

Pursuing a vision for change in aged care

Impacts and outcomes of the BSL–RMIT TRACS project

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Teaching and Research Aged Care Services (TRACS) was a Commonwealth initiative funded by the Aged Care Workforce Fund. Its main aim was to better prepare the workforce to care and support older adults in residential care. The expected growth in residential care and anticipated workforce pressures, changing consumer expectations and the increasingly complex health and care needs of residents, provided the impetus for the nationwide initiative.

TRACS were defined as aged care services that combined teaching, research, clinical care and service delivery in the one location to enhance the capability of residential aged care facilities (RACFs) to operate as learning environments. The initiative focused on workforce development, such as clinical placements and training, curriculum development and inter-professional learning. It was envisaged, however, that the emphasis on training and professional development would encourage a variety of TRACS models, demonstrating far-reaching benefits for care recipients, care workers, aged care students and the industry.

From 2011–12 to 2014–15 the Workforce Fund allocated a total of \$8.3 million across 16 individual projects. One of these, a partnership between the Brotherhood of St Laurence (BSL) and RMIT, was designed to develop Sumner House (a 42-bed RACF operated by the BSL) as a Centre of Excellence, enhance resident wellbeing and improve support for aged care staff and students. The project partners pursued an ambitious agenda for change that was partially realised. Although challenging and at times contested, the aims and objectives of the project, and the various initiatives introduced, revealed the important link between research and service provision in aged care, the long-term benefits of establishing RACFs as learning environments and the ongoing work required to consolidate change.

Key points

- **The scale of the changes proposed by the project was difficult to achieve, but it enabled the identification of barriers and appropriate strategies for pursuing future change.** The stated project aims, objectives, and outcomes represented major, ongoing change. The aims of establishing Sumner House as a Centre of Excellence built on integrated, innovative care and supporting the workforce to deliver complex and quality care became long-term goals, to be achieved beyond the funding timeline. Accordingly, several project initiatives focused on establishing processes for achieving long-term aims.

With ambitious goals the partners encountered various challenges and points of resistance. Such challenges emanated from multiple sources: the different perspectives of researchers, educators and service providers; organisational priorities; work routines; staff concerns; funding and regulatory constraints; and an established culture of care. The culture of residential care, as represented at Sumner House (and at many other facilities), emerged as a key concern for the partners, and helped to explain why change was so difficult. The attempt to shift care towards a more relational focus was the biggest challenge. Overall, the project partners developed a more pragmatic approach to change, which involved working with rather than against partner differences, and a greater appreciation of staff and resident interests.

- **Developing a shared vision enabled change to be considered seriously.** Integral to the project was the creation of a shared vision of Sumner House as a Centre of Excellence. This process created shared expectations and goals that were used to guide project initiatives. It also enabled conceptual frameworks such as the BSL Capabilities Approach to be included in the project scope. Barriers to realising the vision in practice

prompted subtle changes to it. Sumner House as a Centre Excellence became a long-term goal, with greater attention directed towards the *processes* involved in establishing a Centre of Excellence. This did not displace core aspects of the original vision, such as the focus on residents, a more relational approach to care and better support staff and students in their work and study.

- **Some positive steps were made in giving greater priority to residents' needs.** The project represented a bold attempt to put residents first in service development. This set the BSL–RMIT TRACS project apart from the other 15 TRACS projects. To this end, initiatives such as the integration of residents' needs into research and activities, development of a residents' iPad program and rebalancing care services with greater emphasis on social and relational care were introduced. In an industry noted for its emphasis on physical and clinical care, tight financial and regulatory controls and institutional constraints, significant barriers to achieving this were experienced. Only through a deeper understanding of such barriers will further change be realised.
- **The partnership opened Sumner House to outside influence and exchange.** Aged care settings can be closed to the outside world. Critical in the creation of a learning environment at Sumner House were the importing and exchange of new approaches to care. The involvement of a partner external to the BSL was crucial. The RMIT trainers brought to the project recent developments in student training and support, and also played a mediating role between Sumner House and the BSL registered training organisation. Ultimately, Sumner House benefited from a project structure that supported collaboration and open communication. The governance structure was effective in moderating the partners' differences about care and training, and using partner expertise to spark service innovation. Through ongoing links with RMIT, Sumner House is now in a better position to use outside influence to enhance care and student/staff support.
- **Workers were provided with additional support.** Preliminary research suggested that the multiple, often competing, demands faced by aged care workers at Sumner House were not fully appreciated. The added demands of the project, and the proposed changes to care practice, generated some resistance. Helping staff to perform their roles was an important concern for the project partners, and recognising the daily

stressful demands staff experienced daily was critical for identifying the types of support staff required. Initiatives such as a staff mentoring and reflective practice model, a new induction process and redesign of position descriptions, were developed as a result; and these commanded a large share of TRACS-funding. This was consistent with the overall aim of the TRACS initiative: good, quality care was contingent on satisfied, well-trained and supported care staff.

