

Evaluation of Arts & Reminiscence activity programme in residential care homes in the Wychavon District Council area, 29 September - 10 December 2015.



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Evaluation of Arts & Reminiscence activity programme in residential care homes in the Wychavon District Council area,

29 September - 10 December 2015.

Introduction

Between 29 September - 10 December 2015, a pilot programme of 30 arts & reminiscence activity sessions was delivered in 6 care homes in the Wychavon District Council area.



“This is the first time I’ve seen activity like this and it’s great how much [the residents] enjoy it. As a result we’ve started putting art stuff out in the day room and I’ve done some craft activity with the residents. It was good to have something focussed to do together”

Care Worker, The Priory

“I’ve had such a laugh and I’ve enjoyed this so much”

Participant, Rashwood House

During the programme,

- 102 individual dementia care home residents participated at least once
- 196 hands-on engagements took place
- 29% of participants took part in 3 or more sessions each

The six care homes were:

- | | |
|--|--|
| – Bricklehampton Hall Nursing Home, Pershore | – The Priory Rest Home, Droitwich |
| – Greenhill Park Care Home, Evesham | – Rashwood Care Home, Wychbold |
| – The Hawthorns Nursing Home, Evesham | – Willow Bank Residential Home, Throckmorton |



Background

The acknowledged value of arts & reminiscence activity for dementia patients

The value of mental and physical activity to the wellbeing and quality of life of older people with dementia is well documented¹ and is recognised by policy makers, artists, heritage professionals and by older people themselves.

Arts Council England, which now drives policy for the arts and museums sector, this January published the findings of a survey² which showed the different ways in which older people (aged 65+) value arts and culture. The headline findings demonstrate that older people themselves recognise its value:

- 76% of older people say arts and culture is **important in making them feel happy**
- 57% say arts and culture is important in **helping them meet other people**
- 60% say it is important in **encouraging them to get out and about**

In an accompanying statement³, Darren Henley, Chief Executive of Arts Council England said:

"We know that the arts can help to significantly improve health and wellbeing.

With research showing that engagement in the arts tails off as people get older, we need to get cleverer about how we engage older people and tackle the barriers to taking part."

One significant barrier for people in old age is their decreasing mobility, and in many cases, the onset of dementia, itself caused by a range of medical conditions. However, according to Department of Health's *National Dementia Strategy: Living Well with Dementia 2009-*

¹ Arts Council England, (March 2014), *The Value of Arts & Culture to People & Society, an evidence review*, URL: <http://www.artscouncil.org.uk/what-we-do/research-and-data/value-arts-and-culture-people-and-society-evidence-review/>

² Undertaken by ComRes, (January 2016) URL: <http://www.comres.co.uk/polls/arts-council-england-older-people-poll/>

³ Arts Council Press Release, (18 January 2016) URL: <http://www.artscouncil.org.uk/news/arts-council-news/new-research-finds-arts-and-culture-helps-combat-l/#sthash.SlzCwaVu.dpuf>

2014⁴, confinement to a residential home should not be an excuse deliberately to diminish an individual's quality of life.

"The social environment is important, and quality of life is as related to the richness of interactions and relationships as it is to the extent of brain disease."⁵

The strategy recommends *"assessment of the residential care provided and the potential for improvement to create a more therapeutic environment."*

Furthermore, according to the NHS Worcestershire's *Living Well with Dementia: a strategy for Worcestershire 2011-2016*⁶

"There is wide-ranging evidence of the value of arts and cultural services in improving the lives of people with dementia. The opportunities for self-expression, creativity and recall of memory from well organised programmes can be hugely beneficial, as well as the taking part in new social networks and the reduction in isolation which follows."

In Worcestershire ... a more structured approach would help to realise the potential for culture to enhance the quality of life."

In Worcestershire, both Wychavon District Council Arts Development team and the staff of Museums Worcestershire have worked to provide just such a structured approach since 2004.

The arts & heritage services

MUSEUMS WORCESTERSHIRE

Museums Worcestershire, and predecessor organisation, Worcestershire County Museums Service, has provided museum services to residential care homes in the county between 2004 and 2015 through the 'Museum on the Move' or MoM.

MoM was managed in that time by The Marches Network (formerly the Marches Curators Group), a long-standing partnership between WAVE (the Museums, Galleries and Archives of Wolverhampton) and the local authority-funded museums in the counties of Herefordshire, Worcs, Warks, Staffs and Shropshire.

Physically reaching people other services can't reach. A key aim in setting up Museum on the Move [MoM] was to bring museum collections to people ... As MoM takes exhibitions out into the communities which it serves, it is able to attract people who might not otherwise have an opportunity to visit a museum."⁷

⁴ Dept of Health, (2009), *National Dementia Strategy: Living Well with Dementia 2009-2014*, p.61, URL: <https://www.gov.uk/government/publications/living-well-with-dementia-a-national-dementia-strategy>

⁵ Dept of Health, (2009), p.30

⁶ NHS Worcestershire & Worcestershire County Council, (July 2011), p.25, URL: <http://education.worcestershire.nhs.uk/site-a-z/dementia/dementia-strategy/>

⁷ Ian Lawley, for the Marches Network, (Feb 2013), 'Transports of Delight: On Board the Museum on the Move'

The MoM allowed for flexibility at care homes: the interpretation team invited mobile residents on board to view the static exhibitions, or would take boxes of pre-selected historic objects into the main lounge for people to handle and examine at close range.

Funding for MoMs ceased in 2015, but Museums Worcestershire retained the services of the Interpreters who travelled with the bus and developed a series of 6 themed Reminiscence Suitcases that could be taken to care homes and day centres to provide therapeutic stimuli for residents with dementia or failing memory.



Above: David Jarrett leads a reminiscence session
Left: Sarah Millin introduces residents to the art of marbling

WYCHAVON DISTRICT COUNCIL COMMUNITY DEVELOPMENT TEAM

Wychavon DC Arts Development Officer has been commissioning music, poetry, art and dance sessions in care home residents with dementia since 2013. The sessions were usually performance-focussed and produced as 'one-off' events in the care homes.

Announcing the start of the 2014 season of activity, Jenny Davis said:

*"It's brilliant to be taking music and art back into care homes this year. We had a terrific response to the arts workshops supplied from various arts workers last year. The feedback we got from care workers was that there had been some really positive health and well-being benefits for the people being cared for in the homes and so we hope for the same again this year."*⁸

In 2015, Wychavon DC approached Museums Worcestershire about the possibility of expanding the arts provision and combining visual arts workshops with reminiscence activity to stimulate deeper engagement.

PARTNERSHIP

Museums Worcestershire and Wychavon DC agreed to work as partners to provide a pilot season of in-depth arts & reminiscence activity in 6 care homes in the Wychavon District.

⁸ 'Arts in the Community', Wychavon DC press release, 23 July 2014 URL <http://www.wychavon.gov.uk/news-and-alerts/-/blogs/arts-in-the-community>

A visual artist, Sarah Millin, was commissioned by Wychavon DC to provide the hands-on arts activity.

