

The Impact of Person-Directed Care at Metlifecare - Application of the Eden Alternative

The Final Report – August 2016

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Executive Summary

Metlifecare and Massey University's School of Social Work commenced a research collaboration between May 2015 and June 2016 for a project entitled "The impact of person-directed care at Metlifecare: Application of the Eden Alternative™". In January 2016, an interim report was provided to Metlifecare to report the data collected from a series of questionnaires completed by Crestwood and Pakuranga care home residents, family members and staff between May 2015 and December 2015.

This report is the final report, which covers questionnaire and interview data collected from January 2016 to April 2016 as well as a comparison between initial and final results. The first part of this Report provides an overview of the measurements used in the questionnaires sent out to care home and village residents, families and staff. The second part of this Report examines the data from a series of questionnaires given to residents, family and staff and interviews with residents and their families. The second part of this Report covers interviews with Metlifecare staff on leadership.

The research with residents, families and staff has two purposes. The first purpose is to assess the impact of implementation of the Eden Alternative™ on levels of residents' health and wellbeing, quality of life, loneliness, life satisfaction and life engagement. The second purpose is to assess how the implementation of the Eden Alternative™ may facilitate cultural change in the long-term care aged homes, while also improving working conditions for staff.

To achieve these goals, a quasi-experimental design was used to answer the following questions:

1. Are there differences in resident – and family-perceived levels of health and wellbeing, quality of life, loneliness, life satisfaction and life engagement between individuals who are residing in Metlifecare at Crestwood facility using the Eden Alternative and those residing in Pakuranga facility using a standard nursing model?
2. Are there differences in levels of satisfaction on providing care and receiving management support among employees at Metlifecare between Crestwood and Pakuranga facilities?

From May to April 2016, Metlifecare provided the following sets of data for preliminary analyses. Surveys and clinical data were provided for both Crestwood and Pakuranga, while interviews and learning circle minutes were provided for Crestwood only.

Data collected in May 2015

- Warmth Survey – Long-term Care Resident Satisfaction and overall satisfaction

- Warmth Survey – Family Satisfaction
- Warmth Survey – Employee Satisfaction

Data collected in July 2015

- Quality of Life (QOL) Survey – Long-term Care Resident Satisfaction
- QOL Survey – Village Resident Satisfaction
- Clinical data

Data collected in Sept 2015

- Leadership interviews

Data collected in Oct 2015

- QOL Survey – Long-term Care Residents Satisfaction
- Warmth Survey – Family Satisfaction
- Clinical data

Data collected in Nov 2015

- Resident and family member interviews

Data collected in Dec 2015

- QOL Survey – Village Resident Satisfaction
- Leadership Learning Circle

Data collected in January 2016

- QOL Survey - Long-term Care Resident Satisfaction
- Clinical data

Data collected in February 2016

- Leadership Learning Circle

Data collected in April 2016

- Warmth Survey - Long-term Care Resident Satisfaction
- Warmth Survey – Family Satisfaction
- Warmth Survey – Employee Satisfaction
- QOL Survey – Village Resident Satisfaction
- QOL Survey – Long-term Care Resident Satisfaction
- Resident and family members interviews second round
- Leadership interviews second round
- Clinical data

Part 1 – Overview of Measurements Used for Surveys of Quality of Life on Care Home and Village Residents, Family Satisfaction and Staff Satisfaction

To address the research purpose on assessing the impact of implementation of the Eden Alternative™ on levels of residents' health and wellbeing, quality of life, loneliness, life satisfaction and life engagement among Crestwood and Pakuranga care homes and villages. Multiple measurements were used to compile the Quality of Life survey. The following sections provide an overview of what measurements have been used in this one-year research period.

The Eden Warmth Surveys

The Eden Alternative™ website (<http://www.edenalt.org/resources/warmth-surveys/>) notes the set of Warmth Surveys were developed to assess residents, families and employees' satisfaction with the organisation adopting person-centred care practices. There are three versions of Eden Warmth Surveys, which can be completed annually by families, residents and staff care providers.

