Falling through the gaps: or a game of snakes and ladders

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Director AKAM Care Ltd
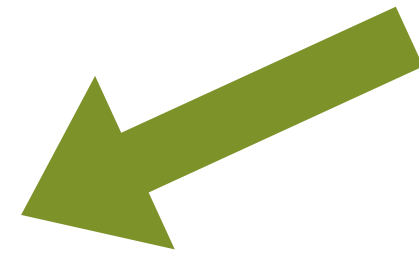**Isle View Nursing Home**

MA, MsC Psych Edin
(and very nearly a PhD!)

Interesting choice of bridge for the conference poster!

"Bridging the gap between theory and practice"

Building bridges can be challenging, as can crossing them

An "overly optimistic" bridge

Foot suspension bridges are:

- wobbly yet "high flying" - a lot to lose if it fails

- nerve-wracking - one at a time, unstable footing

- single track one way traffic and slow moving

- exposed to elements; buffeted by external forces

- lacking proper infrastrucute / lacking resources

However, ENRICH might have chosen other types of bridge..

A "blingy" bridge

Golden Gate Bridge in San Francisco

Some of us may have been lucky enough to be involved in such a project...?

Huge road suspension bridges like this:

- have a lot of infrastructure / resources

- involve a lot of prior planning

- create great marketing - look amazing... ooh shiny!

- designed to move people quickly, go smoothly

- everyone can get on board - take a lot of traffic

- take a lot of upkeep / expensive to maintain

A "virtue signalling" bridge

Bespoke and charming foot bridges:

- are more "down to earth"

- have a good "honest" structure

- are friendly, welcoming and inclusive

- are for one to one small scale connection

- take one person a short distance

- are humble and of human proportions

- don't require great resources

- are eco friendly!

- appear more realistic.....

And yet, I have experienced or witnessed failure to make progress in all these cases

The problem with bridges

"Building bridges"... between opposing sides? Them and us?

"We'll cross that bridge when we come to it"

"It's a bridge too far"....

OK, time to *"burn our bridges!!!!!"*

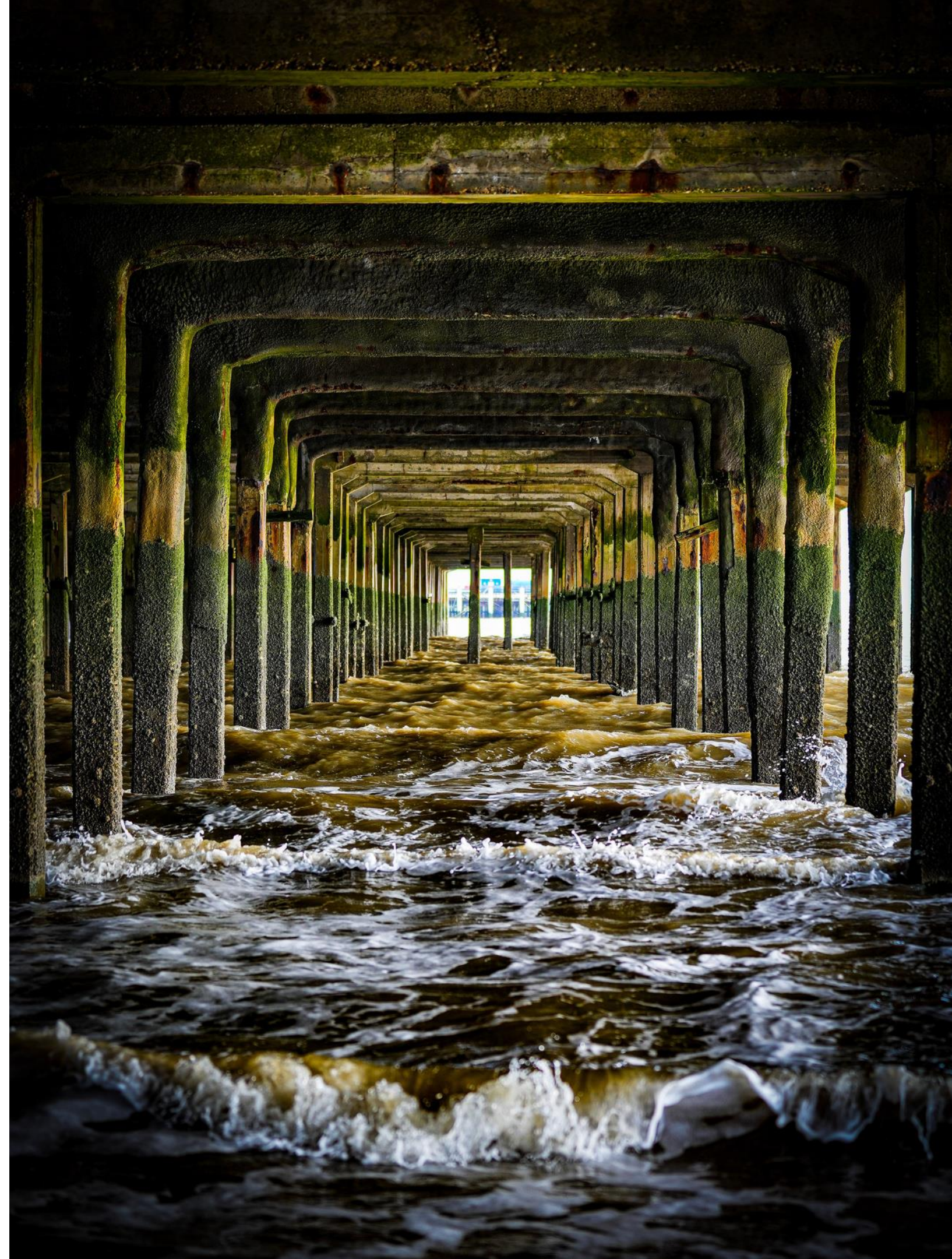**Even with a bridge little progress may be made**