Museums Worcestershire appointed Julie Marsh from the Education Team to create 6 themed reminiscence suitcases and David Jarrett, from the former MoM team, to deliver reminiscence activity as part of the sessions.

Jenni Waugh Consulting Ltd was commissioned to evaluate the impact of these sessions upon the care home residents.

REMINISCENCE THEMES

The six themes are:

NATURE
FAMILY & CELEBRATIONS
HOLIDAYS
FOOD & SHOPPING
HOBBIES, RELAXATION & TOYS
HAIR & BEAUTY

In the event, as only 5 sessions took place, Hobbies and Hair & Beauty were merged.

For a full list of reminiscence materials used, see Appendix 1.



The care homes

The sessions took place in six different care homes in the Wychavon area:

- Bricklehampton Hall Nursing Home, Pershore
- Greenhill Park Care Home, Evesham
- The Hawthorns Nursing Home, Evesham
- The Priory Rest Home, Droitwich
- Rashwood Care Home, Wychbold
- Willow Bank Residential Home, Throckmorton

For further details of each residential home and its care philosophy, see Appendix 2.

Existing programme of activities

All of the care homes benefit from the contributions of community partners such as:

- Wychavon Community Arts and Museums Worcestershire
- Pets as Therapy
- volunteer aromatherapists and masseuses
- occasional visits from local groups or schools

Most rely on activities subsidised by third parties or provided voluntarily, although some have small pots of funding to pay for special events such as short outings, or special visitors such as a falconer, magicians or musicians.

Five of the six care homes visited employ an organiser specifically to produce and promote a programme of activities for residents. The most common forms of in-house activity in each of the homes include:

- Quizzes and word games
- Music and singing
- Movie matinees in the communal lounge

- Chairobics and gentle exercise
- Bingo, scrabble, dominoes and card games
- Hair & beauty salon
- Simple arts & crafts (card making, painting)

Four care homes in rural areas with substantial grounds are also able to offer:

- gardening
- rabbit and poultry keeping
- visits from local farmers bringing lambs, chicks, rabbits etc



The evaluation methodology

Jenni Waugh Consulting was asked to evaluate the ways in which the programmed activity contributed to the INCREASED WELLBEING of care home residents diagnosed with dementia, in particular, how it might encourage participants to:

- increase participation,
- keep learning,
- reduce isolation
- develop self expression
- encourage connection
- promote relaxation

Definition of well-being

In 2006, the UK Government cross-departmental Whitehall Well-Being Working Group sought to develop a 'shared understanding' of well-being. Well-being, it states, is:

"a positive physical, social and mental state; it is not just the absence of pain, discomfort and incapacity.

It requires that basic needs are met, that individuals have a sense of purpose, that they feel able to achieve important personal goals and participate in society.

*It is enhanced by conditions that include supportive personal relationships, strong and inclusive communities, good health, financial and personal security, rewarding employment, and a healthy attractive environment"*⁹

⁹ taken from *Well-Being Evaluation Tools: A Research and Development Project for the Big Lottery Fund (Final report)*, by Saamah Abdallah, Nicola Steuer, Nic Marks and Nicky Page, Centre For Well-Being, nef (new economics foundation), May 2008

Five Ways to Wellbeing

- Connect...
- Be Active...
- Take Notice...
- Keep Learning...
- Give...

New Economic Foundation: wellbeing outcomes

The NEF wellbeing outcomes framework formed the basis of the evaluation methodology. Jenni Waugh Consulting Ltd has used this framework to complete the evaluation of an equivalent arts and social care activity project for Wolverhampton Arts & Heritage Service: *Memories in the Making*; for the University of Birmingham's *Mingana Collections: Spreading the Word* project; and for Culture Coventry's *Creative Bridges* project.

Methodology

The findings of wellbeing surveys are, by definition, subjective, and apply only for the duration of the period during which the assessment took place. Ideally, in order to create a more representative measurement, and to provide evidence of changes to mood and wellbeing over time, with and without the project activity, participants or their observers should be encouraged to complete the measurement scales at set times on days when no activity takes place.

For participants with communication or memory difficulties, such as those with dementia, it is seldom possible to ask them to undertake such questionnaire surveys.

Therefore, the usual methodology is as follows:

- Care home staff or family carers who know the participants and who assist with the activity sessions are asked to complete the durational observation questionnaires at the conclusion of the workshops (for sample, see Appendix 3).
- The evaluator independently observes participants' behaviours at least twice (the first and last sessions) and triangulates the findings by interviewing staff, group leaders or relatives.
- The arts and reminiscence practitioners maintain a session log and participant register.

This material should provide sufficient data to evidence the contribution the activity makes to the residents' wellbeing for the duration of the project.



Delivery

The sessions

“the sessions have been so lively. Combining art and reminiscence activity means that even if the residents don’t get hands-on with the painting, they enjoy sitting and watching, or joining in with the chatter and singing”

Care Home Manager, Greenhill Park

Participants

83%	of the 102 participants were female	
8%	of participants engaged in all 5 sessions	
7%	...in 4 sessions	
14%	...in 3 sessions	
13%	...in 2 sessions	
59%	...in one session only	

"Each care home and resident profile was far more diverse than I could have ever imagined. Each care home had a very different layout for art activities, the residents needs were very unique with regards to mental, physical and social requirements. The care homes had very different levels of support and attitudes from carers and management, ranging from poor to excellent.

Some residents were far more engaged than [I] initially thought.

*Every person was unique and I had to try and develop an [activity] programme to involve everyone as much as possible to incorporate their mental, physical and social needs."*¹⁰

In all of the homes visited, residents were encouraged to decide for themselves whether they wished to participate in the arts and reminiscence activity. When interviewed however, each of the activities organisers stated that they prompted particular residents to take part as they knew this was *"the kind of thing [the named resident] likes"*.

Each of the 30 sessions were attended by an average of 7 participants who engaged with the activities for more than 10 minutes.

In reality, attendance figures at individual sessions fluctuated:

- in one home, the first session drew 9 participants, a figure which dropped to 3 by the 3rd session.

¹⁰ Practitioner 2 observations

- in another home, the open plan nature of the communal activity area meant that approximately 14 people dropped by during a single session to see what was happening, but only 7 sat down to participate for more than 10 minutes.

Such high numbers at a single session (up to 16 in one care home) caused problems for the delivery of sessions which are largely reliant on being able to maintain eye and voice contact with participants at all times in order to sustain their focus and attention.

Likewise, in order to develop any noticeable change in participants skills and engagement, it is helpful to work with the same participants each week, something that was not possible in all of the homes owing to participant's illness, care staff changes or other planned visits.

This lack of consistency presented difficulties both for the practitioners striving to build some form of relationship with participants, and for the evaluator in tracking any appreciable change in individuals skills, confidence or engagement.

