Living well through activity in care homes: the toolkit

INTRODUCTION
Click here
Living well through activity in care homes: the toolkit

Getting older is not a disease or a condition and we do not lose the ability to make choices, learn or experience love and affection.

Moving into a care home is a major life event and we all share the same desire to live in a safe and comfortable environment.

All older people living in care homes have the right to:
- Experience a good home life.
- Be treated with dignity and respect.
- Access quality care and treatments.

Everyone wants to continue to do the activities they enjoy.

This toolkit is endorsed by:
Living well through activity in care homes: the toolkit

This toolkit has been designed to equip care homes with ideas and materials in order for them to provide a service focused on residents’ needs, preferences and activity choices.

Throughout this toolkit, where it is recommended that specialist occupational therapy advice is required, this text will be highlighted in green. It will also link to the College of Occupational Therapists’ website, where there are many resources and further information.

The guide for residents, their family and friends offers advice on best practice in terms of residents’ rights to engage in daily activities that support their health and wellbeing.

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External reference group
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Pilot sites
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• The Russets, Sandford Station Retirement Village
• West House, Chester-le-Street.
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Resources for care home residents, their family and friends

GUIDE FOR RESIDENTS, THEIR FAMILY & FRIENDS

OCCUPATIONAL THERAPY LEAFLETS

Please note: Clicking on this button will open another window
This guide is written for people living in a care home but we hope it will be helpful for family, friends, visitors and volunteers too.
Am I making the most of living in a care home?

Moving into a care home is a major life event. It may be a move that you have long considered; or it may have happened relatively quickly, following an illness or accident. Whatever the circumstances, it is likely to have been a major upheaval, not only for you but also for relatives and close friends. Aspects of moving into a care home can feel like a bereavement, involving loss of independence and autonomy. However, the security of knowing that you are not alone, and having extra support and care should provide a degree of comfort during this period of change.

Getting older is not a disease or a condition; and although old age often involves loss, we do not lose the ability to make choices, learn or experience love and affection.

The culture of your care home will influence the degree to which you feel motivated and supported to live an active life. It is important to remember that you can influence your care. Talking to staff about your likes and dislikes, when and how you need help, and discussing hobbies and interests are just some of the simple ways that you can ensure that your views are considered. You can plan with staff how they can support you to still do activities that are important to you. This might involve:

- Cleaning your own room
- Emailing family and friends
- A daily walk
- Gardening or other hobbies
It may be that while living in your own home you were less able to do activities as your energies were taken up with just managing from day to day. However, you are now in an environment where staff can support you to gradually develop a routine that works for you.

Is there anything else that you would like to be doing?

What are you missing doing now that you are living a care home? Is there anything you would like to be supported to do that would contribute to improving the life of the home? For example, you may have experience of organising events or managing people, running a singing group, or editing a residents’ newsletter. Small tasks matter; looking after the house plants may appeal or you may welcome the opportunity to get some physical exercise by delivering the post and newspapers to residents.

Talking about activity with staff

• Let staff know your likes and dislikes, interests, and who and what is important to you.
• Tell staff what everyday skills and activities you can and cannot do and what you might like to practise.
• Talk to staff about your culture and previous lifestyle.
• Discuss your spiritual needs and how these can best be met.
• Talk about the activities and roles that you want to keep up.
• Discuss how you like to have your routine.
• Discuss ways to keep mentally stimulated and physically active.
Why is being active important to me?

Activity is defined as everything we ‘do’. To be emotionally and physically well we need to actively participate in daily life. This is not an added bonus of good care but an essential requirement. When we sit for most of the day with little movement or stimulation it harms our physical and mental wellbeing.

What happens when someone stops being active?

- Their muscles and bones weaken and their joints stiffen
- They may experience loss of appetite and trouble digesting food
- They are more likely to have urinary infections, which can lead to incontinence
- They may feel less alert and have difficulty concentrating
- Their sleep pattern becomes poor
- They are more likely to have breathing difficulties and chest infections
- Their blood pressure increases and their heart weakens
- They risk having pressure sores
- They may feel bored, short tempered, irritable or anxious
- They may lose confidence and skills, which can lead to confusion and disorientation
Why should I be active? The benefits of activity – use it or lose it!