- **Some of the research supported by the project informed specific service developments.** For instance, the technology needs assessment conducted by the BSL RPC facilitated a resident iPad program, while the skills gap analysis by RMIT, which was one of the workforce development initiatives, led to additional topics for in-house training. And the RMIT Core Competencies study provides a blueprint for future care arrangements, though it remains to be seen how far this will translate into care practice.
- **Processes were established for ongoing collaboration.** Collaborative efforts need to be resourced and institutionalised. Significant staff time is required to maintain TRACS initiatives, such as additional training/education commitments, mentoring and reflective practice, and student placements, is significant. Nevertheless, Sumner House management have dedicated considerable time and resources to the continuation of TRACS activities. The RMIT student placement model and cooperation between the BSL and RMIT through the Institute for Social Support and Care (RMIT) offer the best opportunities for ongoing collaboration.

Background

The TRACS initiative was based on the Teaching Nursing Home (TNH) model. Initially developed in the United States during the 1960s, the model is a recent import to Australia. Like the TNH, TRACS attempts to link 'the separate spheres of research, clinical care and education and training through an affiliation or partnership between a RACF and an education or training provider' (Barnett, Abbey and Eyre 2011, p. 1). A core requirement of the TRACS guidelines was the establishment of such partnerships. As with the TNH model, the role of research is the distinguishing feature of TRACS models from other RACFs (Barnett, Abbey and Eyre 2011, p. 1).

Reviewing the literature and conducting interviews with key stakeholders, Barnett, Abbey and Eyre (2011)

present benefits to be gained from adopting the TNH model in the Australian context. These include raising the profile of aged care work, improved clinical experience, enhanced student learning and improved quality of care. Such benefits contemporary concerns about the sustainability of the aged care workforce, the increasingly complex needs of older adults in RACFs and growth of a consumer care culture. The TRACS initiative aimed to demonstrate through various models the short and long-term benefits of linking research, training/education and service provision within RACFs.

The BSL-RMIT TRACS Partnership

The BSL and RMIT established the basis of an ongoing partnership through the TRACS application process. There was from the start some synergy in the two organisations' interests and stated approaches to aged care and workforce training. Forming the partnership involved identifying the specific units to be involved, along with their respective roles. Unfortunately, not all of these units were involved in formulating the project plan, and this created long-term challenges. The Project Plan and Funding Agreement stipulated the role of the partners as follows:

- **education and training:** RMIT Community Services, School of Global and Urban Studies and BSL registered training organisation (RTO)
- **research:** RMIT Centre for Applied Research and BSL Research and Policy Centre (RPC), and
- **service provision** (BSL Sumner House)

In practice, and as expected, there was significant overlap across between the three areas; the groups had to work together to design and implement the project initiatives, in line with project aims and objectives.

Project aims and objectives

Two broad aims—establishing Sumner House as a Centre of Excellence built on integrated and innovative care delivery, and supporting the workforce to deliver quality, complex and integrated care—oriented the project objectives and outcomes. Under these aims, 12 project objectives were defined, but it soon became clear that they could not all be achieved within the limited period of funding. The partners developed a Program Logic setting out short-term objectives, to be achieved within the funding timeline, and medium- to long-term objectives extending beyond this timeframe. Establishing the processes for long-term change was therefore an important focus.

The research

The evidence used to evaluate the impacts and outcomes of the project is drawn from a broad base of documents, official records and interview or surveys with key stakeholders collected during the three years of the project.

The six key outcome areas of this evaluation were identified from the project aims and objectives: (1) putting residents first; (2) developing a shared vision; (3) establishing partnership; (4) supporting the workforce; (5) research-informed change; and (6) processes for ongoing collaboration. The concept of cultural change provided tools for understanding the opportunities and challenges of the six outcome areas.

The TRACS project also involved specific research studies:

- a process evaluation of the TRACS project
- a literature review about centres of excellence, particularly in aged care
- a baseline skills analysis of Sumner House staff
- a Sumner House technology needs assessment
- Core Competencies for Change at BSL.

Shifting the culture of care

The TRACS project at Sumner House identified culture and cultural change as a key factor in attempts to enhance residents' quality of life and improve the experience of care work. Through specific project initiatives multiple sources and layers of culture were revealed. While the project focused on the gradual introduction of new work practices, processes and staff routines, it began to affect some of the deeper, traditional assumptions that condition care provision.

