Crossing Boundaries: 
The value of museums in dementia care

Kerry Wilson, Institute of Cultural Capital
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Research at the *Institute of Cultural Capital*

- Cultural policy research institute jointly hosted by University of Liverpool and Liverpool John Moores University in the UK, launched in 2010
- Both HEIs had previously collaborated on Impacts 08 – evaluation of Liverpool’s year as European Capital of Culture
- Research now structured under key themes, encompassing different elements of cultural policy and cultural value
- KW leads *Cultural Leadership* research area, designed to explore the contribution and value of cultural sector to cross-government policy agendas in the UK
- Influenced by ways in which cultural work is organised and practised in response to policy objectives:
  - professional structures
  - organisational and sector leadership
  - collaborative relationships with other relevant sectors and services
National Museums Liverpool and House of Memories

• Dementia care training programme developed for health and social care workers in 2012
• Primarily a full-day intervention combining dramatic set pieces, forum theatre, interactive facilitation, museum and gallery tours, reminiscence therapy and museum education activities
• Supplemented by branded training resources, including the My House of Memories app, which can be used remotely in a variety of care contexts
• Aims to support and enable participating carers to help people with dementia (PWD) to ‘live well’ with the condition – funded by Department of Health (DoH)
• 7,000+ health service, housing and social care workers have now participated in the training nationally

“We want to see a House of Memories in every town and city. Our ambition is fuelled by a strong desire to continue to support the exceptional workforce that cares for the growing number of people living with dementia in the UK.”

Carol Rogers
Executive Director, Education and Visitors
NML
House of Memories Northern Model

• Further funding awarded from DoH to develop regional ‘roll out’ with partner museum services including Salford Museum and Art Gallery, Bury Art Museum and Sunderland Museum and Winter Gardens in 2013

• ICC commissioned to evaluate transferability, adaptability and impact of House of Memories including:
  – impact upon active participants with reference to the care and support of individuals living with dementia;
  – partner museum and gallery services;
  – and on services and activities for older people in the regions.

• Realistic Evaluation approach (Pawson and Tilley, 1997) was used, considering situated contexts, mechanisms and outcomes throughout the roll-out process

• Research methods included participant observation and longitudinal pre and post training interviews with a stratified sample of participating health care professionals (30)

• For final report see Wilson and Grindrod (2013).
Professionalism and the culture of care

• Pre-training objectives for participants:
  – More creative, inclusive training methods than those conventionally used within the health care sector;
  – Enabling more empathic and intuitive professional care cultures within their organisations and work places;
  – Cost-effective training opportunities that can be readily cascaded back in the workplace.

• Discernible sense of the ‘distance travelled’ for participants in relation to their own professional development:
  – Improved cognitive and emotional understanding of dementia and its implications;
  – Capacity to establish greater sense of connection with PWD;
  – Enhanced professional conscientiousness;
  – Trust in and appreciation of museums as assets in care practice.
Mapping Realistic Evaluation process

**Participant expectations**
Pre-training interviews with participating dementia care workers from a range of services consistently revealed:
- a desire to improve the 'culture of care' in relation to knowledge and awareness of dementia and its implications; support for families and carers; the quality of direct, interpersonal one-to-one care.
- An interest in creative, alternative approaches to dementia care training that can be easily adapted and cascaded back in the workplace.

**The museum offer**
Specific objectives held by participating museums and galleries included:
- to build upon established experiences of and reputations in reminiscence work with the elderly within the context of dementia care;
- to develop new networks and partnerships with health care and voluntary sectors;
- to share learning and expertise with NML and other museum services to develop complementary, bespoke reminiscence resources;
- to promote the benefits of cultural engagement to dementia care.

**Policy agendas**
In a national context, relevant key policy agendas include:
- the Prime Minister’s Challenge on Dementia and associated strategy;
- Patients First and Foremost (Department of Health); preventive health agenda; localism and the Big Society.

**Content**
The interpersonal and highly empathic skills of AFTA Thought team and museum staff. The level of informed, authoritative content on dementia and its direct and indirect implications.
Use of a combination of highly creative, complementary methods and approaches including dramatic presentation, interactive discussion, reminiscence therapy techniques using museum collections and arts and crafts activities.

**Delivery**
Effective incorporation of in-house reminiscence tools, projects and staff expertise into House of Memories model.
Successful engagement of a range of regional stakeholders from health and social care services.
Development of bespoke House of Memories training resources that have reinforced the programme’s unique value, and identifiable qualities, across the regions.
Effective promotion of the unique value of museums and galleries in dementia care under strong leadership and stewardship of NML.

**Strategy**
Strong policy awareness and lobbying from NML leadership team.
Relevance and timeliness of House of Memories intelligent, focused content, mission and values.
Effective cross-sector partnership working.

**Outcomes**
Significantly improved levels of understanding of dementia, including complexities in how dementia is presented and implications for those directly affected along with families and carers alike.
Enhanced capacity for considered, empathic, interpersonal care that is responsive to individual circumstance.
Improved professional conscientiousness on individual and collective bases.
Openness to creative, inclusive, alternative approaches to care that are responsive to individual needs.

**Cultural engagement**
Improved awareness and understanding of the value of museums and galleries to dementia care practice.
Increased visits to museums and galleries in a professional context.
Evidence of use of House of Memories resources in work [dementia care] settings.
Enhanced appreciation and respect for cultural and creative practice in dementia care.