- Muscle strength, fitness and mobility are retained or improved
- Mood is lifted and alertness increased
- Appetite and digestion improves
- Risk of falls and fractures are reduced
- Weight gain is less likely
- Potential for blood clots and circulation problems is reduced
- The immune system becomes more efficient
- Tension is eased, and it becomes easier to relax
- Balance, posture and coordination are improved
- Concentration and memory improve
- Sense of wellbeing improves
- Choice, control and dignity are gained
- Social contact, self-expression and a sense of purpose and belonging are maintained or regained
What can I do to keep active?

Whatever the reason for moving into the care home, it is likely that some aspects of caring for yourself like bathing or preparing meals, which you were previously able to do, are now difficult. The staff are there to help and provide a service but it is important that you retain as much as possible of your physical fitness and skills. Staff usually choose to work in a care home because they like to look after people. It is easy for them to automatically do everything for you and it is equally easy to slip into accepting help with all your daily activities. Sometimes staff have to do things for you but generally they should aim to carry out activities with you.

One way of ensuring you keep as active and independent as possible is to answer this question... ‘What can I do and still want to do for myself?’
Suggestions for keeping active and healthy

Start with these questions:

What would I like to do?
What can I do?
What do I need help with?

• Try to do the aspects of daily living that you can do for yourself so that staff support you only when you really need help. For example, brushing your own hair, washing the top half of your body (but getting help with washing the lower half) and dressing; getting up and taking refreshments at the table rather than drinks being brought to you.

• Think about your daily and weekly routine; talk to staff about how you would like to spend your time and what help or assistance you might need.

• Set yourself goals to help keep fit and healthy. A goal might be to get up and move around every hour or do a daily crossword or word search.

• Ask yourself does my routine work for me? Have you got a balance between activities you need to do and activities that you want to do, such as self-care and leisure?

• Is the balance of time alone and time spent with others right for you?

• Talk to staff if you feel bored, lonely, anxious or too sedentary, in pain or in discomfort. They are there to support you and can help draw up a personal plan to try to address these problems.

• Talk to someone if you are worried about your memory. There are many simple strategies that can help.

Ask to be referred to an occupational therapist. They can advise on adaptation, strategies and techniques to enable you to maximise your abilities. See the leaflet on Occupational therapy: supporting people living in care homes.
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What are the key elements to ensure a good home life?

The National Institute for Health and Care Excellence state that ‘Older people in care homes are offered opportunities during their day to participate in meaningful activity that promotes their health and mental wellbeing’ (NICE 2013).

Care homes can do this by:

- **Connecting** – you are not feeling isolated and have opportunities to socialise.
- **Understanding** – staff get to know you and about your life.
- **Encouraging** – staff take time to chat and support you to keep moving and doing the day-to-day activities of your choice.

So, how can you ensure that these elements are a part of your home life?

**Connecting**

Preventing isolation

- Exchanging news, discussing news events and weather, reminiscing, singing.
- Sharing ideas with staff, family and friends on activities you could do when together (e.g. games and word puzzles); being part of regular social events (quiz or card nights, bingo, garden parties); attending residents’ and relatives’ meetings.
- Tell staff and volunteers what interests you. Can they arrange talks by guest speakers, link in with schools and community groups such as churches, gardening groups, Age UK and the University of the 3rd Age? Suggest outings such as going shopping or attending religious services.
Understanding

Staff can really get to know you through understanding a little about your background and personal history.

Sharing your life history

✓ Can give a rounded picture of your life. This helps you to work with staff to shape the planning of your care.

✓ Can be enjoyable.

✓ Ensures continuity of care if you have to transfer elsewhere; for example, temporarily into hospital.

✓ It is natural to review our lives and share memories.

When sharing your life history

Remember

• Life history information is for use with you only and not with anyone else, unless you give permission.

• Consent is needed. You don’t have to give a life history if you prefer not to.