Attempts to put residents first challenged dominant cultures of care in residential aged care facilities, such as those predicated on a medical or deficit model. The TRACS project introduced initiatives to improve the wellbeing and quality of life of Sumner House residents, such as the TRACS residents' group and the resident iPad program.

Key to promoting cultural change and shifting current care practices in RACFs was the RMIT Core Competencies for Change research project. This study identified 13 core competencies rated highly by at least two of the four stakeholder groups. The only core competency rated in the top ten across these four groups—residents, family/friends, staff and management—was 'treat residents as persons not jobs'.

The research report (Ramcharan et al. 2015) provides a series of recommendations that, when applied in conjunction with the Capabilities Approach, have the potential to remodel care at Sumner House, and may also be applied to other RACFs.

However, only towards the end of the project did the partners realise that the residents' group, the iPad program and the core competencies analysis were in effect attempts to affect the culture of Sumner House and that they could help reposition both staff and residents in the care relationship.

Developing a shared vision

The partners brought to the project diverse values and perspectives on care. This was to be expected given the many interests and professions involved in RACFs. Rather than working against such differences, the project worked initially towards a shared vision of Sumner House as a Centre of Excellence. This was achieved through partner and staff planning days, formal and informal discussions among stakeholders and ongoing negotiations between the partners.

This shared vision provided a road map for change. It also enabled the development of short, medium and long-term goals, and objectives aligned with each partner's responsibilities and areas of expertise. Partners were not wedded to a static vision, however. Their experience of implementing project initiatives facilitated changes to the original vision. Over time, the goal of Sumner House as a Centre of Excellence was recognised as unattainable within the funding timeframe. It became a long-term vision, with more emphasis placed on the *processes* for creating Centres of Excellence in aged care. Nevertheless, core aspects of the vision, such as a greater focus on residents' needs, a relational approach to care, and a satisfied and supported workforce remained as guiding principles.

The shared and evolving vision enabled existing frameworks, such as the Capabilities Approach used across BSL aged care services, to inform project objectives. Also incorporated were principles shared by the partners, such as a commitment to social justice.

Putting residents first

The project represented a bold attempt to put residents first in care delivery. This set the BSL-RMIT TRACS Project apart from most other TRACS projects. Several initiatives prioritising residents' social, emotional and personal needs were pursued.

This involved attempts at assessing residents' needs, and feeding the findings into project initiatives. For example:

- The Sumner House technology needs assessment established grounds for introducing a resident iPad program, and for allocating resources to purchasing iPads, setting up a wi-fi system and training staff to support resident iPad use. From this initiative, iPad use among residents has grown considerably, providing them with a resource to pursue their own interests and links to family, friends and other communities, as well as enabling staff to support residents' social needs.
- The establishment of a TRACS residents' group, which operated for about a year, provided a safe, supportive space for residents to discuss areas of concern. Issues raised were often fed back to the project partners and Sumner House management and staff. In some cases this prompted action, for example when residents reported the late delivery of mail and communication difficulties between residents, staff and management. The group enabled some residents to advocate for themselves. It also prompted proposals for resident training forums, one of which—'understanding dementia'—was conducted during the project.

Both of these activities attempted to prioritise the needs of residents and support some level of choice-making. There were, however, considerable barriers, including the limitations on staff time, a dominant focus on clinical care, and the fact that any resident proposal required staff support. Even so, the introduction of iPads and the resident group challenged assumptions about residents' ability to use technology and the capacity for residents to speak for themselves and on behalf of others. Recognising residents' capacities was considered by the partners as an essential component in rebalancing the care equation and improved care.

Establishing a constructive partnership

An effective partnership was contingent on the establishment of an effective governance and communication structure. Comprising a Project Steering Committee, Project Working Group and three sub-groups (Research, Workforce Development and Training, Sumner House Development and Implementation), the governance structure provided a vehicle for frank discussion of project opportunities and challenges, exchange of ideas and reporting of progress. In this way the project partners developed effective strategies for opening Sumner House to

outside influence, while establishing a platform for greater collaboration.

Ongoing contention over the values and assumptions about care and the workforce advocated by the different project partners was evident. Initially, such contention proved a barrier to progress. But, there developed through the governance structure and partner experience during the implementation of various project initiatives greater respect for different approaches to care. Insights from education, research and training could be added to the day-to-day experience of service delivery and compliance. Indeed, different ideas and approaches to care sparked service innovation, and were worked with rather than against in this process.