"Just kept trying to adapt to the situation placed in. To try and go with the flow and stay calm in all situations. Insist on the numbers of people and to try and have the same residents back each week, although this rarely happened -due to ill health etc. "

Practitioner 2's observations



Preparation

The practitioners met before the first series of sessions to agree on the activities and reminiscence content. They were also given *"information on the residents that would be attending the workshops, so [were] aware that some residents had dementia, Alzheimers, Parkinsons, brain injuries, hearing, sight loss and mobility issues."*¹¹

However, they did not have the opportunity to make a site visit and meet prospective participants before the first 4 sessions took place. As a result, certain key elements were not in place at the first session, such as tables to work at, and care staff to assist in working with some of the more seriously ill participants.

In addition, without a site visit, the practitioners unable to estimate the ability level of some of the participants and so had to adjust the activities on the hoof to make them more appropriate and achievable. Over the 5 subsequent sessions, the practitioners, care home

¹¹ Practitioner 2 observations

staff and participants became better acquainted, leading to both groups becoming more confident with each other.

Before commencing the second phase of delivery, the Wychavon Arts Officer arranged for site visits which allowed the practitioners to address some of these issues before they began the sessions.

The practitioners



"This is the first time I've seen activity like this and it's great how much they enjoy it. As a result we've started putting art stuff out in the day room and I've done some craft activity with the residents. It was good to have something focussed to do together"

Care Worker, The Priory

"Working with Sarah and David has given me so many ideas for new crafts and activities on site that won't cost the earth to do. I also plan to use some of the art work in our new sensory space."

Activity Manager, Willow Bank

"The museum professional was male and closer in age to the participants than I was so could engage more on the reminiscence aspects.

Also the care homes have 95% women and it was said on more than several occasions that women missed the interaction with men. He sang, had appropriate witty repertoire, held ladies' hands and introduced himself to everyone and engaged extremely well with each individual both in the museum part and creatively in the art part."

Practitioner 2 observations



"I like him, He reminds me of my Dad"

Participant in Week 1



"One lady did not wish to be involved practically, but was happy to talk thoughtfully and quietly, despite the difficulties of remembering words or sustaining the thread of a conversation."

Practitioner 1's observations, week 7



Focus and engagement

Many of the participants were suffering from dementia or other forms of Acquired Brain Injury (e.g. caused by stroke or accident). The remainder were affected by visual and hearing impairments, or coordination and mobility difficulties.

The majority of participants with dementia or ABI could recall their names and elements of their early lives, but had difficulty recalling their exact age or the events of recent years.

10% of the participants were in very advanced stages of dementia and found it difficult to remain awake and focussed during sessions. With the assistance of care home staff, they could be encouraged to participate for around 10 minutes at a time before losing concentration and falling asleep or into a fugue state.

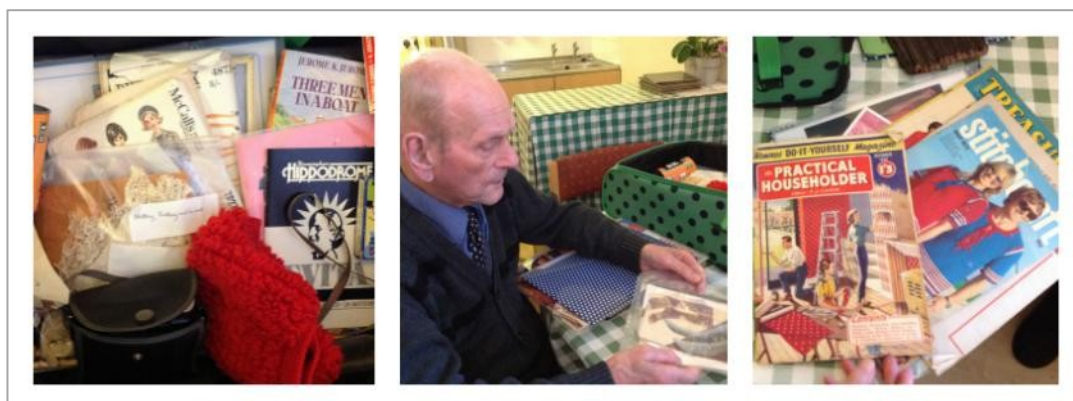
Sessions at 3 of the homes were watched by an average of 4 additional residents who did not actively participate, either because the session did not interest them, or because they were too ill to take part.

Often care home staff would describe such individuals as *"very sociable"*, *"likes to know what's going on"*.

Content

Each session began with the introduction of the week's reminiscence theme. The chosen themes were:

- Nature
- Holidays
- Hobbies, games & relaxation
- Families, royalty, pets & celebrations
- Shopping, hair & beauty



David Jarrett would pass around items from the reminiscence suitcases and encourage participants to handle items and share any memories or thoughts that came to mind. The themes generated different levels of interest depending on their familiarity to the participants.

As well as objects and images, the suitcases included CDs of music and sounds. Some of these were more popular than others. The high pitched repetitive tones of the CD of birdsong, whilst atmospheric, caused 2 participants to become very agitated. However, the CD of 1950s popular hits in the Holidays case *"encouraged the singing of well-known songs"*¹² and was the cause of great hilarity.

"All [themes] were popular and touched on the unique experiences of individuals in the group ... People liked to dress up and wear the hat, necklaces and sun glasses. Humorous items in the luggage went down well. They also seemed to like the Royal family books, hobbies, nature-birds eggs, holidays. There was something in the suitcase for everyone. The smells went down well, the carbolic soap woke one lady up!"

Practitioner 2's observations

Hair & Beauty and Holidays stimulated a lot of laughter and memories



After approximately 20 minutes of dedicated reminiscence activity, the art activity was introduced. Sarah brought with her a range of visual stimuli (books, pictures, photographs, postcards) and art materials, and had prepared 5 different art activities for residents to try over the series of sessions:

- mark-making and brushwork (to make a hanging bird)
- pastels and watercolour (drawing)
- mirror patterns and painting (to make butterflies)
- print-making (card-making)
- marbling
- cake decoration

Some residents were reluctant to engage with 'art' at first, either declaring that they were *"no good at art"* or that they *"can't draw"* or *"don't do drawing"*. Sarah adapted the art sessions to suit the mood of the participants, so that 'non-artists' could use templates to create simple cards or bird mobiles, whilst encouraging more confident participants to try using new materials (pastels and watercolour) if they showed an aptitude.

¹² Practitioner 1's observations, week 2.



"I was hoping that the residents would create imagery where they could create artwork based on the museum topics and make connections recording their personal memories. ...This did happen in some instances but overall a lot of the residents had later stages of dementia and were unable to communicate and remember."

As the sessions went on, regular participants felt confident enough to bring their own contributions:

*"D*** had brought a set of seaside postcards, which were shown round, and she offered to bring more cards and other items of interest next week."*

Practitioner 1's observations, Week 7

*"D*** had again brought relevant items: part of her wonderful cards collection, a scrap-book of old Evesham, some beautiful tapestry and embroidery. L*** also showed a fine embroidered tray-cloth with a Chinese dragon."*

It's encouraging that, having announced the following week's topic, some residents contribute items to look at."