• You may not want to share some personal information with others, so you need to agree with staff where it can be safely stored.
Decide on a format, e.g. a folder or scrapbook

It is a good idea to include at the front of the folder (or whichever format you use):

- Family tree
- Significant dates and anniversaries
- Photographs

Then add any information that helps to draw a picture of your life. There are questions included in the ‘Making a life history’ section that may help with this.

Encouraging

Your quality of life can be improved by different leisure, recreational and learning activities. You may find yourself trying an activity that you have never done before. Staff need to know if they are getting it right. Are they supporting you to do a range of activities you are interested in? If not, give them ideas!
Care that meets my individual needs

Many services aspire to meet your individual needs, or to be ‘person-centred’. This means listening to a person, respecting their choices and preferences and understanding their needs. Relatives and friends can play a vital role in this. You can judge if a service meets this goal.

A care home is person-centred when:

- You are involved in developing your care plan and are consulted regarding decisions around your care.
- Staff have understood your life history.
- You feel a sense of belonging within the home.
- Staff adapt their approach to meet your needs.
- Staff listen and address any concerns or anxieties.

Staff are person-centred when they:

- Treat you with dignity and respect.
- Listen to you and take time to hear your views and how you are.
- Welcome your family and friends.
- Remember your likes and dislikes, interests, who and what is important to you.
- Consider your culture and previous lifestyle.
- Remember your strengths and skills.
- Are aware of your spiritual needs and consider how these can best be met.
- Avoid making generalisations and assumptions about older people.
- Think about what it is like growing old and what it means for each person.
- Focus on the opportunities for being active.
- Encourage movement and physical activity.
How do I know I am receiving care that is right for me?
The statements below may help you to think about how you are experiencing life at the home and to talk to a member of staff about what is working well and areas that you would like to see change.

The home
- The dining room and communal rooms are clean and pleasant and the tables and seating are arranged in a way that I can chat with others.
- There is a mix of private, quiet and shared areas where different activities and social events can take place.
- Rooms are well lit so I can see to do things.
- I can go outside.
- There are signs and cues to help me find my way around the home.
- Mealtimes are pleasant. I have a choice of where I sit, food and drink, and my dietary needs are met.
- I can eat in my own room if I wish.

Staff
- Staff chat to me. They appear to take a genuine interest in my life.
- I trust the staff. They are friendly and can be approached at any time.
- Staff support me to carry out personal daily living tasks.
- Staff know my likes and dislikes and how and when I like to receive help.
- My visitors feel welcomed when they come.

Day-to-day routine
- I have been asked to give a life history.
- I was involved in writing my care plan and I have agreed to and signed it.
- I am supported to go into the community regularly and take part in activities and events
- I can choose how to spend my day and what help I receive.
- I am free and supported to follow my hobbies and interests.
- Staff respect my ‘quiet’ time, i.e. time for a person to be private and enjoy quiet reflection.
Finding the balance between feeling safe and making choices

Care homes have a responsibility to keep all their residents safe, but sometimes this approach can mean that opportunities for the individual are lost. It may be that your care home does not encourage daily walks outside, as this might lead to falls. However, instead of concentrating on just the physical aspects of risk, such as falling, the emotional aspects should also be considered, such as the importance of the activity to you and the opportunities it provides. Given that remaining as independent as possible is key to maintaining your health and wellbeing, sometimes the worry about risk prevents this from happening.

So, for example, if you have always gone for a daily walk, and still wish to do so, then it is important that staff try to support you to continue this activity in some way. The challenge for a care home can be balancing your wishes with the rights of the other residents, the capacity of staff and the concerns of family and friends. It is therefore important to consider all the issues, especially the ones that are important to you, and discuss them with the staff.

Talking to staff about your strengths, routine, interests and wishes is important when making decisions regarding risk

Staff will also consider:
- The risks and benefits.
- The likelihood that risk might occur.
- The seriousness/severity of those risks.
- Actions to be taken to minimise the risks.
- Actions to be taken if the risks occur.

Shared agreement should then be sought and obtained from you and, with your consent, relatives whenever possible.

Reference
For family and friends

What can you expect from a care home?

- There is a warm and welcoming atmosphere.
- Your relative/friend feels safe and speaks fondly of staff and other residents.
- Your relative/friend has opportunities to do activities and have responsibilities around the home, e.g. watering plants.
- The home has activity coordinators, welcomes volunteers, organises trips and events.
- Your relative/friend has been asked about their cultural and spiritual needs and the home is actively helping to meet these.