This process was facilitated through regular meetings of Project Working Group and sub-groups, informal discussions and the collaboration required to design and implement project initiatives. Of particular note in this respect were:

- the RMIT baseline skills analysis of Sumner House staff, which identified gaps in staff skills and knowledge. This provided a guide for the RMIT trainers and Sumner House management to develop in-house training topics to meet industry standards of best practice and exceed current education and training requirements.
- the redesign of the student and staff induction processes. This involved the RMIT trainers, the BSL RTO staff and Sumner House staff working together to improve the induction process in line with their respective expectations of student or staff support.

Through such collaborative initiatives, Sumner House has progressively opened up to outside influence and opportunities, a critical process in developing a learning environment. There are signs that this will continue, with the BSL Manager of Residential Services invited to sit on the academic advisory board of the BSL RTO, and key BSL residential services staff (including those at Sumner House) invited to participate in RMIT's Program Advisory Groups. Additional opportunities flowing from the project and representing Sumner House's increased exchange of ideas include involvement in a TeleHealth trial, an increase in student placements, and ongoing collaborative work with RMIT.

Supporting the workforce

The national TRACS initiative is predicated on the idea that care is improved through better trained and

supported care workers. Projected growth in the number of aged care residents, and the growing complexity of their needs requires a host of innovations designed to support care workers, raise the profile of aged care work and improve workers' knowledge and skills. It was thus logical that this area commanded a great share of the TRACS-funded resources. The project initiatives to support Sumner House care workers were:

- a Reflective Practice Mentoring model to increase staff support
- redevelopment of the student/staff induction process and student/staff handbooks
- a staff planning day outlining career paths available to care workers
- an enhanced in-house training program to include topics identified as skills/knowledge gaps and to promote a pro-active approach to learning
- redesign of position descriptions to afford greater attention to residents' needs and the competing demands that staff face
- instigation by RMIT of a student-on-placement model that combined classroom learning with practical/placement experience throughout the course of study, rather than at the end as in the traditional Certificate III in Aged Care model.

Several of these represented attempts to respect the multiple demands care workers face, including the needs of residents, keeping up with emerging knowledge, study requirements, regulatory responsibilities, organisational priorities and, importantly, the emotional demands of care work. The project initiatives were designed to provide specific tools for managing these demands. For instance mentoring and reflective practice allowed the staff to reflect on their practice in a supportive environment, in which the personal and emotional challenges might be dealt with constructively. Staff were also encouraged to draw on the support of their colleagues to manage daily demands. Feedback from management suggests that staff have responded positively to these initiatives, with a more welcoming attitude towards students on placement and new staff and a more relaxed work environment observed.

Research-informed change

An important aspect of the project was the opportunity to conduct research on key areas of care provision. Several research studies were enabled by the project and contributed in varying degree to project initiatives.

For instance:

- research provided evidence on the potential use of technology by Sumner House residents, helped introduce iPads into the current active living program, and posited a new, supportive role for staff to play with respect to residents' social needs
- by identifying qualities that residents, family, friends and management desired of care staff, the RMIT Core Competencies for Change research added support to a relational approach to care. The study provides an integrated model to guide care delivery, training, recruitment and the redesign of position descriptions.

The research studies within the project provided some evidence of the value of combining research, education and service delivery to enable RACFs to develop as learning environments.

Processes for ongoing collaboration

The TRACS project encouraged Sumner House staff and management to invest time and resources in various professional development activities. This has fostered ongoing commitment to activities, including the staff mentoring and reflective practice program.

The project has laid a foundation for ongoing developments, notably the redesign of staff position descriptions, continuation of the RMIT student placement model and formalisation of the BSL–RMIT partnership within the new Institute of Social Support and Care at RMIT.

Conclusion

This report details how TRACS initiatives designed to put residents first, enhance the support provided to staff and students, and promote alternative models of care have produced beneficial outcomes for residents, staff, students and management at Sumner House. It provides some lessons on why linking research and service developments is so important in aged care and other sectors, and also why establishing and maintaining such links is so challenging.

The project has revealed both the difficulties and opportunities involved in changing the organisation and culture of a residential aged care facility. It certainly suggests further work is required for residents' voices to be clearly heard on issues related to care provision, care governance and community living. However, by providing a series of tested strategies for engaging in the process of change, the project provides a base to build from and lessons that other organisations might find useful. It provides some

direction for how long-term visions for care at Sumner House, and the aged care sector more broadly, might be realised. For the BSL such directions should include:

- greater focus on the preliminary work required when establishing research and service partnerships
- cementing the RMIT–BSL partnership through formal agreement
- publishing of project achievements
- strategic efforts to incorporate the views of residents and the workforce in service developments.

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