- **The Eden Warmth Survey – Residents** consists of 20 statements which rate care home residents' perceived satisfaction to the levels of optimism, trust and generosity across an organisation to reduce loneliness, helplessness and boredom. The options for responding are 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree and 5 = strongly agree. Some examples of the statements are: *I am comfortable bringing my concerns to a staff member; I rarely see the administrator.*
- **The Eden Warmth Survey – Family** consisted of 20 items rated by the family member of the care home residents' perceived satisfaction using the following responses: 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree and 5 = strongly agree. Examples of the statements are: *The residents and families participate in decision-making; The staff cares about the residents; The residents appear lonely.*
- **The Eden Warmth Survey – Staff** consisted of 29 statements rated by care staff on a Likert scale as follows: 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree and 5 = strongly agree. Examples of the statements are: *My work has meaning and purpose; I know and understand the mission of this organisation/home; I work under a great deal of tension.* An additional question was asked for the care staff to report the length of employment period in the particular facility.

Quality of Life Survey

While the Eden Warmth Surveys were briefly mentioned in the literature (Harris, Poulsen, & Vlangas, 2006; Keefe, Stadnyk, White, & Fancey, 2009), these tools did not have specific publications that details their development. Scholars such as Brownie (2011) have suggested that using validated instruments to evaluate the impact of the Eden philosophy would further enhance the potential for facility benchmarking or comparative performance evaluation. Therefore, a set of measurements was selected to construct the Quality of Life survey for care home and village residents. It is also important to note that the Quality of Life domains chosen for examination in this pilot study were those that reflect cultural change values that underpin the Eden Alternative™ principles.

- **Flourishing Scale (FS)** (Diener et al., 2010). The eight-item scale measures psychological needs related to eudaimonic wellbeing, including the need for competence and relatedness. It measures having supportive and rewarding relationships, contributing to the happiness of others, and being respected by others, assessed on a 5-point Likert scale from 1 = strong disagree to 5 = strong

agree. Examples of the statements are: *I lead a purposeful and meaningful life; I am optimistic about my future*. High scores represent individuals with many psychological resources and strengths.

- **Geriatric Depression Scale (GDS)** (Sheikh & Yesavage, 1986). The Geriatric Depression Scale (GDS) is a self-report measure of depression in older adults. The GDS was originally developed as a 30-item instrument and there are now shorter versions available to use. The current study employed the 8-item version. Of the 8-item, four indicate positive aspects and the other four represent negative aspects. Participants can respond to each statement by using a 5-point Likert scale from 1 = strong disagree to 5 = strong agree. Examples of the statement are: *I am in good spirits most of the time; I often feel helpless*.
- **UCLA – Loneliness Scale** (Hughes, Waite, Hawkley, & Cacioppo, 2004). The 3-item UCLA Loneliness scale was derived by R-UCLA Loneliness Scale (Russell et al., 1980). This scale was designed to measure one's subjective feelings of loneliness as well as feeling of social isolation. Participants can respond to each statement by using a 5-point Likert scale from 1 = strong disagree to 5 = strong agree. The three statements used in this study are: *I lack companionship; I feel isolated from others; and I feel left out*.
- **Quality of life (QoL)** (Kane, 2001; Kane et al., 2003). QOL was assessed using the six domains, including *Comfort, Functional Component, Privacy, Dignity, Meaningful Activities* and *Relationship*, of QoL Scales for care home and village residents. Each scale uses a 5-point Likert scale ranging from 1=never, 2=rarely, 3=sometimes, 4=often, and 5=always. Examples of items used for assessment are: *Bothered by noise in your room* (Comfort); *Easy to get around room by yourself* (Functional Component); *Can be alone when you want to* (Privacy); *Staff treats you with respect* (Dignity); *Enjoyable things to do at home/village on weekends* (Meaningful Activities); and *Easy to make friends at nursing home* (Relationships). High scores indicate higher satisfaction on their QOL.
- **Overall Satisfaction**. Single items were used to assess each care home and village resident's (a) living situation (*How satisfied are you with the conditions of your current living place?*), (b) life satisfaction (*All things considered, how satisfied are you with your life as a whole these days?*) and PQoL (*How would you rate your quality of life?*), using a 5-point Likert scale ranging from 1=strongly dissatisfied, 2=satisfied, 3=neutral, 4=dissatisfied, and 5=strongly dissatisfied.
- **Overall Recommendation**. A single item was use to ask participants whether they would recommend this facility to others with a response of "Mostly Yes", "Maybe" or "Mostly No".