Practitioner 1's observations, Week 8



"A mixture of watching and taking part, several using Sarah's provided materials in ways that most pleased them, including drawing, mixing all the paint on the palette to a brown paste, and (well outside what we planned but much fun for all) for face-painting helpers and staff with colourful dots and whiskers!"

Practitioner 1's observations, week 3

Timing

Five sessions were delivered in each of the 6 care homes, either during the morning (between 9.30am and 12pm) or in the afternoon (between 2pm and 4.30pm).

The timing of the morning sessions created a slight difficulty in two homes where residents were accustomed to rising later than 10am.

The afternoon slot had a better attendance rate, although some residents were sleepy after their lunch and so found it hard to maintain energy levels throughout.

Each session ran on average for about 1 hour 20 mins - which gave the practitioners time to explain what was happening, set out the reminiscence and art materials, and engage with each individual during the activity. Most residents departed after about an hour, whilst some continued to paint or talk after the rest of the group members had gone.



Location

All of the sessions took place in the communal areas of the homes, usually the dining room. Only one home had a dedicated activity room. Four of the care homes used their dining rooms for the sessions, which proved to be very suitable: spacious, accessible and with tables and chairs of the right height for working.

Some of the spaces were inappropriate for concentrated creative activity:

For example, the first 2 sessions at one care home were carried out in the communal lounge area. The residents were seated in comfortable armchairs, without side tables, and were unwilling to move to sit on hard-backed chairs at the one trestle table available. Consequently, only one resident participated in arts activity in the first week. In the 2nd week, the artist brought clipboards and 'dry' art materials (pencils and pastels) so the residents could at least work at their chairs. It was not until the 3rd week that one of the care staff facilitated the removal of the sessions to the communal dining room, whereupon they proceeded with much greater ease.

In another care home, all of the sessions took place in *"a small low-ceilinged [an open plan dining room], with wooden café tables and chairs, where noise levels are quite high, not helped by a loud lift alarm which is frequently bleeping nearby"*¹³. Residents in this home were noticeably more agitated, with incidents of shouting and upset on at least 3 occasions. Although up to 16 people would attend the sessions, few could be persuaded to linger and settle to concentrated activity.

Half of the participants at the sessions in a third care home were transported in very large wheelchairs which restricted movement and access for all, and caused safety concerns when crammed all together into the Activity Room. When one participant urgently needed to be moved from the room, all had to be wheeled out to make way for them.

¹³ Practitioner 1's observation, backed up by Evaluator's observations.

All of these logistical elements were eventually ironed out, but do prove the importance of site visits and closer conversation with care home staff in the planning stages.

Support from care staff in the homes

Individual engagements with care home staff, volunteers and family carers		
Activity managers / assistants	At five of six homes	20
Residential care staff	All homes	12
Family carers or volunteers		5

Five of the six homes employ a designated Activities Organiser who provided the practitioners key point of contact during sessions. However, owing to staffing shortages and other responsibilities in some of the homes, it was not always possible for care staff, even on occasion the designated Activities Organiser, to be able to provide support throughout all of the sessions.

It was noticeable that where care staff could take part, especially in the early sessions when the activities still seemed very new, residents were more relaxed and ready to engage with both reminiscence and arts activity. The easy repartee of the staff with their residents reassured participants. Furthermore, staff were able to prompt some reminiscence contributions, based on what they already knew of the participants' lives.



The results

Jenni Waugh Consulting was asked to evaluate the ways in which the programmed activity contributed to the **INCREASED WELLBEING** of care home residents diagnosed with dementia, in particular, how it might encourage participants to:

- **increase participation,**
- **keep learning,**
- **reduce isolation**
- **develop self expression**
- **encourage connection**
- **promote relaxation**

Wellbeing survey

The durational wellbeing survey

It was not possible to apply the NEF Wellbeing durational survey (appendix 3) to all of the participants owing to a number of factors including:

- time and staff constraints
- the severe illness of many of the participants
- the large size of the groups
- the poor continuity of attendance

Staff at one care home were able to apply the survey throughout the five sessions. The 7 participants were not consistently present throughout the series, which may explain the dip in engagement observed in week 4:

Week no:	1	2	3	4	5	
DID THE PEOPLE YOU CARE FOR SEEM...?						Average
To be enjoying themselves	5	5	5	5	5	5
Happy or contented	5	5	5	5	5	5
Engaged or focussed	4	5	5	4	5	5
Energised or lively	4	5	5	4	5	5
Engaging confidently with people	4	5	5	4	5	5
Relaxed	5	5	5	4	5	5
Physically coordinated	4	5	5	3	5	4
Able to make up their own mind	2	4	5	3	5	4

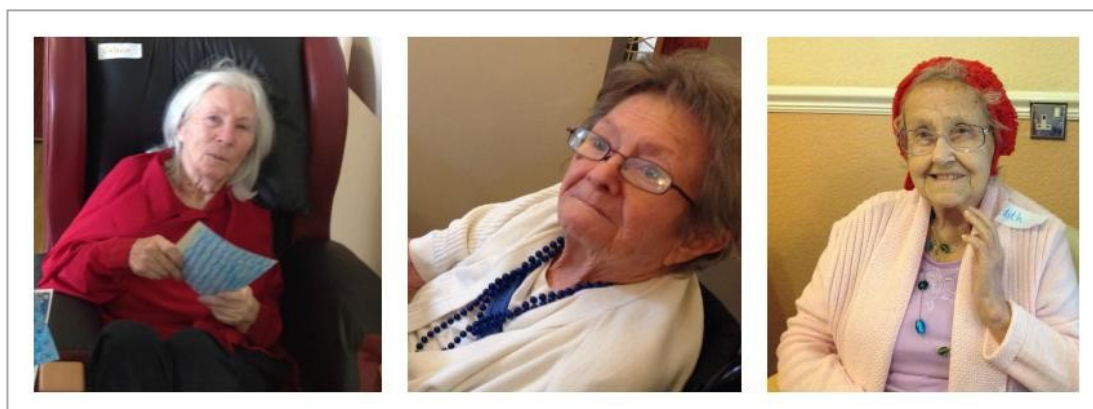
To be thinking clearly	4	5	4	3	5	4
Finding everything an effort	1	1	2	3	1	2
Depressed	1	1	1	1	1	1
Lonely	1	1	1	1	1	1
<i>No of participants</i>	7	5	7	2	5	
KEY		3	Some of the session (20-44 mins)			
5	Whole session (60 mins +)	2	Briefly (20 mins or less)			
4	Most of the session (45-59 mins)	1	Not at all			

These scores were offset against the participants observed behaviours on a day when no extra activities were taking place.

