physical status of residents who had improved significantly during the project. Lack of ongoing, frequent stimulation has resulted in these residents returning to their former, lesser abilities.

Sustainable strategies

The project activities were tailored to ensure sustainability. Most activities have continued post the project funded period but on a reduced scale due to the withdrawal of the project workers.

A strong volunteer base with hands on experience for all activities was nurtured throughout the project.

Irvin House has secured funding to build on the model of *Count us in!* and has incorporated elements of the project into a model of Case Management of residents.

Dissemination of project products

The development of a DVD and still photography of project activities was completed. These products will be used to share the project learnings. Presentation at aged care forums and publication in journals has also been undertaken.

Recommendations for future projects

Recommendations made by the project participants are: to use the Department of Human Services regional Aged Care forums to disseminate information on the lessons learned from the *Count us in!* initiative which vary greatly between project sites to inform good practice across the aged care sector.

The *Count us in!* project has provided a worthy research platform. The most vulnerable group in residential aged care facilities are sufferers of dementia and these people are most in need of meaningful social inclusion. Reduced cognitive capacity deems them unable to voice choices and interests. The *Count us in!* project demonstrated that cognitive decline is, to some extent, reversible. A recent research article by Pham et al establishes that enriching environments with physical, social and sensory stimuli profoundly increases neural growth in both damaged and aged brains.

Social inclusion for all residents of aged care facilities requires further exploration. Disengagement and withdrawal from society is commonly considered appropriate when entering residential aged care, and despite advances remains the norm rather than the exception.

For more information contact

Key Project Contact Kaye Ervin
Title A/Nurse Unit Manager
Telephone 5871 2284
Email ervink@humehealth.org.au
Project Officers Wendy Farrall, Joanne McDowall,
Wendy Alderton and Leanne Tait

Project name **Changing Faces: Across the Ages, Across the Generations Intergenerational Portfolios**

Organisation **Bendigo Health Care Group and La Trobe University**

PSRACS Joan Pinder Nursing Home
Stella Anderson Nursing Home
Golden Oaks Nursing Home

Funding \$20,000

Aim To break down barriers to social inclusion, on changing behaviours, attitudes and cultures and on moving towards a more inclusive life for people in residential aged care.

Objectives To produce six intergenerational portfolios of residents.

Activities

- Meetings with staff to discuss the selection of six residents to participate in the intergenerational portfolios.
- Meetings held with residents and their families.
- Student interaction with residents to obtain information about residents lives.
- Photo shoots held of the residents to develop photo banners and albums.

Key achievements An exhibition of the six folios was held in the La Trobe University Visual Arts Centre in Bendigo during Seniors week in October 2007 with an opening launched by the local member Jacinta Allen. It was a great success especially for the residents and their families. The photo albums presented to the residents on the day were a *special bonus*, with the catalogues an excellent product outcome of the *Count us in!* project.

Another key achievement was integrating the *Count us in!* Intergenerational Portfolios project into Tertiary Curriculum subjects for School of Nursing and Midwifery and School of Visual Arts and Design students.

Sustainable strategies Project team from La Trobe University will continue with the Intergenerational Portfolios project in 2008. Nursing students will be able to interview residents as part of a 1st Year subject and the photography students will take photographs as part of their 2nd year assessment requirements.

Bendigo Health will offer continued support of the initiative.

Dissemination of project products The project photo albums and catalogues were given to residents and families. Catalogues were given to students.

Photo banners were exhibited in La Trobe University Bendigo Campus in Semester 1 2008.

These banners will be displayed in the three residential aged care services and will be used to highlight and promote life in residential services across the State.

Recommendations for future projects

Project team would like to continue with the development of portfolios in 2008.

Funding is required to assist with the production and costs of banners, photo albums and catalogues for residents and families.

For more information contact

Key Project Contact Dr Julie Ellis, La Trobe University
Marlene Connaughton, Bendigo Health

Telephone Julie Ellis – 0434609067
Marlene Connaughton – 5444 6201

Email j.ellis@latrobe.edu.au
mconnaug@bendigohealth.org.au

Project name **Rural Rescue**

Organisation **Kyneton District Health Service**

PSRACS Thomas Hogan Wing Nursing Home

Funding \$19,554

Aim To enable people in care to have the opportunity to be included in community groups and events, to begin to change attitudes and break down barriers impeding social inclusion and to build networks to achieve sustainable outcomes.

- Objectives**
- Identify stakeholders and teams to undertake implementation of the project.
 - Identify residents who would benefit most and develop individual plans for them.
 - Promote awareness of the project aims within the facility, community, across all departments within the health services provider and amongst the broader community.
 - Ensure ongoing consultation and commitment from community groups selected for participation.
 - Explore ongoing funding opportunities to ensure that the program is self-sustaining.
 - Maintain and preserve the privacy and dignity of individual residents and develop strategies to allow participation to the extent of ability.
 - Open channels of communication for residents.
 - Evaluate the success of the project and identify issues of concern with integration.