Part 2 – Overview of Survey Results and Interviews from Residents and Families

- **Aggregated Socio-Demographic Data – Crestwood Care Home Residents:** Over the course of the one year project, Crestwood Care Home in general catered up to 35 residents, with 28 reported to be female and 7 reported to be male. The mean age of the care home residents was around 88 and the mean length of stays (days) was 728.3. The majority of the care home residents identified themselves as NZ European (N = 22), followed by other European (N = 10), NZ Maori (N = 2) and Pacific Island (N = 1). The majority identified themselves as widowed (N = 27). Three care home residents identified themselves as single and another three as married. Only one care home resident was divorced. During the one year study period, nine care home residents were discharged (N = 2 reported death, N = 5 moved to hospital and N = 2 moved to care elsewhere). See Table 1 for more information.
- **Barthel Index of Activities of Daily Living – Crestwood Care Home Residents:** The Barthel index is a 10-item ordinal scale that measures functional independence in the domain of personal care and mobility. Total possible scores range from 0-20, with lower scores indicating increased disability. Generally speaking, a score of 14 indicates some disability, usually compatible with the level of support found in the home. Aggregated data on Barthel Index indicated that 10 CWD care home residents (29%) received Barthel Index from 5 to 13 while 25 care home residents' scores (71%) were from 14 to 20. Eight out of 35 care home residents (23%) reported their Barthel scores were from 19 to 20, indicating full independent. This meant that over 70% of the care home residents at the time of the study indicated “moderate” dependency to “slight” dependency. See Table 1a for more information.
- **Other Clinical Data – Crestwood Care Home Residents:** Total number of falls reported during the four study periods were quite consistent with the numbers ranging from July 2015 (N = 20), Oct 2015 (N = 22), Jan 2016 (N = 18) and April 2016 (N = 29). Only two complaints were made by care home residents were reported in July 2015 and none from the other three periods. No body weight down by 10% was reported from the four study phases. A small number of care home residents received antipsychotic drugs among the four study periods (ranging from 1 to 2), followed by antidepressant drugs (ranging from 4 to 5) and hypnotic/sedative drugs (ranging from 4 to 6). See Table 1a for more information.
- **Warmth Survey – Crestwood Care Home Residents:** Overall, after one year of the implementation of Eden Alternative, results of the final phase of Warmth Survey (Residents) collected in April 2016 indicated that Crestwood care home residents' perceptions on the facility's “care practices” and their “trust and connectedness with others” were highly satisfied with the scores between (70 and 100%). The April 2016 results showed 10 items received 90% and above in satisfaction on agreement in which two items reached 100% satisfaction: “I feel safe” and “the staff care about me”. This is an increase when compared to the initial results collected in May 2015 where only four items received 90% and above in satisfaction on agreement. In general, care home residents from Crestwood in the April 2016 results felt that they often saw the manager of the facility and did not experience “boredom” and

“helplessness”, with only one person reported feeling some levels of “loneliness”. Compared with the May 2015 with at least 10 to 15% of Crestwood residents experienced some levels of “loneliness”, “boredom” and “helplessness”, the implementation of Eden Alternative has demonstrated significant improvement in the lives of the Crestwood care home residents after one year. While there were some declines in three of the items relating to the overall satisfaction from the May 2015 results, four items have reached 100% satisfaction on agreement: “overall impression of the nursing care received”, “overall impression of the care facility or rest home/hospital and its services”, “overall cleanliness of the nursing home” and “impression of the general quality of meals provided”.. The other three items continued to exhibit 70% and above in residents’ satisfaction. Overall, results are clearly indicative that Crestwood care home facility and its adoption of resident-centred care based on the Eden Alternative has proven to be successful at improving older people’s wellbeing while living in a residential care home.