WHEN NOT ATTENDING THE SESSIONS, IS THE PERSON YOU CARE FOR ...?		Average levels observed during session
Happy or contented	Everyday	Whole session (60 mins +)
Engaging confidently with people	Everyday	Whole session (60 mins +)
Relaxed	Everyday	Whole session (60 mins +)
Engaged or focussed	Most days	Whole session (60 mins +)
Energised or lively	Most days	Whole session (60 mins +)
Physically coordinated	Most days	Most of session (45-59 mins)
Able to make up their own mind	Most days	Most of session (45-59 mins)
Able to think clearly	Most days	Most of session (45-59 mins)
Finding everything an effort	Never	Briefly (20 mins or less)
Depressed	Never	Not at all
Lonely	Never	Not at all

The sample is small, but the observations appear consistent: the participants' self-determination, enjoyment and general wellbeing does not decline during the sessions, when compared against their state on a 'quiet' day.

Rather, participants' engagement, focus and energy appears marginally enhanced by being given specific activities to undertake.





Observations

Reduce isolation and encourage connection

Whilst many of the participants in the later stages of dementia struggled to interact with each other for more than a few minutes at a time, it was clear to the practitioners, care staff and evaluator that the activities offered valuable social opportunities:

"At many points, during both aspects of what we offered, conversation would take off in all sorts of directions.

We were different faces, people willing to go wherever a resident's interests and experiences might lead.

Sometimes it was genuine reminiscence and understanding, sometimes enjoyable banter, sometimes the sort of fragmented conversation that happens when one of the speakers has a mind that flits unpredictably from one thing to another, a conversation with some structure but no content.

So the activities we offered were, for some residents, not an end in themselves, but rather a reason for someone with time, experience, patience, sense of humour, humility or whatever to spend time with them."

Practitioner 1's observations

Develop self expression

The observed reward for such time spent was a sudden smile, the first observed in a resident for an hour, a pat on the hand or a quick statement: *"that was brilliant", "I enjoyed that"*.

Practitioner 2 was asked what direct feedback it had been possible to capture:

"When someone says thanks they have had a lovely time, when are you coming back? When you say hello and they smile. When you think they don't know your name and then they say it. When they reach out their hand to you. When they compliment you on your clothing, hair or smile!

One lady said she must buy some watercolours after thoroughly enjoying painting. Another gentleman aged 95 was very grumpy in the first session, I found out he liked painting. In the next session, I gave him some watercolours and he just got on with it and was totally absorbed in the paint and the paper."

To put these anecdotal observations into context, and to demonstrate how difficult it can be to capture sound evidence of wellbeing in individuals in the late stages of dementia, it should be noted that, during one of the sessions, the evaluator asked a family carer to describe the relationship she was currently able to have with her sister:

"She brought me up. She was 5 years older than me and a tower of strength. She taught be everything. Now she doesn't know me. Sometimes she smiles at me and I think she might recognise me but it only lasts a moment and then she's gone."



Increase participation

*"Last week C*** chose to sit at another table, not joining in; this week she joined the group, though professing not to want to be involved. In practice she interacted a lot, although with a show of not wishing to, and she volunteered quite a lot of appropriate – or even inappropriate - ideas or memories."*¹⁴

"B for example would not interact at all with any of the art sessions in the first week, by the end of the sessions, he had decorated cakes and helped to blow patterns in the marbling. He did interact and liked the involvement of another man in care homes."***¹⁵

*"Two residents took an interest as care staff produced pictures, offering suggestions or comments as work progressed. And those nearby were pleased to watch the young god-daughter of one carer as she used the paint &c to make her own picture."*¹⁶

*"There was real engagement with the printing materials. M*** enjoyed, and persisted with, delicate work with small brushes and water-colours. W***, despite arthritic fingers, persisted with printing."*¹⁷

Keep learning

Given the poor memory of many of the participants, and their lack of access to resources to enable them to practice the art techniques they learned, it was hard to observe any longitudinal learning journey.

¹⁴ Practitioner 1 observations (week 7)

¹⁵ Practitioner 2 observations

¹⁶ Practitioner 1 observations (week 7)

¹⁷ Practitioner 1 observations (week 9)

However, close observation of participants within the context of the sessions revealed that with careful coaching, even the most poorly could be coaxed into learning the routines of simple art processes such as stamping, marbling or paper folding.

Decision making also became easier for some, given time and suitable prompts: one lady participant began by parroting the colours offered, seeming not to be able to identify them...

artist: "do you want blue or red"

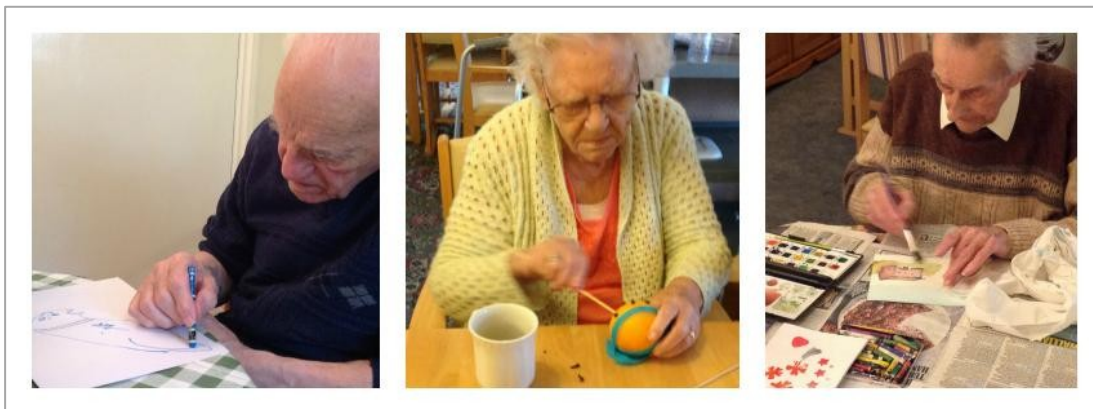
participant: "blue or red"

artist: "yes, blue or red?"

participant: "blue or red"

artist: "which one?" (holds paints up near participant)

participant: "this one" (pointed at red)¹⁸



Promote relaxation

As well as observing raised levels of engagement as sessions progressed, both care staff and practitioners noted that participants relaxed and exhibited *"definitely increased levels of sociable behaviour, more talking, smiling, eyes open for longer."*¹⁹

Once relaxed, participants were better able to become absorbed in the activity or the conversation:

"One lady was asleep before the art session, once she had a paint brush in her hand she stayed awake for at least an hour and could have carried on even longer."