**Professional practice**
Evidence of ongoing discussion and knowledge exchange on value of House of Memories within and across a range of health and social care services.
A willingness to improve and align professional practice at grassroots level with national policy and strategy.
House of Memories Midlands Model

• Following success of Northern Model, DoH funded second regional programme in collaboration with Birmingham Museum and Gallery, Leicester Guildhall and Wollaton Hall, Nottingham in 2014

• ICC commissioned to design and test the use of a pilot House of Memories impact measure and evaluation framework that captured:
  – The impact on participants’ own sense of wellbeing as dementia carers;
  – The impact upon participants’ values, behaviours and skills as dementia carers;
  – The wider impact within the Midlands with respect to the creation of dementia friendly communities.

• Methods include standardised measure of subjective wellbeing (adapted from WEMWBS) and professional learning, followed by social return on investment (SROI) workshop to establish the ‘cost benefit’ of House of Memories

• For final report see Wilson and Whelan (2014)
Wellbeing, professional development & social value

• Positive outcomes [quantitative research] included:
  – enhanced optimism, confidence and compassion as dementia carers;
  – advanced knowledge of dementia and of own contribution to improving care standards;
  – renewed commitment to training and development, reducing the stigma of dementia and improving dementia care environments.

• Qualitative SROI analysis pointed to considerable instrumental value for the dementia care sector. Outcomes were grouped according to three themes including dementia awareness; improved care standards; and professional development.

• These outcomes translated into a return on investment of:
  – £1: £8.66 (up to one year after House of Memories)
  – and £1: £44.68 (up to eight years after House of Memories)

• Outcomes mapped directly on to national dementia policy priorities, as outlined by the National Dementia Strategy

• NB Gayle Whelan has written about use of SROI in museums if interested in this method (Whelan, 2015)
Developing the *House of Memories* programme at NML

- Digital training model – delivered with museum partners in South East (Department of Health, 2015)
- Buddy Day for family carers and volunteers – delivered at Museum of Liverpool (Liverpool City Council, 2015)
- Primary health ‘Tier 2’ dementia care train the trainer model – delivered with NHS partners in North West (Health Education North West, 2015)
Developing a holistic research framework at ICC

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<tr>
<th>Social value &amp; return on investment (WP3)</th>
<th>The purpose of WP3 is to consider throughout the emerging outcomes of 1 and 2 and how these might translate into strategic social value indicators and economic impact for participating professional sectors. Informed by established social value methods and SROI protocols, set in the context of the Public Services (Social Value) Act 2012.</th>
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<td>Wellbeing &amp; the culture of care (WP2)</td>
<td>Assessing the impact of <em>House of Memories</em> on the subjective wellbeing of participants and subsequent impact upon the ‘culture of care’ within participating communities, including relationship between carers’ own subjective wellbeing and care practices. Methods including standardised measure modelled on WEMWBS.</td>
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<td>Professional learning &amp; development (WP1)</td>
<td>Informed by situated learning theory (Lave and Wenger, 1991) and a ‘communities of practice’ (CoP) conceptual framework. Incorporating social network analysis (SNA) to profile collaborative connections within and across sectors. Methods including standardised measures of learning outcomes, skills development and attitudinal behaviours mapped against Dementia Core Skills Education and Training Framework.</td>
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Why does *House of Memories* have such an impact?

**Four key elements:**

- Co-design and co-production
- Cultural collaboration emphasising unique cultural value
- Strength of cross-sector collaborative networks
- Political leadership and advocacy by NML

“National Museums Liverpool provides an innovative training programme that is making a real difference for social care staff by helping them to connect with the people with dementia whom they support every day... It is fantastic that the cultural sector is involved in work on dementia.”

Norman Lamb MP
Former Minister of State for Care and Support
Co-design and co-production

• Significant period of consultation and development with DoH and leading health agencies (e.g. Alzheimer’s Society) after mutual recognition of gap in training for caring profession

• Co-production of app with PWD convened in association with local networks including Mersey Care NHS Trust, Liverpool Dementia Action Alliance (and its Service Users Reference Forum) and Liverpool John Moores University care of the international, European Commission-funded ‘Innovate Dementia’ project

• See the My House of Memories app [film](#)
Cultural collaboration emphasising unique cultural value

• Creative partnerships with drama-based training agency Afta Thought, and Collective Encounters, leading Liverpool-based arts organisation specialising in theatre for social change

• Regional cultural delivery partners

• Intrinsic, ‘uniquely cultural’ practices of one sector creating instrumental value for another in terms of improved professional practice and care standards
Strength of cross-sector collaborative networks
Museums at the centre of an integrated health and social service workforce
Political leadership and advocacy

• Underpinned by organisational culture, mission and values of NML:
  – belief in the concept of social justice;
  – belief that museums are fundamentally educational in purpose;
  – belief in the power of museums to help promote good and active citizenship
  – and to act as agents of social change.

• Active political lobbying

• Collaborative leadership of *House of Memories* team has helped to position museums as the ultimate ‘boundary spanners’, characterised by ability to engage with others; deploy relational and interpersonal competencies; and to acknowledge and value difference outside own professional circles (Peck and Dickinson, 2008)

• For further discussion see Wilson (2015)
Creating the ultimate Community of Practice

House of Memories

• *House of Memories* generating ontological security and trust in own networks; ‘shared values’ a fundamental aspect of successful collaborative working in multi-agency initiatives (Williams, 2012)

• Authenticity of collaborative CoP illustrated by loyalty shown to the programme & NML via associated activities that have grown around *House of Memories* e.g. *Happy Older People* network & celebration events:
  – See *House of Memories* celebration day [film](#)
References


Contacts & links

House of Memories at National Museums Liverpool

Institute of Cultural Capital
www.iccliverpool.ac.uk

Follow us on Twitter
• @house_memories
• @iccliverpool
• @KWilsonWA8

Email Kerry at k.m.wilson@ljmu.ac.uk