- Activities** Community connection was the key focus and activities included:
- Country Women’s Association: initial links established to enable female residents to attend monthly meetings;
 - Newham and District Landcare Group: Commence propagation of indigenous plants for use by local landholders;
 - Sacred Heart College Kyneton: Agreement for a limited number of students to visit the facility under supervision;
 - Kyneton District Disability Support: established links with members to explore the feasibility of a resident attending support group;
 - The Men’s Shed: undertake a social profile of the male residents to attend men-only community events;
 - Thomas Hogan Community Garden: Development of an outdoor community vegetable garden, chicken coop and plant nursery;
 - IT Community Contact: Explored the viability of accessing a computer and the internet to enhance community links and maintain social contact and mental stimulation for residents.

Key achievements **Landcare:** Media coverage of Landcare’s involvement with residents helping to rescue a nationally endangered plant species highlighted the inclusion of elderly in environmental awareness. Sales of tubestock have commenced.

Community Garden: A successful venture which established the community chicken coop, residents assisted with livestock management, developed marketing skills for dealing with produce and responsible handling of profits.

Disability Support Group: A resident who attended the group was invited to remain as an advisor to Council for two years.

Recognition of the project value and the importance of social inclusion for residents by management, senior staff and non-residential departments within the organisation was a highlight of the project.

Challenges

Changing attitudes: Non-project staff raised concerns that aspects of the project may result in extra tasks and workload. This was addressed by the project team communicating with people at the ward level, discussion held with the nurse business manager and involving key staff in implementation aspects of the project. A shift in attitude was observed as project outcomes were achieved and most staff and carers volunteered to be involved with parts of the project.

Transportation of residents to community venues and meetings remain an ongoing concern. The limited number of disabled taxis in rural areas was the reason for several planned trips to community activities being cancelled. This has been a major barrier in implementing planned aspects of this project.

Deteriorated health status of residents profiled to participate in planned community groups had to be withdrawn from the project. Onsite program activities ensured these residents were able to participate in other activities.

Sustainable strategies

Suitable community groups selected where access by residents can continue post funding period.

Onsite community activities such as the chicken coop and vegetable garden can be self sustaining with funds obtained from sold produce to be used towards ongoing costs.

Computer and internet access to be factored into the facility's operating budget. Planned training program for staff to assist residents and monitor security concerns planned.

Recommendations for future projects

A pooling of results from all *Count us in!* projects to be shared across the State would be valuable for any future social inclusion programs targeting residents in aged care. Some strategies for this could include: a publication of collated outcomes; online discussion forums and web access such as *My Connected Community*; presentation of highlights and/or barriers at a conference including project team members; feedback data from residents, carers and staff where initiatives were implemented.

A 12 months project duration period would enable a more comprehensive view of sustainability of the project. Aspects of the project took place in the winter months of the year. This delayed the development of the on-site community vegetable garden and farmer's market as some community groups go into recess for winter especially in central Victoria. Seasonal variability may be a factor for future planned activities.

Research into transport options during the planning stage of the project is necessary. Establishing agreements with local taxi companies to inform them of up and coming community events could overcome a significant barrier to implementing planned social inclusion activities.

Structural issues around funding streams and access rules remain a large barrier for residents in participating in our rural community. There are several groups and activities which would be excellent for some residents but they cannot attend because the classification of being a nursing home resident precludes their involvement.

For more information contact

Key Project Contact Cath Bermingham
Title Project Manager
Telephone 5422 9910
Email cbermingham@kynetonhealth.org.au
Project Officers Phillip Wilson

Project name *Count us in!*

Organisation Maryborough District Health Service

Funding \$20,000

Aim Assist residents within aged care facilities to participate in planned community events to promote social inclusion for people in residential aged care.

Objectives

- Establish community connections and networks with local community aged groups, schools and volunteer support.
- Raise community awareness of the need for social inclusion for people in residential aged care and to see residents as active participants in the community.
- Increase the number of volunteers participating in residential aged care facilities.

Activities The **Dunolly Primary School** hosted a morning get together with residents at the Dunolly Nursing Home. Six residents joined the students at the school for songs, stories, games and lively chats before sharing morning tea. This was a very rewarding experience for both the students and residents. *Faces were beaming!*

Maryborough Education Centre hosted a performing arts experience called *The Circus Spectacular*. Residents attended the dress rehearsal of the student's performance of *Shiver Me Timbers*. Residents mingled and chatted to brightly made up young performers and also enjoyed lunch at the school hall.

Operation Christmas Child project saw the Avoca Nursing Home residents and Avoca Primary School students working together on a community project wrapping gifts for disadvantaged children overseas. This project encouraged conversations and exchange of histories.