*"I think the ladies enjoyed the cake decorating and making pomanders, even though it was fiddly they enjoyed the therapeutic nature of putting cloves in oranges"*²⁰

*"V*** and N*** stayed well after all others had drifted away, painting carefully and meticulously"*

*"As residents have come to know us better, they seem readier to have a go at activities, with friendly comment on, or appreciation of, what others around may be doing."*²¹

¹⁸ observed by evaluator (week 4)

¹⁹ Practitioner 2 observations

²⁰ Practitioner 2 observations

Care staff responses

The following statements were made by individual care staff members responding to the evaluation questionnaire (Appendix 3)

Keep learning

"I have learned more about what our residents would have used and kept when they were younger and also activities / ideas I could use to engage our residents in tasks/activities"

"I learned a new activity idea that I can use with all our residents and it is a great activity to be able to adapt to everyone's needs"

Develop self expression

"I learned how to make new pieces of art with the residents and how to use various resources to make art work"

"I enjoyed this session and I learned a new art form"

"It was great seeing our residents making the different patterns and feeling the different pattern effects"

Encourage connection and reduce isolation

"It has given us another way of connecting together"

"It has helped me to learn more about he likes/dislikes and abilities , to adapt activities for our residents so they can continue to participate"

Increase participation

"It was a great activity and the residents really enjoyed taking part"

"It was great to see our residents getting involved and seeing them producing pieces of art work. There was something for everybody and I enjoyed seeing everyone having fun"

Promote relaxation

"The activity had co-ordination skills to keep our residents active"

"It was a very good activity session and was enjoyed by everyone. I felt it went very well and brought happiness and memories back for everyone involved"

"They enjoy different activities and it is nice to have different events in the home."

²¹ Practitioner 1's observations (week 9)

Recommendations

Feedback from both practitioners indicates that this programme of activity is a work in progress. The range of participants' experience, health, abilities, aptitude and situation means that every session is different, and so is the nature of every residential home.

That said, both practitioners made clear recommendations for future activity:

1. Arrange for a **site visit** before commencing activity in order to meet the staff and participants and to select a suitable work area without too many distractions.
2. Make **practical arrangements** regarding space, access to assistance, residents' physical needs and the logistics of the sessions. Also arrange brushes can be washed, and who provides protective aprons, table-coverings and wet wipes.
3. **Limit the group size** (up to 8) to allow for more meaningful interaction.
4. **Include books, magazines and photographs** as stimuli for art and reminiscence. Some residents were happy to sit and leaf quietly through these before they were ready to participate in the artwork.
5. **Be careful with use of audio:** keeping the sound down during the art activity made conversation easier. Songs were popular, but sound effects had an aggravating effect on some participants.
6. Consider encouraging the care home staff to **open the sessions to family carers** or befriending volunteers in order to maximise the potential for making connections through art and reminiscence.

Conclusions

Evaluating the impact of cultural activity on dementia patients is a difficult exercise. It is not possible conclusively to prove that any one action is directly responsible for an individual's continued quality of life. However, observation of and anecdotal responses about the effect of the arts and reminiscence sessions, minute to minute, on the participants in this activity programme, strongly suggests that participation in **the sessions contributed positively to their ongoing quality of life.**

By **building connections** between Wychavon DC Community Development team, Museums Worcestershire and care home teams, the practitioners enabled otherwise potentially isolated care home residents to **develop new means of self expression.**

The combination of reminiscence, conversation, art, craft and new company over a prolonged period of time (5 weeks), **provided an enjoyable activity** for participants, and, for care staff, an **opportunity to learn more about** their residents.

It would be worthwhile to develop this working relationship still further *"to realise the potential for culture to enhance the quality of life."*²²

²² NHS Worcestershire & Worcestershire County Council, (July 2011), p.25,
URL: <http://education.worcestershire.nhs.uk/site-a-z/dementia/dementia-strategy/>

USEFUL READING

Alzheimers Society (November 2015) *Becoming a Dementia Friendly arts venue: a practical guide*

Arts Council England, (March 2014), *The Value of Arts & Culture to People & Society, an evidence review*

Brooker, D., Latham, I., Bowes, A., Kelly, F., Burns, D. & Killett, A (2013) What makes a real difference to resident experience? Digging deep into care home culture: The CHOICE (Care Homes Organisations Implementing Cultures of Excellence) Dissemination report

Brooker, D., La Fontaine, J., de Vries, K., Porter, T. & Surr, C. (2011). How can I tell you what's going on here? The Development of PIECE-dem: An observational framework focussing on the perspective of residents with advanced dementia living in care homes: Part of the PANICOA research programme

Cutler, D., (The Baring Foundation, 2012), *Tackling Loneliness in Older Age: the role of the arts*

Dept of Health, (2009), *National Dementia Strategy: Living Well with Dementia 2009-2014*

NHS Worcestershire & Worcestershire County Council, (July 2011), *Living Well with Dementia: a strategy for Worcestershire 2011-2016*

APPENDIX 1:

Contents of reminiscence cases from Museums Worcestershire

THEME - NATURE

- Sea shells in basket
- Pieces of tree bark in case
- Laminated leaves in case
- natural gemstones in display box
- Replica birds eggs in display box
- Birdsong recordings (2 x CD)
- Corn dolly in box
- Small ammonites and gemstone slices in case
- Seed packets
- Pressed flower card
- Pottery butterfly
- Bird-patterned teapot stand
- Animal photographs
- Knitted hedgehog in flower pot
- Woolly flowers, lavender bottle, large shell and ladybird fridge magnet
- 3 x embroidered flower pieces in 'leaf' wallet
- Flower-patterned china saucer and pepper pot
- 'Donkey' - card game
- Calendar with flower motifs (1979)
- William Morris floral-design fabric cushion cover
- Collins Garden Birds book
- Spider & Ladybird identification posters
- Birds of Britain calendar [1981] , Wildlife magazine, Country Crafts booklet all in colourful wallet



THEME - HOLIDAYS

- bucket and spade
- Child's straw hat in clear bag
- Holiday souvenirs: 2 dolls + 1 bib
- Souvenir of Bournemouth picture folder
- 1950s 'Brownie' camera in case
- Holiday postcards in blue A5 wallet
- Seaside pebbles in zip case
- 1 x stick of Cornwall rock
- 1 x pair of sunglasses in red case
- Holiday essentials in zip case [3 items]
- A4 size laminated 'seaside' stamps in wallet
- 2 x 'Country Life' magazines [1960]
- 1 x 'Landscape' magazine [2015]
- Large seaside tin contents: folding coat hanger, travelling cup in leather case, shell necklace, shells in small 'suitcase' tin
- 3 x seaside brochures in clear wallet
- 1950s music (CD)
- In small holiday suitcase: 1960s child's ruched bathing suit, stockings in plastic holder
- 'I do like to be beside the seaside' laminated song sheet

THEME – FOOD AND SHOPPING

SHOPPING BAG CONTENTS

- Small leather bag
- Purse with pre-decimal coins
- Shopping list pad + pen
- Crochet gloves
- Knitted purple shopping hat

SHOPPING TROLLEY CONTENTS

- 1 x small tin Heinz baked beans
- 1 x tin Campbells condensed soup
- 1 x pack of Sunlight soap in zip wallet
- 1 x Ridgways tea tin
- 1 x Weetabix tin with Cadbury's tin inside
- Tins of Colmans mustard and Oxo cubes
- Jar- *Farmers Wife* cream
- 1 x bottle 'Windolene'
- 1 x box *Lux* soap flakes [1977]
- 1 x pair washing tongs [1950s]
- 1 x wooden spoon
- 1 x small sandwich tin
- 1 x check apron
- 1 x 'Good Food' magazine [2015]
- 3 x cook books in bag: *Afternoon Tea*, *How to cook New Zealand lamb*, *Cannon cookbook*
- 1 x Food Safety booklet
- 1 x A3 laminated sheet of 1950s foodstuffs [from Robert Opie collection].