- **Quality of Life Survey – Crestwood Care Home Residents:** Quality of life surveys were also used to collect data from Crestwood care home residents at four points in time (July 2015, Oct 2015, Jan 2016 and April 2016). The ‘Flourishing Scale’ relates to positive emotional and mental wellbeing. Overall Crestwood care home residents have demonstrated a consistent level of good positive emotional and mental wellbeing in relation to learning, productivity, creativity, relationships, pro-social behaviour, health and life expectancy across the four survey periods. While there were some slight increases in some residents’ perception on “loneliness”, “boredom” and “helplessness” in the final survey phase, the majority of the residents continued to uphold positive thoughts and attitudes across the four survey periods. In addition, the majority (over 80%) of the care home residents did not experience high levels of loneliness which included “lack companionship”, “feel left out” and “isolation from others”. Crestwood care home residents in general have consistently considered their privacy and dignity as being highly upheld by staff and the organisation. In terms of functionality, they felt that they were able to move around the care home easily, live comfortably and be well-supported by staff in the care home. While activity levels have been varied across the four survey periods, most of the residents (between 51% and 77%) indicated their enjoyment in activity participation and giving help to others; only a small portion (15%) felt the days in the care home seemed too long to them. Care home residents continued to view that it is important to remain connected with their own families and friends, and also to make friends with other care home residents. They also placed high regards of their relationship with staff working in the care home. Overall, Crestwood care home residents were highly satisfied with their current living place, their lives and self-perceived quality of life. On average, over 80% of the residents would recommend Crestwood care home facility to other people.
- **Warmth Survey – Family Satisfaction (Crestwood Care Home):** In general, families of Crestwood care home residents continued to display consistent high satisfaction of the services and care provided in both survey periods (May 2015 and April 2016). At both survey periods, families who participated in the study reported they were 100% satisfied with the care home.
- **Warmth Survey – Staff Satisfaction (Crestwood Care Home):** Crestwood care home Staff who responded to the Staff Satisfaction surveys (May 2015 and April 2016) continued to report high satisfaction scores in most items relating to the positive aspects and growth potential in

their work area. They considered “My work has meaning and purpose” as the most important aspect in their job satisfaction. Two items reported in April 2016 had more than 20% satisfaction decline: “I have the resources I need to be effective in my job” (82% vs 59%) and “My work provides me with adequate pay and benefits” (59% vs 35%). The main concern that scored higher than 50% from staff in the final survey phase was “I regularly hear co-worker making negative remarks about their employees” (59%).

- **Aggregated Socio-Demographic Data – Pakuranga Care Home Residents:** Over the course of the one year project, Pakuranga Care Home in general catered up to 39 residents, with 27 reported to be female and 12 reported to be male. The mean age of the care home residents was around 85 and the mean length of stays (days) was 1026.83. The majority of the care home residents identified themselves as NZ European (N = 32), followed by NZ Maori (N = 3), Other (N = 3) and Asian (N = 1). The majority identified themselves as widowed (N = 27). Eight identified themselves as divorced. Three care home residents identified themselves as married and another three as single. During the one year study period, four care home residents were discharged (moved to care elsewhere). See Table 1 for more information.
- **Barthel Index of Activities of Daily Living – Crestwood Care Home Residents:** The Barthel index is a 10-item ordinal scale that measures functional independence in the domain of personal care and mobility. Total possible scores range from 0-20, with lower scores indicating increased disability. Generally speaking, a score of 14 indicates some disability, usually compatible with the level of support found in the home. Aggregated data on Barthel Index from Pakuranga Care Home Residents indicated that 11 care home residents (28%) received Barthel Index from 2 to 13 while 28 care home residents’ scores (72%) were from 14 to 20. Five out of 39 care home residents (13%) reported their Barthel scores were from 19 to 20, indicating full independent. This meant that over 70% of the care home residents at the time of the study indicated “moderate” dependency to “slight” dependency. See Table 1a for more information.
- **Other Clinical Data – Pakuranga Care Home Residents:** The total number of falls reported during the four study periods were quite varied with July 2015 reporting 55, followed by an increase to 66 in Oct 2015. The last two study periods saw a substantial drop in the total number of falls with January 2016 reporting 39 and April 2016 only 24. Only July 2015 and April 2016 saw one complain each made by a care home resident. No body weight down by 10% was reported from the four study periods. A small number of care home residents received antipsychotic drugs among the four study periods (ranging from 3 to 5), slightly more than those in Crestwood Care Home. Slightly higher numbers of antidepressant drugs (ranging from 3 to 10) and hypnotic/sedative drugs (ranging from 4 to 11) were used in Pakuranga Care Home residents than in Crestwood. See Table 1a for more information.
- **Warmth Survey – Pakuranga Care Home Residents:** In general, there were substantial increases in the satisfaction of Pakuranga care home residents’ perceptions on the items relating to “care practices” and their “trust and connectedness with others” in the final survey phase (April, 2016). The range of satisfaction scores was between 58% and 92%. Between 17% and 33% of the care home residents felt they rarely saw the manager and felt “lonely”, “bored” and “helpless”. Compared to the May 2015 results, overall satisfaction scores on five items declined

between 5% and 13% in April 2016. Only two items scored over 90% in satisfaction: “the manner in which your rights are met and respected overall” (92%) and “overall impression of the nursing care you receive” (92%).