Dancing with the Stars held in Avoca involved 150 residents from Maryborough nursing home, day centres and community groups from across the greater Goldfields and Pyrenees Shire. Activities included a display of community dancers including Belly Dancers to Boot Scooting and music groups. A dance for carers and wheelchair clients was thrilling for all to watch.

Key achievements Residents were involved in the successful cross generational events with students from schools in the towns of Avoca, Dunolly and Maryborough.

Through the community awareness campaign residents were seen to be **active participants in the community**. This process also raised the need for more volunteers to assist with residents taking a more active and involved role in community activities. This increased volunteer numbers in the aged care facilities.

Residents have joined other community groups in a variety of planned events in their local areas.

Provide assistance to residents to participate in community events was achieved through the community connections made with local day centres, Senior Citizens Groups and Council run Planned Activity Groups for the aged.

Build capacity of staff: established partnerships with other community aged care groups. Staff established community networks with an increase in community group contacts and further developed their skills to plan for future activities. Staff have

gained increased knowledge in personalised care planning and catering for the social events.

Challenges Due to the short timelines of the project challenges were experienced in developing connections with key stakeholders and staff in aged care facilities. This was overcome by the project worker rearranging times and focusing on other aspects of the project tasks until staff were available.

Some community groups were reluctant to become involved with the project due to the short term nature of the project.

Sustainable strategies The project established the following sustainable strategies: developed links between the residential aged care facilities and the school; schools from Avoca, Dunolly and Maryborough will incorporate some of the activities into school curriculum; will develop partnerships and share resources with similar groups to sustain ongoing provision of the *Count us in!* project; and maintain close connections with key contact staff to assist with ongoing project sustainability.

Dissemination of project products Information is shared across the campuses of the Maryborough District Health Service through newsletter and Aged Care forums.

Team and staff development meetings provide a good forum to discuss and share information.

- Recommendations for future projects**
- Ongoing implementation of *Count us in!*
 - Key contact people need to maintain links with community groups and aged care facilities. The project worker provided this information to both groups to ensure ongoing support of this project.
 - Investment in planning and establishing a working party to maintain momentum of the project is essential.
 - Engagement with community groups to encourage and increase volunteer capacity within aged care facilities to encourage social inclusion for people in residential aged care.
 - Use of local media to raise community awareness and involvement can sustain social inclusion activities.

For more information contact

Key Project Contact Trevor Miles
Title Director of Nursing Avoca Campus
Telephone 5465 1200
Email tmiles@mdhs.vic.gov.au

Project name	Social Inclusion for Russian (Speaking) People in Residential Aged Care
Organisation	Russian Ethnic Representative Council
PSRACS	Engaged with Russian speaking residents across various PSRACS
Funding	\$20,000
Aim	To provide opportunities for Russian (speaking) residents to engage in social inclusion opportunities in the community.
Objectives	<ul style="list-style-type: none"> • Facilitate access and participation in current activities or use resources that can be easily adapted to encourage social inclusion (e.g. life history, online communication). • Provide a broad community education campaign within the PSRACS and in the wider community. • Increase community awareness of social inclusion for residents and improve the community's attitude and acceptance of the role residents play as important and valued members of the community. • Produce a product that will be available for on-going community education and promotion (DVD/Oral History Kit) of social inclusion of residents. • Develop an understanding of the wishes and needs of residents and how they would like to be involved in the wider community. • Provide opportunities for more active residents to attend and participate in Planned Activity Groups and other Seniors Groups. • Provide opportunities to increase mental stimulation for the residents and encourage participation in the project activities. • Develop and improve resident's self-esteem and confidence so that they are willing to be involved in connecting with the wider community. • Ensure on-going publicity of the project is available into the future (post-project).
Activities	<ul style="list-style-type: none"> • Development of four articles to promote social inclusion of residents written and printed in the <i>Vestnik newsletter</i>. The articles focused on the benefits of having an inclusive society. • 35 community organisations were informed about the <i>Count us in!</i> project to encourage community connection. Total audience approximately 500 people. • Provision of three 30 minute interviews/appearances on Russian radio program 3ZZZ and two talks given to the Russian program on SBS. • Three focus sessions held with members of the Russian pensioner and senior citizens groups. • The provision of Russian phrases and phonetic pronunciation aids given to ten staff at PSRACS. • Established two groups of five residents to meet weekly to connect on-line to encourage communication between residents, volunteers and the community.

Key achievements

The key achievement of the project was the attendance and participation by residents post the initial planning and community development phase, the intensive implementation of encouragement and assistance to be involved.

Seven residents were placed on the *Vestnik* mailing list (distributed to 2,000 homes) to receive monthly newsletters, information, interesting reading material and promotional information about community, social and cultural events.

Two residents were involved with the HACC Telelink conference calls to chat to nine other Russian speakers and to hear about useful information once a week.