WHY?

One thing that all bridges have in common....

They ignore the terrain below

In fact they are specifically designed to avoid it

On the ground … on the Care Home Floor… things may be very different….

The bridge itself may create obstacles between people and it may be hard to get a secure footing

Sometimes everyone sticks to their own position and little is going to change

There may be a sturdy bridge, but everyone is moving in another direction!

A cold unfriendly and unstable environment - easy to lose your footing and plunge into trouble

The only staff involved in the project leave!
A lack of resources....

(Or literally... there are building works going on!)

Everything is in a jam... no-one is able to move or do anything different

Everyone has to go with the flow and can be carried away by other forces

A staffing shortage....

Or as is often the case... everyone is blissfully unaware there is any research happening at all!

Research?

What research?

And finally
Sometimes we forget to actually build the bridge... great idea, nothing happens!

Some final thoughts on bridges before we move on

Why are we building this particular bridge?

Is the type of bridge fit for purpose?

Who is building it? Expertise? Agenda?

Who are we building the bridge betweeen? Who is left out?

Does it have solid foundations?

Does anyone want to use it?

Is it going in the right direction? Where will we end up?

Do we have the resources to complete it or use it once built?

It all looks good from the bridge, but on the ground has anything happened!?

I tried to Bridge the Gap

I was

Academic
Cognitive Psychology
Edinburgh University
(*7 year non*-PhD!)

"Connect in Care"
3 year project funded by
NHS Education for Scotland
Quality Improvement Scotland
Care Inspectorate support

What we did "in theory":
Created a carer online network & "practical" resources
Captured stories of people with Dementia
Workshops with care staff, "Bring Theory into Practice"!
**(Listen to staff complain about Care Home Managers
and Providers; Managers complain about Providers!)**

I am

**Care Home
Provider
Scottish Care Co-chair**

**NHS Business Stream /
Social Care Networks**

What I planned to do:
"Bring Theory into Practice"!

What I do "in practice":
Small company, so… bit of everything
Meetings meetings meetings
Plan for (worry about) the future
Panic now and then!
**(Try not to imagine what my own staff say
about the Provider - me!)**

Exploring the terrain : Defining the "gap"

I started on the Theory side of the gap; and spent time with care staff opening "cans of worms"

My first day as a Nursing Home Provider - fancy a cuppa?

Challenging terrain - the Care Home

- Lack of staff and resources / staff overworked and stressed / no time or money

- Box ticking - Providers needs to be seen to engage with research

- Keeping the Care Inspectorate happy

- Virtue signalling without real engagement - Care Provider or even Manager

- Manager / staff under pressure from Provider - not actually able to engage

- Manager not wanting to "bother the staff with it!" - knows staff are too busy

- Marketing / revenue - looks good on the website!

- Provider / Manager do not want to "open cans of worms"

- Only few staff involved in the project and they leave - lost knowledge

- COVID / an assortment of other potential crises…

- Staff attitudes towards research….. "it won't work" "waste of time" (may be correct!)

Challenging terrain - the Researchers

- Lack of appreciation of the special Care Home environment - the Residents' home

- A misunderstanding of the actual terrain - each home is different

- Having to go where the funding is - buzz areas

- Short term projects only - due to funding or lack of real engagement / follow up

- Virtue signalling (also funding) - running social care projects

- Not sufficiently skeptical of Care Home / Provider feedback and promises

- Prioritisation of theory over the knowledge and insight of care staff

- Not adapting to working in a Care Home environment

- Pressure to misrepresent projects as successful to secure future funding

Challenging terrain - Government priorites / funding

- Use up Budget by end of tax year - money thrown at projects last minute

- Little time for projects to be truly tested and put to use before asked for feedback!

- Cycle of false positive feedback - need to report as successful to reallocate funds

- Virtue signalling as social care, but no follow up - *AGAIN (I have a thing about this!)*

- New "priority" / hot topic / combatting negative press coverage, shifts funding fast

- Examples:
  - Connect in care
  - Funding for the Resident Wellbeing Fund
  - Feedback on the CHCT online training

"Fall through the gaps"

In summary:

In the attempt to bring research into care homes, we know the landscape is littered with pitfalls.