- **Quality of Life Survey – Pakuranga Care Home Residents:** Similar to Crestwood care home residents, Pakuranga care home residents in general scored consistently fairly well in positive emotional and mental wellbeing in relation to learning, productivity, creativity, relationships, pro-social behaviour, health and life expectancy across the four survey periods. Again similar to Crestwood care home residents, while there were some slight increases in the Pakuranga care home residents’ perceptions on “loneliness”, “boredom” and “helplessness” in the final survey phase, the majority of the residents continued to uphold positive thoughts and attitudes across the four survey periods. On average, 16% to 32% of the Pakuranga care home residents reported “lack companionship”, “isolated from others”, and “feel left out”. Similar to Crestwood care home residents, Pakuranga care home residents considered their privacy and dignity were highly recognised and respected by staff in the care home. They also reported to have a high functional component to move around the care home. Between 50% and 88% of the residents reported “getting a good night sleep in the care home” and the majority were fairly satisfied with their comfort around the care home. Across the four survey periods, between 35% and 71% did engage with different activities. Over 55% of them enjoyed the organised activities at the care home. Less than 30% of the care home residents reported feeling “the days seemed long to them”. The April 2016 survey scored the highest on satisfaction of the current living place (90%) but scored the lowest on quality of life (60%) among Pakuranga care home residents. On average, over 80% of the residents felt satisfied with their life in general. While the April 2016 survey received the lowest score on residents’ recommendation of the Pakuranga care home to others (60%), across the four survey periods it still received on average 78% “yes to recommend”.
- **Warmth Survey – Family Satisfaction (Pakuranga Care Home):** In general, families of Pakuranga care home residents continued to display consistent high satisfaction of the services and care provided in both survey periods (May 2015 and April 2016). The April 2016 survey received 100% satisfaction in seven areas, five more than the May 2015 survey: “The residents who live here are safe in the environment”, “I am comfortable bringing my concerns to a staff member”, “The staff care about residents”, “Staff members are friendly”, “I believe this is an abuse-free environment”, “Staff members are respectful of the residents” and “In general, I am satisfied with the home”.
- **Warmth Survey – Staff Satisfaction (Pakuranga Care Home):** Staff who responded to the Staff Satisfaction surveys (May 2015 and April 2016) at Pakuranga demonstrated consistent level of satisfaction scores in most items relating to the positive aspects and growth potential in their work area. Two items in the April 2016 received 100% satisfaction: “My work has meaning and purpose” and “The manager knows my name”. Three items reported in April 2016 had more than 20% satisfaction decline: “I can trust the people I work with to lend me a hand if I need it” (76% vs 22%), “There is opportunity to advance here” (71% vs 44%) and “I am given opportunity to grow in my workplace” (65% vs 44%). The main concerns that scored

higher than 50% from Staff in the final survey phase involved three items and they were “I don’t blame anyone for trying to grab all he/she can get in this world” (56%), “Management values money more than people” (56%), and “If you start doing favours for people, they will just walk all over you” (56%).

- **Quality of Life Survey – Village Residents:** Both Crestwood and Pakuranga Village residents displayed consistent high satisfaction level in the Flourishing scale, which related to positive emotional and mental wellbeing in relation to learning, productivity, creativity, relationships, pro-social behaviour, health and life expectancy across the four survey periods. Across the three survey periods (July 2015, Dec 2015 and April 2016), the majority of both Village residents continued to uphold positive thoughts and attitudes. Both Villages only had between 9% and 12% residents indicate experiencing “loneliness”, “helplessness” and “boredom”. Privacy and dignity were highly scored in terms of satisfaction by both of the Village residents. In fact, Pakuranga Village residents displayed 100% satisfaction on “being treated politely” across the three survey periods. The majority of the residents in both Villages rated highly on their comfort in their living areas. Scorings on meaningful activities varied and tended to be moderately low in both Villages and this could mean that Village residents may have other activities outside of the assigned villages to participate in or that activities provided lack meaning for the residents. Residents from both Villages considered highly on their satisfaction as to how “the village tries to make this an easy and pleasant place for families and friends of residents to visit”. Pakuranga Village residents considered higher on their satisfaction making friends at the village compare to Crestwood Village residents. Overall, residents in both Villages scored fairly high (>70%) on satisfaction with their current living place, life as a whole and quality of life. On average 76% of the Crestwood Village residents would recommend the care facility to others compared to 81% of the Pakuranga Village residents.
- **Interviews of Care Home Residents and Families:** Interviews were conducted with 2 CWD care home residents, 4 CWD residents’ family members, 1 Serviced Apartment resident, 1 Serviced Apartment family member and 4 CWD Village residents. Overall, the impact of the Eden Alternative was seen and acknowledged as a crucial and significant improvement on residents’ quality of life, particularly by CWD care home residents’ family members. The more flexible care provision (e.g. flexible shower time), increased variety of activities including weekends, inclusion of pets, plants, children and wider community involvement and staff training through Eden Alternative are clearly evidenced and acknowledged to demonstrate their contribution to improve residents’ satisfaction of living in the care home. A couple of important messages came through from these interview data and they were: (1) to make sure the investment that has been put into these changes will be sustainable and continue to improve for the benefit of the residents; and (2) the relationship between residents, their families, care staff and the wider community is crucial to support care home residents to continue to flourish and be recognised in order to uphold care residents’ dignity and their valuable status as important citizens in the society despite the notion of ageing and living in an institution.
- **Overall Summary:** In summary, results from the surveys and interview data have indicated that there have been differences in levels of health and wellbeing, quality of life, loneliness, life satisfaction and life engagement between individuals who are residing in Metlifecare at