One resident was linked to the weekly Russian Planned Activity Group through the help of a volunteer with a bus driver picking up participants along the way.

Two residents were connected to the weekly Russian Senior Citizen's group with members asked to volunteer to bring, involve and look after the resident.

Six community social and cultural events were held in the four months of the project with all residents invited to attend. Barriers to the resident's participation were identified and addressed and volunteers provided support and the community bus provided transport.

Four residents were connected to Russian speaking volunteers who visited residents for two hours a week for the duration of the project.

On average four participants attended community activities on a regular basis. Music, colour and dance seemed to be the greatest attractions.

Challenges

Implementation difficulties: Until the project officer was employed, some minimal tasks were undertaken by two staff.

Initially there was some reluctance from residents to leave the safety and confinement of the facility, however strong encouragement and use of different strategies saw a shift in participation. After a few attendances most were happy to continue.

Lack of qualified and experienced part-time staff. Project officer role was critical to the success of the project. Some tasks were completed by volunteers working in the RERC office.

Resident reference group did not succeed over the period of the project due to small numbers of Russian residents located in one facility, the wide spread scatter of Russian residents across the state and the poor cognitive and physical health of residents.

Reluctance of Russian schools to involve student participation to record resident's oral history and student visits.

Other project challenges included privacy issues regarding the sharing of resident information with external organisations in order to make contacts and establish networks for the purposes of the project.

Sustainable strategies RERC will continue to promote the *Count us in!* project principles for social inclusion through its ongoing projects, especially through Victorian Seniors Festival and the Home and Community Care programs.

Dissemination of project products Some very *good news stories* based on case notes, volunteer feedback and residents provides information on the importance and the impact the project made on residents, staff and volunteers.

The development of an online forum through the Victorian State Library platform “My Connected Community” at <http://mc2.vicnet.net.au/home/countusn/index.html>

Recommendations for future projects With a longer project timeframe of 12 months the RERC would have trialled other activities and could have established more sustainable *infrastructure* with significant change made in the community and resident’s attitudes.

Expand the Community Visitors Scheme funded by the Commonwealth Department of Health and Ageing.

Expand eligibility of HACC funded social activities to cover residents of PSRACS.

Continue funding of the *Count us in!* initiative.

For more information contact

Key Project Contact	Alexander Abramoff
Title	Volunteer Coordinator
Telephone	9415 6899
Email	alexander.abramoff@rerc.org.au

Project name **On-Line Learning for Older Learners**

Organisation **Thornbury Women’s Neighbourhood House**

PSRACS Boyne Russell House Melbourne Health
Darley House Austin Health

Funding \$19,360

Aim Investigate, plan, deliver and produce a guide for inclusion of residents in online learning projects.

Objectives To undertake Participatory Action Research on social inclusion for residents enabling residents to take an active role in identifying and addressing the barriers that hinder a more positive and broader social engagement.

Activities The production of a unique and memorable collection of life narratives from the residents of Darley House. The book title *Lest We Forget* was chosen by the older residents (with mild dementia or Alzheimer’s) of the public residential care facility in Heidelberg Victoria and includes family favourite recipes.

An afternoon of cooking, music, dancing and celebration was held to mark the completion of the weekly workshops to help break down residents social isolation. The resident’s families, friends, support networks and the staff at Darley House, were entertained by Turkish dancing and bread making. There was also a performance by the Thornbury Women’s Neighbourhood House resident Elvis look alike, who engaged the guests as did the piano accordionist playing old sentimental favourites of a bygone era. Both the residents who joined in the weekly community workshops and those who came for the afternoon reflected on the positive experience these activities of music and multi media had done for their lives. The afternoon event was covered by the local newspaper.

Key achievements

- Research undertaken on the needs and expectations of residents in Darley House.
- Compilation of a residents recipe book *Lest We Forget* that documented favourite recipes, life stories, photographs of peoples memorable moments.
- The delivery of weekly workshops with resident participation and interaction using multi media and musical activities which provided social connection with community members and provided an opportunity for residents to engage and learn about online communication with family, friends and community using email, *My Connected Community* and search engines.
- Held community events at Russell Boyne House and Darley House.
- Darley residents were presented with a draft copy of their recipe book which included Turkish bread making and dancing, sharing of recipes, songs and the Elvis performance. Boyne Russell had a similar event.

Challenges Barriers were identified and successfully addressed throughout the project.

The limited experience of aged care staff working with community groups was overcome through the project partners caring and sensitive approach to the needs of residents and ongoing consultation with residents, support networks, management and staff.

Communication with people from culturally and linguistically diverse backgrounds was a significant stumbling block however this was overcome through employing the universal language of music, dance and laughter which created an inclusive environment for all.

Engagement of staff was crucial to the success of the project. The inclusion of staff in the research and having their involvement in the reference group with direction from the project group provided invaluable information and support.