THEME - HAIR AND BEAUTY

- Hair clipper in box- 'The Chard'
- Man's Manicure/accessory case in zip pocket
- Man's Rolls Razor in box
- Man's black Wash bag with Palmolive soap, shaving brush and early plastic shaving bowl
- Pair of men's Socks [1980s]
- Man's electric Shaver in bag
- Shirt Sleeve Clips and Tobacco tin in zip case

- Man's detachable collar [1950s] in bag
- Clothes Brush
- 'Brylcreem' jar + Yardley Brilliantine jar in bag
- Men's Fashions [1970s] in popper wallet
- Benson and Hedges commemorative booklet in popper wallet
- Black Bow Tie + Sock Suspenders in zip case
- Hair Dryer in box
- Ladies Scarf, fine Handkerchief + handbag Mirror in pink wallet
- Perfume Sprayer [metal] in box
- Ladies Watch in blue box + Spectacles [1950s] in zip case
- Purple/white Sponge bag contents: Crowes *Cremine* tub, Mum *Rolette*, Pumice Stone, Carbolic Soap, Hair Trimmer [1970s], 2 x pink Manicure tools, *Eucryl* Toothpowder, pink comb, lavender Cologne Stick
- Floral tin with Costume Jewellery
- Make up case with Purple 'afro' comb, hair pins, hair rollers, setting clips + 2 items of Mary Quant Make-up
- Clear bag with : Cachet Perfume bottle, Yardley Sandalwood Spray, 'Oriental Poppy' card, small 'take away' shampoo bottle, Coty *L'Aimant* Talc tin, Boots Skin Food jar, Elastoplast tin

THEME - FAMILY, FRIENDSHIPS, CELEBRATIONS, ROYAL FAMILY and PETS

- Christmas family games- Games compendium
- Christmas cracker
- Christmas cards in zip case
- Party plate, party bag, napkin, balloons, all in popper wallet
- Wedding veil in calico bag
- Wedding silk flowers
- Wedding rose petals
- Large wedding photo
- Christening dress in calico bag

- Small photo album containing a range of family photos
- Traditional greetings cards in zip case
- Assorted greetings cards in zip case
- Selection of invitations in zip case

PETS-

- 'I Spy' Pets book
- 1x Royal corgi dog tea towel
- 1 x small framed watercolour of children with pet
- 1 x pets album of tea packet cards

ROYAL FAMILY

- Book -1937 coronation of George 6th and Elizabeth Bowes Lyon
- TV Times 1969- Investiture of Prince of Wales
- Tea towel of Investiture
- Jubilee tea towel [1977]
- Charles and Diana wedding programme 1981
- Souvenir booklet of Charles and Diana
- Souvenir tin of Charles and Diana
- Diamond Jubilee tea towel 2012
- 2 x union jack flags
- 1 x CD –Music for the Jubilee
- 1969 Moon landing report + Churchill souvenir in popper wallet

THEME - HOBBIES, RELAXATION and TOYS

- Draughts board + set of draughts in wooden box
- Pack of playing Cards + card 'guiding' game
- Tin of Dominoes
- Jigsaw in tin

- Stamp collection folder
- 1 x Edwardian Diary [1979] + 1 x Novel [3 Men in a boat] + 1 x mini Sudoku book
- 1 x Best loved Poems book
- Collectors Cards in match box [from 'tea packets]
- Small Oil Painting on canvas
- 1 x EP record- 'My Fair Lady'
- 1 x Theatre Programme + 'I Spy' Musical instruments book
- Pair of sport Shin Pads
- 1877-1977 Lawn Tennis souvenir book
- Laminated Sports Clothes pictures + Walking Trails, in wallet
- 1 x Brownie Camera in case [1965]
- Handicraft Tools + lace mat in wallet
- 1 x tie-dye Craft Work bag + handicraft items inside
- Embroidered items + embroidery Transfers in wallet
- Patterns [dress, knitting, crochet] in wallet
- Netted gloves, knitted hat and crochet mat in clear bag
- 4 x knitting needles
- 2 x 'Stitchcraft' magazines + 1 x 'Good Life' magazine + 1 x 'Practical Householder' magazine + 1 x booklet of Polish Embroidery designs- all in green folder
- Leather cased Hip Flask + Snuff slipper in zip case
- 1 x Toys bag [checky pattern]
- 2 x CDs – 1950s music + TV theme favourites

Appendix 2: The residential homes and their care philosophies

Bricklehampton Hall Nursing Home, Pershore

Bricklehampton Hall Care Home is run by Classic Care Ltd, and occupies a large mid-19th century country house, situated within 30 acres of gardens and parkland at the foot of Bredon Hill. Bricklehampton is a small rural village about 4 miles south of Pershore. The home operates a 'locked door' policy to prevent residents with dementia from going outdoors unsupervised.

Bricklehampton employs an Activities Organiser. The sessions took place on Thursday mornings at tables in the dining room.

"A variety of activities and social events are arranged for residents by our diversional therapist.

*... We firmly believe in, and provide, an individual approach to nursing care. Our philosophy is that residents should feel at home and that they treat Bricklehampton Hall as their home. We therefore encourage our residents to choose their own daily routine and we welcome family involvement and, hence, we have no set visiting times."*²³



Greenhill Park Care Home, Evesham

Greenhill Park Residential Care Home is an independent, family-run care home in a converted 19th century villa on the northern side of Evesham. It is situated in a suburban area. The home operates a 'locked door' policy to prevent residents with dementia from going outdoors unsupervised.

Greenhill employs an Activities Organiser. The sessions took place on Thursday afternoons at tables in the dining room.

*"Residents have regular meetings ... in order to have their say in the day to day running of the home, where they would like to go on outings, suggestions for activities and any new ideas ... Residents are supported to take part in everyday activities ... sessions for cooking and gardening are held frequently... We have regular in-house entertainers, speciality shows, music for health, pets as therapy, slide shows, magician, keyboard/vocalist to name but a few."*²⁴



Hawthorns Nursing Home, Evesham

Run by Shaw Healthcare, the Hawthorns care home is situated in a residential area, approximately 10 minutes walk from the centre of Evesham. It is a modern purpose-built care-home which includes medical care units.

The Hawthorns also incorporates The Bellview Acquired Brain Injury Unit, residents from which also participated in the Arts & Reminiscence sessions. The home operates a 'locked door' policy to prevent residents from going outdoors unsupervised.

