

Residential care home workers need more training to give older people a 'home for life'

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Carers working in residential homes need funding and support to upskill to ensure more older people have a home for life instead of being transferred to hospitals and nursing homes, according to a new report.

Research from the University of Warwick and the University of West England is calling for social care home workers to be trained in basic clinical nursing skills to meet the changing needs of residents as they get older.

The report, funded by the Joseph Rowntree Foundation, also recommends a new registration system with formal qualifications for social care staff.

Professor Ala Szczepura from Warwick Medical School and Deirdre Wild from the University of the West of England, Bristol led the study, which has evaluated the introduction of enhanced care for older people in three types of residential home.

The report follows in the tracks of the recent White Paper: Building the National Care Service. The team compared a voluntary sector home, a privately-owned home and a local authority-owned home which all introduced 'enhanced residential care', based on developing new type of worker roles. Extensive fieldwork was carried out over three years and a total of 108 interviews were undertaken with residents and relatives, care staff, home managers and senior managers.

Survey questionnaires were also sent out to all staff, focus groups were conducted with care staff, residents and relatives and home managers and activity data was collected across the three residential homes and a comparator nursing home.

In England, more than 18,000 care homes currently provide places for more than 453,000 residents. Six out of ten places are in residential homes with no nursing staff employed on-site.

Three quarters of residential homes are privately owned. Residential homes employ 230,000 care workers and senior care workers and this figure is set to rise with an ageing population.

Professor Szczepura said: "Our research shows that the future care of older people is likely to be reliant on extending the spectrum of care provided by residential homes. As residents age, their health needs inevitably increase with nearly half of residents in the homes we studied classed as needing the intervention of a registered nurse on at least a daily basis. In such cases, if appropriate care cannot be provided on site, residents may find they are admitted to hospital or moved to a nursing home when this is not absolutely necessary.

"The development of a cadre of new role carers would enable these homes to provide high quality care as residents' needs increase. This could save the NHS money as well as improving older people's quality of life. The new coalition Government's plans includes a commitment to addressing the future funding of long-term care; our research provides valuable information for this."

Professor Szczepura said the research findings supported the view that care staff can be trained in clinical skills so that good basic health and nursing care can be delivered in a residential home setting with the support of community nurses. This needs a strong relationship between health and social care which ensures that care staff know when and how to seek more specialist clinical support.

She added: "Residential care homes currently differ significantly in their access to community nursing, clinical training and medical expertise." Fellow researcher Deirdre Wild from the University of the West of England, Bristol said there were also cultural barriers to overcome.

She said: "As a society we tend not to value [older people](#). Despite the policy rhetoric, we have found

a continuing climate of ageism. Older residents are depicted as a burden on community services because it is believed that the demand they place upon community staff will outstrip available resource. Home managers frequently experience dismissive attitudes from hospital staff with little consideration given to the wellbeing of elderly residents on discharge. Older residents in one home described the poor quality of care they received in hospital that left them traumatised following discharge and with a dread of re admission. What seems to be forgotten is that older residents have rights as NHS patients and that one day health professionals too could be old, dependent and vulnerable."

Provided by University of Warwick

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