Some barriers which were not overcome included:

- Limited time and resources of the residential care staff and recreation manager which could act as a barrier for implementing future projects;
- High care dementia residents and residents with a language other than English found it impossible to engage in activities or tell their stories due to physical or cognitive impairment and language barriers.

- Sustainable strategies**
- Established regular Information Technology and multi media groups and musical/narrative workshops with the assistance of internal and external support networks.
 - Engaged community members and broader networks to volunteer their services and skills for the future.
 - Seek additional funding to continue at the grass roots level and expand into the local ageing community sector.
 - Engaged with PSRACS and support services to continue weekly/monthly *get togethers*.
 - Continued to be motivated and support strategies to break down social isolation within PSRACS.
 - Developed more family/local community support for residents. Celebrated the 100th birthday of a resident.
 - Formal invitations for residents of Darley House to take part in further projects linked to the lives of residents in PSRACS.

- Dissemination of project products**
- The *Lest We Forget* recipe book was distributed to the Darley House community and the project group's website.
 - Communicated and networked with other *Count us in!* project facilitators and workers.
 - Worked with local residential aged care services, community groups and networks such as Positive Ageing, University of the Third Age, Darebin Older Walkers Groups and various neighbourhood activity groups.

Recommendations for future projects

- Extend funding of the initiative to include older people living in other aged care facilities and older people living independently within the community.
- Fund projects which can involve residents to engage in music and memory recall therapy focusing on creative performance workshops such as small theatre performances, songs, vaudeville and cabaret.
- Fund regular cooking workshops which encourage interaction with resident families and community including local schools.
- Encourage and provide opportunities for residents to share life experiences/ philosophies and stories, with a focus on culture, food and the environment with the engagement of diverse/multi cultural community groups e.g. people from local Indigenous communities.

For more information contact

Key Project Contact Ursula Harrison
Title Project Manager
Telephone 9480 0466
Email Ursula@twnh.vic.edu.au
Project Officer Trish Posterino

Project name **Reflections**

Organisation **Infoxchange Australia and St Vincent's**

PSRACS Cambridge House St Vincent's

Funding \$19,690

Aim Create digital stories of residents lives and make these available to their personal networks.

Objectives To assist residents to recall past memories and have their life stories valued.
To develop an archive of Victorian history and culture which can be shared with the community.

Activities

- Relationship building initiated with St Vincent's to create an environment of trust and confidence prior to Infoxchange engaging with staff and residents at Cambridge House.
- Awareness building activity through an information session for Cambridge House residents and staff.
- Developed a completed digital story on CD.
- Include six narrator stories i.e. 5 residents and 1 staff member containing recorded interviews, a photographic sequence and complete text transcripts of recordings.
- Display the Digital Stories on YouTube using a URL.
- Launch the Digital Stories CD.
- Training was provided to staff to be able to use the features of the website.

Key achievements The launch of the Reflections digital story telling CD displayed significant positive feedback from residents and family, members of the community and staff from St Vincent's about the importance of the project and its impact on residents and staff.

Challenges There were some concerns raised by family members about the participation of residents as narrators. Residents were frequently unavailable during the interview and information sessions. Residents were often ill or unable to communicate. More visits were required which impacted on budget and time constraints.

Sustainable strategies Resident and staff stories have been recorded onto a CD which will be available at key community points including the local council and community libraries.

Stories have used the audio medium that allows residents to tell their stories in their own voice. Each story has its own photo gallery which can be browsed as people listen to resident's narratives.

The digital story telling technology has been designed for community members and others with limited written literacy. It can be used and distributed to current and new residents and family members and staff to ensure the ongoing impact and promotion of the project.

The content and material can also be used as a resource tool for workers in the aged care sector including nurses and activities coordinator.

Dissemination of project products

The digital stories provide more than life stories these are also an archive of Victorian history and culture. This resource should be shared with the community as a:

- Community resource available at the City of Yarra Library;
- Training Tool be used for staff; and
- Volunteer promotion amongst potential volunteers at St Vincent’s and Cambridge House.

General information and promotion via YouTube to promote St Vincent’s and Cambridge House services.

Recommendations for future projects

This is a model that can be replicated in other aged care sites. Infoxchange would partner with other aged care facilities to implement a similar project using their technological experience and expertise.

Run a competition to enable intergenerational understanding using digital story telling as the medium whereby grandchildren would interview their grandparents.

For more information contact

Key Project Contact Sriram Guddireddigari
Title Projects Officer
Telephone (03) 9418 7420
Email sriram@infoxchange.net.au

Project name The People, The Places & The Pleasures**Organisation** Brotherhood of St. Laurence**PSRACS** Jean Turner Nursing Home and Lotus Lodge Hostel
Peninsula Health**Funding** \$20,000**Aim** To nurture, maintain and improve the intimate bond between residents and their relatives by providing encouragement and skills needed to continue accessing the community once living in residential care, as feeling socially connected and part of the community as it impacts on one's wellbeing and quality of life.