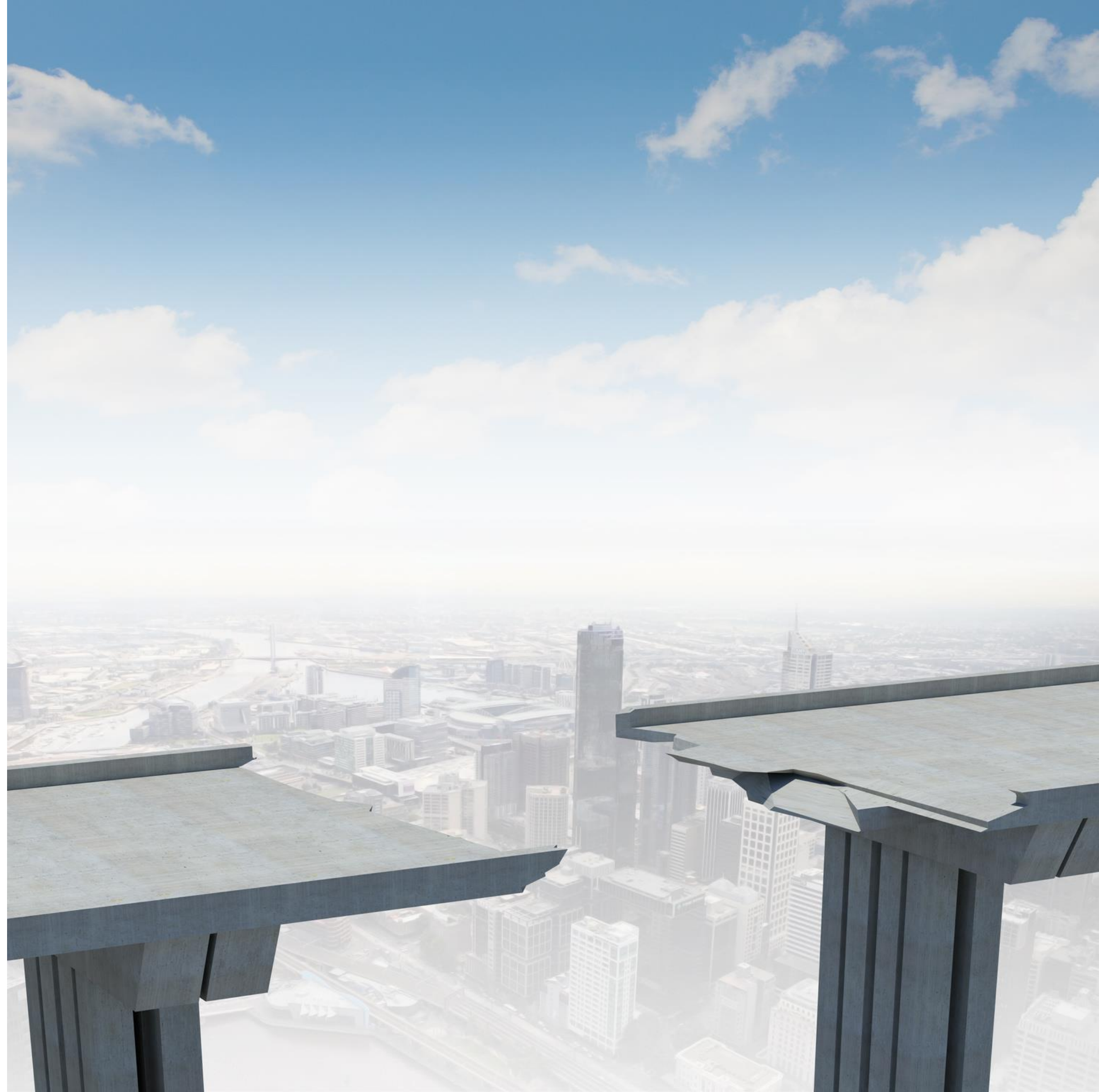Any real benefits can often fall through the gaps (or cracks).

Definition:

To not be noticed or dealt with

To be overlooked, missed, or neglected

And even when bridges are built, little may change.

Eventually, theory meets the reality on the ground, only this time with a bump!

A Game of Snakes and Ladders

- Start with your feet on solid ground - a good grounding

- Navigate the actual terrain not the idea

- Pitfalls are are unavoidable; snakes down which you fall

- Ladders take effort, climb one rung at a time

- You may end up back where you started

- To "win" - accept and understand reality, be persistent

The map is not the territory

Building a bridge to get there more quickly, to avoid or ignore the pitfalls (to get faster results, "tick a box", secure funding) ...may obscure what is really going on underneath, on the ground, on the Care Home floor, and prevent any real progress.

Solutions?

Over to you!

An example in our small rural home:

In 2024 our second research project with University of Highlands and Islands (UHI)

Runs over 6 months (not days or weeks)

Includes investigation into how to embed work long term / organisational resistance, what is the actual terrain and how does it affect progress

Hired someone to work at the home and support the research

If we can we're going to do it again… and again… and again … and maybe something will stick!

People work with people

Talk to the person next to you

"What has recently become less important to you?"