If your relative has difficulties communicating how they are feeling, you can look for signs of wellbeing, such as:

- A relaxed posture.
- Able to express emotions.
- Humour.
- Pleasure.
- Connections with other people.

What are the warning signs that things could be better?

- You don’t feel welcome.
- You hesitate to approach staff to discuss your relative’s/friend’s care.
- Residents routinely appear to be sitting with nothing to do.
- Television is on but no one is watching.
- Staff are always busy with no time to talk.
- Your relative/friend may speak positively in public but in private complains.
- Your relative/friend appears bored, irritable, low in mood and possibly depressed.
- You have noticed a rapid decline in your relative’s/friend’s mobility and function.
- Your relative/friend tells you they want to die.
- You have concerns about how equipment is being used and maintained, e.g. a wheelchair or hoist.
- Your relative/friend is not supported comfortably when seated.

Click here to read more about seating and positioning
If your relative has difficulties with communication the signs to look out for may include:

- Anxiety and fear.
- Withdrawal.
- Despair.
- Anger.
- Physical discomfort or pain.

It is really important to have a conversation with the care team. There may be a reasonable explanation – your relative/friend chooses to be alone and has capacity to make that choice – and you may be able to work with staff to improve the situation for your relative/friend.

So... What action can you take?

- Talk to individual staff members.
- Talk to the care home manager and follow this up in writing if this helps.
- If you have ideas and suggestions, how can you share these? Is there a residents and relatives meeting? Or a suggestion book?
- Consider how you can contribute to the life of the home.
- Do activities together (see list below for suggestions).

Activities you could do together

- Helping your friend/relative select an album, scrapbook or book to look at.
- Sharing a poem, article or short story you think they might like “I saw this and thought of you…”.
- Listening to music, the radio or watching the television.
- Playing a game of cards/word game/board game.
- Reading a newspaper or magazine together.
- Reading out loud.
- Going for a walk in the garden or exploring other rooms in the home.
- Supporting your friend/relative to keep a scrapbook or photo album – adding a picture, memento or photo.
- Offering a hand massage, manicure or some other grooming activity.
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- Looking at bookshelves and where activities are kept: Is there something your friend/relative would like to borrow? Does anything spark a memory?
- Helping your relative with small jobs, for example dusting their room, refilling the bird feeder.
- Sitting down having a cup of tea together at the table or in the garden.
- Attending events and volunteering to go on trips.
- Bringing in a take-away for a special occasion.

If you still have concerns...
- You may wish to use the home’s complaints procedure – and remember complaints are opportunities to improve.
- Tell the regulatory body about your relative’s experience.

Supporting a relative or friend in the later stages of dementia
To explain how best to support and connect with someone in the later stages of dementia we are using the Pool Activity Level (PAL) Instrument (Pool 2012). The instrument describes 4 levels of ability. The sensory and reflex ability levels apply to the later stages of dementia.

Sensory ability level
You may notice your relative or friend humming, chuckling, moaning or calling out. They may pace and keep repeating actions. People at this level are aware of others but they are mainly concerned with their own needs and sensation. They mainly respond to conversation through body language – turning towards you, reaching forward.

Reflex ability level
Your relative or friend may call, rock, cry, hum, or mumble to themselves. They may not be aware of their surroundings or their own body but they respond to direct sensory stimulation, such as touch.
Comfort
As your relative or friend may not be able to tell you if they are in pain or discomfort when you visit you can check they are comfortable by:

- Noticing the atmosphere: the temperature, noise levels and smells. Look for signs of discomfort or stress. Can you or care staff make adjustments to make them more comfortable? Is there a quiet space they can spend time in?

- Seating and positioning: are they sitting comfortably, are they well supported in their chair or the bed?

- Clothing or footwear: do they fit comfortably on the body? Check for tightness or rubbing.

- Drinking and eating: checking and assisting to ensure regular habits.