To provide families and residents of the Jean Turner and Lotus Lodge with resources that describe the numerous senior friendly activities and places of interest in the Southern Mornington Peninsula region.

Objectives Define and utilise strategies for encouraging families and providing them with the skills and tools to comfortably access the community with their loved ones.This is achieved through the development of a family resource guide which outlines safe and supportive family-friendly activities and venues, and provides *How to tips* which address barriers to community access.**Outcomes** Publication of a family resource guide and a complementary DVD for residents of residential care facilities and their families. The resource provides a step by step guide showing ways to continue contact and strengthen relationships with residents in residential aged care.**Key achievements** A champion family was identified to promote the value of assisting residents to access their local community and participated in the promotional DVD. The family was one that accessed the community regularly. The DVD promoted the value of community life to residents and families.Completion of an occupational therapist's assessment of 30 local businesses and senior friendly places that residents and their families can access. *A Going out – Access Checklist* is included in the Activity Guide.

Activity staff took a lead role in identifying the needs of residents and families in order to engage with their local community. Staff expertise was used to develop the booklet in particular to identify enablers to engage residents and family members with their local community. Tips were provided to family members on how to maximise use of family visits despite residents being unable to leave the facility especially due to low mobility, behavioural issues and dementia care needs.

The Publication of the *Activity Guide– The People, The Places & The Pleasures* and creation of a DVD showcased the community experiences of residents and their families.

A Premiere Screening of the DVD was hosted which attracted 47 people including residents, family members, staff, and community businesses/members. The Premiere screening of the DVD was held on the weekend to encourage and enable families to attend.

Challenges Engaging residents and family members to participate in the project. New strategies were developed to engage residents and families. Staff actively contacted families and spoke personally to residents to invite them to participate and attend the Premiere Screening of the Activity Guide DVD.

Residents with high complex care needs and low mobility levels are often confronted with transport barriers to community access. Hence, the resource included activity ideas for *staying at home* and included methods for developing relationships and communication between residents and family members.

Sustainable strategies Peninsula Health Service:

- Has made a commitment to include the Activity Guide and DVD within their resident induction process;
- Will consider the cost of reprinting the Activity Guide to sustain its use for new families over a longer timeframe;
- Will consider the use of the Activity Guide as a training resource for volunteers working across Peninsula Health residential aged care services.

Dissemination of project products • The Activity Guide and DVD were distributed to 70 resident families and the *senior friendly* business partners involved in the project. The Activity Guide provides simple strategies for residents and family members to use to access their local community.

Recommendations for future projects Development of more local community activity guides for other public sector residential aged care services in Victoria using the Peninsula Health Service product as a template.

Create a website for *senior friendly* businesses and places.

Extend the project period to allow for better evaluation of project impacts.

- An evaluation questionnaire/ brochure was included with each Activity Guide for users to complete, but had a very low response rate.

The *My Connected Community* part of the project (website forum) was a great initiative to support the projects state-wide as it facilitated the ability to liaise with other services and discuss strategies implemented.

Share information and learnings about this project with other residential aged care services.

For more information contact

Key Project Contact Josephine Chow
Title Senior Occupational Therapist
Telephone (03) 5976 9031
Email jchow@phcn.vic.gov.au

Further information

For further details on this initiative please contact:

Margaret Summers
Manager
Residential Policy and Strategy Development
Residential Services Unit
Aged Care Branch
Department of Human Services
Phone (03) 9096 6962
Email: Margaret.Summers@dhs.vic.gov.au

Or

Gillian Dickson-Hughes
Senior Policy Advisor
Residential Policy and Strategy Development
Residential Services Unit
Aged Care Branch
Department of Human Services
Phone (03) 9096 8327
Email: Gillian.Dickson-Hughes@dhs.vic.gov.au

References

A Fairer Victoria Building on our commitment

Department of Victorian Communities (May 2007)

A Fairer Victoria Progress and Next Steps

Department of Victorian Communities (June 2006)

An Australian Social Inclusion Agenda

Election 07 Policy Document Australian Labor Party

http://www.alp.org.au/download/now/071122_social_inclusion.pdf

Count us in! social inclusion for people living in residential aged care

<http://www.health.vic.gov.au/agedcare/maintaining/countusin/index.htm>

SOCIAL INCLUSION: The next step for a fairer victoria

Ministerial Advisory Committee for Victorian Communities (May 2007)

The Community Visitors Scheme Visitors Handbook 4th Edition 2002

Commonwealth of Australia (2002)

Victorian Charter of Human Rights and responsibilities

Victorian Department of Justice: www.justice.vic.gov.au/humanrights

Victorian Equal Opportunity and Human Rights Commission:

www.humanrightscommission.vic.gov.au

Appendix 1

Count us in! list of resources

SkillsConnection (Formerly Colac Community Development Association Inc)

- Diversional Therapist Network.
- Activities Calendar of Events.