²³ From the Bricklehampton Hall Nursing Home website, URL: <http://www.bricklehamptonhall.co.uk/>

²⁴ From the Greenhill Park website, URL: <http://www.greenhillcare.co.uk/facilities/>



The pub zone at The Hawthorns - residents can pop in for a drink at any time of day

The sessions took place on Thursday mornings in either the communal Activities Room or in the multi-sensory room.

The Hawthorns employs an Activities Organiser who has created a number of themed zones within the home which enable the residents to imagine they are in a 'pub', a 'salon' a 'garden shed', a 'beach' and a 'shop'. There is also a multi-sensory room for residents to relax in.

"[It] is a specialist facility for elderly people with dementia ... Our activity schedules aim to both mentally and physically stimulate participants, they place emphasis on therapeutic enjoyment and provide opportunities to be social.

*Activities such as crosswords and puzzles improve concentration, short/long term memory and reasoning skills whilst crafts and other gentle activities can improve mobility, release tension and help relaxation. We offer emotional support through activity choices and also acknowledge successes and achievements."*²⁵



Priory Rest Home, Droitwich

The Priory Rest Home is run by Wychbury Care Services Ltd. It is situated in a converted Edwardian vicarage in a rural area on the outskirts of Droitwich. The home operates a 'locked door' policy to prevent residents with dementia from going outdoors unsupervised.

During the programme delivery period, The Priory did not employ an activities organiser, and did not designate a member of care staff to support the sessions. However several of the residents were collected during sessions to go on outings with family members or to visit other day centres where activities took place.

The sessions took place on Tuesday mornings. The first 2 sessions took place in the communal sitting room, and the 3 final sessions took place in the dining room.



²⁵ From Shaw Healthcare website, URL: <http://www.shaw.co.uk/care-homes/the-hawthorns-evesham/>

Rashwood Care Home, Wychbold

Rashwood Care Home is run by Elizabeth Finn Homes Ltd and is based in a converted 19th century villa, which incorporates modern purpose-built units. It includes two nursing units which offer specialist and palliative care, and a residential unit for up to 53 occupants. Residents are comparatively fit, and so the home has an 'open door policy', although the general entrance is staffed 24/7 by a receptionist and security staff.

The home employs a Community Engagement Officer to organise a minimum of 3 activities a day for residents. The sessions took place on Tuesday afternoons at tables set up in the communal lounge.

"Rashwood organises a wide range of activities to cater for the diverse interests of its residents. In a typical week, residents will find a daily quiz held at the bar before lunch, a trip out to a place of interest or local pub for lunch, a French themed evening on a Wednesday and scrabble Sunday held in the Elgar lounge.

*The bar is open daily before lunch as a popular meeting and social location for residents to chat with family and friends... A Friends Committee, made up of local volunteers, take a great interest in Rashwood by visiting and befriending residents."*²⁶



Willow Bank Residential Home, Throckmorton

Willow Bank Residential Home is run by Buckland Care Ltd and is a modern purpose-built care-home, situated in a remote rural village. The home operates a 'locked door' policy to prevent residents with dementia from going outdoors unsupervised.

Willow Bank employs an Activities Organiser who also assists the residents to run a 'Tea Shop' in the communal dining room at least once a week. The sessions took place on Thursday afternoons at tables in the dining room, a large open plan area beside the entrance vestibule.

"Inspiring and encouraging those within our care to enjoy the fullest quality of life possible, residents are free to engage in social activities of their own choosing and are similarly free to pursue any hobbies or leisure activities of their choice...

*Social programmes are centred around the interests of each individual. General programming includes areas of social, physical, intellectual, artistic and spiritual interaction. We encourage community involvement for our residents by welcoming visits from a variety of area organisations."*²⁷



²⁶ EFCH website, page for Rashwood URL: <http://www.efhl.co.uk/index2.php?subsectionid=14>

²⁷ Buckland Care website, URL: <http://www.bucklandcare.co.uk/willow-bank-house/>

Appendix 3: Care worker durational observation questionnaire

Please answer the questionnaire based on your observations of the person you have provided the most care for during this session. Don't worry if you don't feel able to answer all of the questions.

We need you to tell us the first name of the person you care for, so that our researcher can make a note of their progress each week. To preserve confidentiality when the results are made public, we will make sure their names will be changed in the final report.

Thank you very much on behalf of Wychavon Arts Team and Museums Worcestershire

Date:				Location:			
Name of person you have cared for today:							
Your name:							
Your role	Professional care worker		Family carer		Other (please describe)		
DID THE PERSON YOU CARE FOR SEEM...?		Through whole session	Most of the session (45-60 mins)	Some of the session (20-45 mins)	Briefly (20 mins or less)	Not at all	
To be enjoying themselves							
Happy or contented							
Engaged or focussed							
Energised or lively							
Depressed							
Lonely							
Physically coordinated							
Finding everything an effort							
Able to make up their own mind							
To be thinking clearly							
Engaging confidently with people							
Relaxed							

contd....

WHEN NOT ATTENDING THE SESSIONS, IS THE PERSON YOU CARE FOR ...?	Never	Once a week	Most days	Every day
Happy or contented				
Engaged or focussed				
Energised or lively				
Depressed				
Lonely				
Physically coordinated				
Finding everything an effort				
Able to make up their own mind				
Able to think clearly				
Engaging confidently with people				
Relaxed				
DO YOU FEEL THAT THE WORKSHOPS AND STAFF LEADING THEM ...?	A great deal	A fair amount	Not much	Not at all
Are trustworthy				
Are friendly and engaging				
Promote the interests of the person you care for				
Give the person you care for pleasure				
Give the person you care for something to look forward to				
How valuable is it for you and the person you care for to be involved in this type of activity?				
Very valuable		Of some value		Of little value
				Not worth it
<ul style="list-style-type: none"> Have you learned anything new today? What? 				
<ul style="list-style-type: none"> How has it affected your relationships with the person / people you care for? 				

Appendix 4: About Jenni Waugh Consulting

I have worked as a consultant to the cultural and community sector since 2010 and I am passionate about communicating the value of heritage and the arts.

I bring a fresh outlook and inquisitive approach to each new job, encouraging and training staff and participants to look for evidence and provide their own solutions.



Clients include the University of Worcester, Birmingham Conservation Trust, National Trust Croome Court, the Marches Network, and a range of small to medium sized museums across the Midlands.

Employers include: University of Worcester, BBC Learning, MLA West Midlands and Surrey History Service.

Qualifications: MA in Classics & English; Diploma in Archives & Records Management; Level 2 in Equality & Diversity and Level 3 in Learning & Development Practice.

Affiliations: Trustee of Birmingham Conservation Trust; Advisor on Collections Management to the Coffin Works, Birmingham; member of the National Trust Midlands Advisory Board.

Memberships: Registered member of the Archives & Records Association; and Associate member of the Chartered Institute of Personnel Development.

For more information about Jenni, please see: jenniwaughconsulting.com or www.linkedin.com/in/jenniwaugh

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