Ideas for your visits
Sensory level of ability
People at the sensory level of ability are mainly concerned with sensation and responding to those sensations. Use touch and be warm and reassuring. When talking keep language simple, use short sentences and demonstrate actions to reinforce what you mean.

- Singing, clapping, dancing, rocking to music.

- Activities that involve single step movements – sweeping, polishing, folding, winding wool.

- Walking together.

- Encourage holding and turning pages of a book, magazine or newspaper.

- Stroking the back of the hand or arm or cheek. Using moisturising lotion to massage.

- Stroking a pet or, if appropriate, a toy pet.

- Listening to music they enjoy.
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- Watching favourite television programmes.
- Looking at pictures, photographs, postcards.
- Holding and feeling different objects. Using activity or memory boxes in the home. Wrap up objects in tissue paper and place in a box. Encourage your relative to unwrap, explore and rewrap.
- Smelling herbs, plants and flowers.
- Sharing favourite food snacks or drinks.

**Reflex level of ability**

- Make direct eye contact, use touch and give single word directions. For example, to support the person to drink, place their hands around the cup, laying your hands over the top of theirs and guide the cup to their mouth saying “Drink”.
- Reassure through smiles and nodding.
- Stroke the back of the hand, arm or cheek. Keep pressure gentle but firm.
- Try singing, swaying, clapping, rocking to music.
- Stroking a pet or, if appropriate, a toy pet.
- Gently fan their face.
- Play music that you know they like.
- Holding and feeling objects of different colours, shapes, weight, textures and size.
- Eating and drinking; for example, sharing pieces of fruit, sweets, and cheeses.

**Reference**

Making a life history
This is a very general list, designed to cater for everyone regardless of age or sex, so just ignore those questions that are not relevant to you.

Childhood
• What is your date of birth?
• Where were you born?
• What were your parents’ names?
• What job(s) did they do?
• Did/do you have brothers or sisters? What are their names?
• Where did you grow up?

Schooldays
• Where did you go to school?
• Did you enjoy it?
• Did you wear a uniform? What colour was it?
• What was your favourite subject?
• What were your school friends called?
• Which were your favourite pastimes while at school?
• When did you leave school?
• Did you gain any qualifications?

Marriage and family
(The same list, with minor adjustments, can be used for people with partners.)
• Are/were you married? What is/was your husband’s/wife’s name?
• Where and when did you meet?
• Where and when did you marry?
• Where did you go on honeymoon?
• Where did you live?
• Do you have any children? What are their names?
• Do you have any grandchildren? What are their names?
• Did you have any pets?
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Work
- Did you do national service? Which service?
- Did you see active service?
- When did you start work?
- What type of work did you do? What did it involve?
- Did you have any special training?
- Where did you work?
- Did you enjoy your work?
- When did you retire?

Friends
- What are your friends’ names?
- When and where did you meet?
- Are you still in touch with them?

Hobbies and interests
- What hobbies have you enjoyed and why?
- Did you belong to any clubs or organisations?
- Did you take up any new hobbies when you retired?
- How much have you travelled? Where was your favourite place?
- What is your favourite book?
- What is your favourite colour?
- What is your favourite type of music and artiste?
- What is your favourite food and favourite drink?
- Is there anything that you definitely do not like to do?

Are there any other major life events that you wish add?
Useful Resources
Where can I find out more information?
Here are just a few websites with more information, which you may find helpful.

Age Exchange

Age UK

  Accessed on 27.02.13.
  (Includes advice on finding a care home)

- **Age UK [ca 2013]** *Falls prevention*. London: Age UK. Available at: www.ageuk.org.uk/health-wellbeing/keeping-fit/preventing-falls

- **Age UK [ca 2010]** *Fit as a Fiddle*. London: Age UK. Available at: www.ageuk.org.uk/health-wellbeing/fit-as-a-fiddle
  Accessed on 27.02.13.
  (Includes *Zest for Life, Add Flavour* and *Do As Much as You Can* activity and wellbeing booklets)

- **Age UK [ca 2013]** *Keeping fit*. London: Age UK. Available at: www.ageuk.org.uk/health-wellbeing/keeping-fit
  Accessed on 27.02.13.