Lyndoch Warrnambool Inc.

- Sunday Seniors Radio Program – community radio.
- Media campaign promoting social inclusion for residents.

Resurrection Parish and Keysborough Learning Centre

- Media article on resident.

Eastern Access Community Health Service and Healesville & District U3A

- *Count us in!* Connecting care residents to the community Brochure.

West Gippsland Healthcare Group

- DVD recording of social engagement activities between residents and schools.
- Will develop a paper for publication in a professional association journal.

The Old Van Ltd.

- *On the Red Carpet* a short film (Still in production).

Moira Healthcare Alliance Inc.

- Communication strategy to distribute project information.
- Media release on project outcomes and developments for distribution to the health service.
- Quarterly newsletter to provide and share information on project outcomes between service coordinators.

Upper Murray Health and Community Services

- Resident profile poster presentations.

Cobram District Hospital

- Development of a DVD of project activities.
- Still photography of residents participating in project activities.

Bendigo Healthcare Group and La Trobe University

- Project photo albums and folio catalogue of residents.
- Photo banners with photographic displays of six intergenerational portfolios.

Kyneton District Health Service

- Development of an outdoor community vegetable garden, chick coop and plant nursery.

Maryborough District Health Service

- Development of a newsletter and aged care forum to share information about the project across services.

Russian Ethnic Representative Council

- Publication of four articles in the Russian *Vestnik* newsletter highlighting the benefits of an inclusive society.
- Three 30 minute interviews on Russian radio 3ZZZ and two presentations to SBS Russian radio.
- Russian phrases and phonetic pronunciation aids for PSRACS staff.

Thornbury Women's Neighbourhood House

- *Lest We Forget* a compilation of residents favourite recipes, life stories and photographs of memorable moments.

Infoxchange Australia and St Vincent's

- Digital story telling of six narrated stories on residents and staff.
- Display of the digital stories on YouTube.

Brotherhood of St Laurence

- *The People, The Places & The Pleasures* an Activity Guide and DVD showcasing the community experiences of residents and their families. The activity guide provides simple strategies for residents and family members on how to use and access their local community.

Appendix 2

Count us in! list of recommendations for future social inclusion projects

The following is a comprehensive list of recommendations made by the *Count us in!* pilot projects for services interested in developing and providing social inclusion opportunities for people in residential aged care.

SkillsConnection (Formerly Colac Community Development Association Inc.)

- This service delivery model should be ongoing. Other residential services have expressed interest in participating in any future projects.
- The success of the project has been due to the flexibility of service delivery, professional approach provided by staff and a high quality communication strategy with a focus on consultation.

Lyndoch, Warrnambool Inc.

- Education for all age groups about PSRACS and social inclusion.
- PSRACS to work with a variety of community groups that encourage and include resident participation.
- Conduct a wider needs assessment of all residents in relation to social inclusion and how this can be achieved by both the PSRACS and community groups.
- Increase capacity of broader community, PSRACS staff to support, encourage and empower residents to participate in the community following entry to residential aged care.
- Interests and individual preferences must be provided on entry to the aged care facility so that these do not get overlooked and are included in the residents care plan and lifestyle profiles.
- Action plans with goals and actions for staff, family and resident to continue their involvement in the community.
- Intake procedures can be enhanced to promote an expectation that participation in the community can continue post entry to residential aged care.
- Provide staff or volunteers to attend community interest groups with residents who wish to participate but need support to do so.
- Fund community interest groups to upgrade disabled access and toilets.

Resurrection Parish and Keysborough Learning Centre

- To continue funding of the project as it *has rekindled the light and spirit of these men.*

Eastern Access Community Health Service and Healesville & District U3A

- The model of implementing classes or programs within specialised facilities is simple and effective and can be applied to other organisations or groups such as special education units, English language schools, mental health institutions, public housing residents and so on.
- The key is to promote community strengthening via community engagement using focused projects. This can be achieved easily but requires the input of a project leader to oversee the many different organisations and agendas involved.

West Gippsland Healthcare Group

- To install sound voice recognition software for residents with limited or restricted use of their hands to maintain connection to family, friends and the community.

The Old Van Ltd.

- Engage a major media provider such as the Woman's Weekly Magazine to do some profiles on people and places in residential care and re-knitting them to everydayness of the world.
- The company is attempting to develop a project involving residents and professional 'elderly' actors to develop a potential television series. This would be in-house but circulated to other residents with episodes of up to 20 minutes.

Moira Healthcare Alliance Inc.

