

Memory care with Montessori

For Stow Healthcare director **Ruth French** Montessori proved the perfect fit when looking to develop a new care ethos for its Maple Memory Centre at Brandon Park Nursing Home in Suffolk.

Nursing homes are not the first thing to spring to mind when thinking about Montessori education. The teaching model focused on hands-on learning and developing real-world skills is usually linked with educating children.

“We wanted to have a specialist centre for people living with memory issues,” French told *Caring Times*. “We didn’t want it to be a standard dementia unit because you can find that pretty much anywhere. We felt there was a real opportunity here to create a different type of memory care provision.”

“We feel there’s such a stigma in this country around the word ‘dementia’. I don’t want to put my loved one in a ‘dementia unit’. It feels like we are labelling and really treating people as though they have nothing more to give and don’t have a value or purpose. We wanted to create a centre that supported people with memory issues and didn’t

write them off.”

Having spent a lot of time researching different models of memory care, French and fellow director Roger Catchpole chose the Montessori method.

“While Montessori is associated with the early developmental stage of life the principles are the same for the other end of life,” French noted. “It’s about putting useful objects into someone’s hands and for that to add value and purpose and redevelop and relearn skills or learn some skills for the first time.”

“We are not very good at letting people take risks in dementia care in the UK. People move into a care home and suddenly we are doing everything for them and we are taking away every possible risk. When we do that, we are actually taking away people’s sense of their own personal worth and sense of purpose.”

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them, we are buttering their toast when previously they did that for themselves – they are being unintentionally deskilled.”

When setting up the memory centre, French and her team deliberately made sure there was a usable kitchen so that people could prepare their own meals, wash up and feel normal.

Stow Healthcare uses a different terminology for its memory care centre to reflect its non-hierarchical nature.

“We don’t have residents, we have ‘family members’ and we don’t have carers we have ‘home makers,” French explained. It’s not about having a carer, a kitchen assistant and a cleaner with everyone coming in and having a different uniform.

“None of the staff wear a uniform and all family members and home makers wear a name badge so that everyone can remember each other’s names.”

Home makers are carers, cleaners, kitchen assistants and activities co-



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ordinators all rolled into one.

“They live the full course of the day with the family members,” French explained. “They go in in the morning and support them in whatever way they need to get up and encourage them to make their bed and do light cleaning in their rooms and to come and live as a family community together.”

Family members are encouraged to choose their breakfasts from the selection of available options and do their own washing up.

“One family member has made it her job to do the washing at the end of the day,” French said. “Another lady who has memory impairment because of a stroke has been supported to make her own cup of tea. Sometimes she puts in apple juice instead of milk but she can make a cup of tea now.”

Another special family member, Pat,

who chose to come to the centre after visiting with her daughter has learnt to iron and sew and has the certificates on her wall to prove it.

Pat told *Caring Times* that relearning ironing had given her her confidence back. “I achieved something and that was good for me,” Pat said. “I am person who likes to be independent.”

In another example of how the team has empowered family members to regain their independence, a gentleman who was particularly proud of his appearance was taught to shave again by using a potato and a vegetable peeler. “It’s about supporting those fine motor skills,” French noted.

Care support levels are high with the 13 family members treated as though they are high-dependency residents with five-and-a-half to six hours of dedicated one-to-one care each day.

As French notes quality memory care doesn’t come cheap with average weekly fees of around £1,500 a week, £200 to £300 above typical residential care fees.

The results of such high levels of care have been startling, with falls and antipsychotic medicine use dramatically down, and family members allowed to live more independently for longer.

Since the introduction of the centre, Brandon Park has gone from two to three Outstanding CQC key lines of enquiry ratings, adding Caring to

Responsive and Well-led.

One relative told inspectors: “My (person’s relative) has Alzheimer’s and is now living in the Maple Memory Centre. It is wonderful, they have got their freedom back. They are encouraged to be independent, can now make a drink when they want to, get up when they choose to. How they live their daily life is their choice, and their independence is encouraged in a safe, well-staffed environment.”

Having seen the success of Maple, Stow Healthcare will be creating a similar memory centre at its newly acquired home in Colchester, as well as rolling out its care practices at its other residential and dementia homes.

“We have started to look at lessons we can learn from the memory centre that can be applied to any of our homes,” French told us. “We are looking at setting up kitchenette spaces in dining rooms across our homes where we have space to do that so that people can help themselves.”

“Some of this stuff is so easy to do and I think in general in social care we need to be looking at what’s working with this kind of approach because we all need a reason to get out of bed each day.”

Led by French, Stow Healthcare looks set to continue to be a pioneer in developing a more effective model of memory care for years to come. ct