- **Age UK [ca 2012]** *Exercise*. London: Age UK. Available at: www.ageuk.org.uk/health-wellbeing/keeping-fit/exercise-materials
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Alive!
www.aliveactivities.org

Alzheimer Scotland
www.alzscot.org
Accessed on 27.02.13.

Alzheimer’s Society
www.alzheimers.org.uk
Accessed on 27.02.13.

  (Includes advice to carer’s on supporting everyday activities, such as washing and dressing)

- Royal College of Nursing, Alzheimer’s Society (2013) This is me: this leaflet will help you support me in an unfamiliar place. London: Alzheimer’s Society. Available at: www.alzheimers.org.uk/site/scripts/download_info.php?downloadID=399

Arthritis Care
www.arthritiscare.org.uk
Accessed on 27.02.13.

  Accessed on 27.02.13.
  (Includes advice on exercise, joint care and caring for someone with arthritis)
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British Association of Occupational Therapists and College of Occupational Therapists
www.BAOT.org.uk
Accessed on 27.02.13.
(Includes advice on how to find an occupational therapist and resources on how occupational therapy supports people with a range of conditions)

Accessed on 27.02.13.
(Includes advice and ideas for exercise and physical activity for older adults)

Care Inspectorate
www.careinspectorate.com
(Includes advice and resources)


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Carers Trust
www.carers.org
Accessed on 17.05.13.

Carers UK
www.carersuk.org
Accessed on 17.05.13.

Chartered Society of Physiotherapy
www.csp.org.uk/publications/easy-exercise-guide
Accessed on 27.02.13.
(Advice on exercises)

Dementia Services Development Centre
www.dementia.stir.ac.uk
Accessed on 27.02.13.
/Publications on dementia

Elderly Activities
www.elderlyactivities.co.uk
Accessed on 27.02.13.

Inner Health Studio
www.innerhealthstudio.com
Accessed on 27.02.13.
(Coping skills and relaxation resources)

Lifestory Network
www.lifestorynetwork.org.uk
Accessed on 27.02.13.
National Activity Providers Association (NAPA)
www.napa-activities.co.uk
(The monthly magazine provides ideas for activities)

Accessed on 27.02.13.

NHS Choices
www.nhs.uk/Pages/HomePage.aspx
(Fact sheets on a range of health conditions and end of life care)

  (Advice on exercises)

  Accessed on 27.02.13.

National Institute for Health and Care Excellence (NICE)
www.nice.org.uk

Accessed on 27.02.13.


- **National Institute for Health and Care Excellence (2013)** *Mental wellbeing of older people in care homes (NICE quality standard 50)*. Manchester: NICE. Available at: http://guidance.nice.org.uk/QS50

National Osteoporosis Society
www.nos.org.uk

Accessed on 27.02.13.
Older People’s Commissioner for Wales
Accessed on 17.05.13.

Parkinson’s UK
www.parkinsons.org.uk
Accessed on 27.02.13.

(Advice on day-to-day living)

Social Care Institute for Excellence (SCIE)
www.scie.org.uk
Accessed on 27.02.13.

• Social Care Institute for Excellence [ca.2012] Care needs. London: SCIE. Available at: www.scie.org.uk/topic/careneeds
  Accessed on 27.02.13.

• Social Care Institute for Excellence [ca.2012] Care Services. London: SCIE. Available at: www.scie.org.uk/topic/careservices/residentialornursingcare
  Accessed on 27.02.13.

  Accessed on 27.02.13.

• Social Care Institute for Excellence [c.a.2013] Find me good care. London: SCIE. Available at: www.findmegoodcare.co.uk
  Accessed on 27.02.13.

  Accessed on 27.02.13.
Stroke Association
www.stroke.org.uk
Accessed on 27.02.13.

Accessed on 27.02.13.
(Outlines common problems and contains a link to a resource library)

The Relatives and Residents Association
www.relres.org
Accessed on 17.05.13.

Accessed on 17.05.13.

U3A University of the 3rd Age
(U3As are self-help, self-managed lifelong learning cooperatives for older people no longer in full time work, providing opportunities for their members to share learning experiences in a wide range of interest groups and to pursue learning not for qualifications, but for fun).