- Fund community groups to be inclusive of people in residential aged care.
- PSRACS to be funded for coordination of social inclusion outcomes that are not specific to social outings.
- Hold a forum to share ideas, challenge and educate PSRACS.
- Social inclusion is a health promotion approach.
- Broader community campaigns in regard to social inclusion for residents to be the norm.
- Deinstitutionalise residential aged care.

Upper Murray Health and Community Services

- Consultations with key stakeholders to seek views, ideas, identify activities, barriers and solutions.
- Keep activities as simple as possible to ensure ongoing sustainability.
- Provide training and support to volunteers and staff to ensure all are aware of roles, responsibilities and expectations.

Cobram District Hospital

- Use the Department of Human Services regional Aged Care forums to disseminate information on the lessons learned from the *Count us in!* initiative which vary greatly between project sites to inform practice across the aged care sector.
- The *Count us in!* project has provided a worthy research platform. The most vulnerable group in residential aged care facilities are sufferers of dementia, and are also those most in need of meaningful social inclusion.
- Reduced cognitive capacity deems them unable to voice choices and interests. The *Count us in!* project demonstrated that cognitive decline is, to some extent, reversible. A recent research article by Pham et al establishes that enriching environments with physical, social and sensory stimuli profoundly increases neural growth in both damaged and aged brains.
- Social inclusion for all residents of aged care facilities requires further exploration. Disengagement and withdrawal from society is commonly considered appropriate when entering residential aged care, and despite advances remains the norm rather than the exception.

Bendigo Healthcare Group and La Trobe University

- Project team would like to repeat the development of portfolios in 2008.
- Additional funding to assist with the production and costs of banners, photo albums and catalogues for residents and families.

Kyneton District Health Service

- A pooling of results from all *Count us in!* projects to be shared across the State would be valuable for any future social inclusion programs targeting residents in aged care including: a publication of collated outcomes; online discussion forums and web access such as *My Connected Community*; presentation of highlights or barriers at a conference including project team members; feedback data from residents, carers and staff where initiatives were implemented.
- A 12 months project duration period to enable a more comprehensive view of project sustainability. Aspects of the project took place in the winter months of the year. This delayed the development of the on-site community vegetable garden and farmer's market as some community go into recess for winter especially in central Victoria. Seasonal variability may be a factor for future planned activities.
- Research into transport options during the planning stage of the project is necessary. Establishing agreements with local taxi companies to inform them of up and coming community events could overcome a significant barrier to implementing planned social inclusion activities.
- Structural issues around funding streams and access rules remain a large barrier for residents in participating in our rural community. There are several groups and activities which would be excellent for some residents but they cannot attend because the classification of being a nursing home resident precludes their involvement.

Maryborough District Health Service

- Ongoing implementation of *Count us in!*
- Key contact people need to maintain links with community groups and aged care facilities. The project worker provided this information to both groups to ensure ongoing support of this project.
- Investment in the planning and establishing a working party to maintain momentum of the project is essential.
- Engagement with community groups to encourage and increase volunteer capacity within aged care facilities to encourage social inclusion for people in residential aged care.
- Use of local media to raise community awareness and involvement can sustain social inclusion activities.

Russian Ethnic Representative Council (RERC)

- With a longer project timeframe of 12 months RERC would have trialled other activities and could have allowed more sustainable infrastructure to be established with significant change in community and resident's attitudes.
- Expand the Community Visitors Scheme funded by the Commonwealth Department of Health and Ageing.
- Expand the eligibility of HACCC funded social activities to cover residents of PSRACS.
- Continue funding of the *Count us in!* initiative.

Thornbury Women's Neighbourhood House

- Extend funding of the initiative to include older people living in other aged care facilities and older people living independently within the community.
- Fund projects which can involve residents to engage in music and memory recall therapy focusing on creative performance workshops such as small theatre performances, songs, vaudeville and cabaret.
- Fund regular cooking workshops which encourage interaction with resident families and community including local schools.
- Encourage and provide opportunities for residents to share life experiences/ philosophies and stories, with a focus on culture, food and the environment with the engagement of diverse/multi cultural community groups e.g. people from local Indigenous communities.

Infoxchange Australia and St Vincent's

- This is a model that can be replicated in other aged care sites. Infoxchange would partner with other aged care facilities to implement a similar project using their technological experience and expertise.
- Run a competition to enable intergenerational understanding using digital story telling as the medium. Grandchildren would interview their grandparents.

Brotherhood of St Laurence

- Development of more local community Activity Guides for other public sector residential aged care services in Victoria using the Peninsula Health Service product as a template.
- Create a website for senior friendly businesses and places.
- Extend the project period to allow for better evaluation of project impacts. An evaluation questionnaire/ brochure was included with each Activity Guide for users to complete, but had a very low response rate.
- The My Connected Community part of the project (website forum) was a great initiative to support the projects state-wide as it facilitated the ability to liaise with other services and discuss strategies implemented.
- Share information and learnings about this project with other residential aged care services.