Crestwood care home facility using the Eden Alternative and those residing in Pakuranga care home facility using a standard nursing model. Care home staff at Crestwood in general have demonstrated more satisfaction in their positive and growth potential and exhibited less concerns, constraints and negative perceptions in their work environment compare to Pakuranga care home. Interestingly, results of family satisfaction from both care homes have been quite similar with fairly high satisfaction demonstrated.

- In terms of how well Metlifecare has adopted resident-centred and directed approach in care homes, which aligns with the Eden Alternative™ principles, the quantitative data demonstrated that there have been good consistencies in areas that uphold what is important to older people living in care homes such as how they continue to flourish and feel satisfied in their own lives through relationships, self-esteem, purpose, maintaining their dignity, and having their privacy respected. While Crestwood care home in many aspects seem to have done slightly better than Pakuranga care home, it is important to note that areas that are extremely important to resident-centred/directed care have been clearly evidenced in the four phases of the survey in both care homes. Despite the small sample sizes of the care home residents which limit the generalizability of the findings to other care home residents and facilities, the merit of this pilot project derived from collection of both quantitative data through surveys and also qualitative interviews with residents, families and leaders. These sets of data have demonstrated that positive results related to care home residents and family satisfaction measures support the work of the culture change movement that underpinned the Eden Alternative™ and the need to focus not only on physical health but also psychological, social and emotional wellbeing, to maximise the positive experience of older people within the care homes. One significant strength identified as a strong predictor on care home residents' satisfaction is dignity. As is demonstrated in this pilot study, issues of dignity are enmeshed in daily life interactions, ranging from interpersonal communication to personal care. Thus, focusing and sustaining the enhancement of dignity is a starting point for facility implementation of culture change. While the pilot study also provided other additional values that are important in culture change process, dignity can and should be interwoven into the implementation of all culture change values. Supporting dignity should be the basis on which to build relationships between staff members and care home residents. Staff education should emphasis thoughtful and purposeful dignified treatment of our older people. Effective education is not simply didactic. Dignity towards care home residents, family members and staff can be modelled so that it becomes a fundamental characteristic of the care home culture. In conclusion, the philosophy of resident-centred/directed care has proven to be workable, achievable and desirable for a profit-making organisation such as Metlifecare. This report has demonstrated that Metlifecare has made significant effort to instil cultural transformations in nursing home setting, in particular to maximise care home residents' dignity, provide opportunities for psycho-social wellbeing and enhance the physical and practical experience that may be productive in the change process that will have significant impact on service provision for our ageing community.

1.0 Overview of the Quality of Life Survey on Care Home Residents Results Collected in January 2016

The Quality of Life survey consists of 11 sections, ranging from Flourishing Scale, Geriatric Depression Scale, Loneliness Scale, six constructs of QOL (Comfort, Functional Component, Privacy, Dignity, Meaningful Activities, Relationship), overall satisfaction and overall recommendation.

1.1 QOL Survey – Care Home Residents

- Survey responses: 26 residents from Crestwood and 28 residents from Pakuranga
- QOL – Flourishing scale: Crestwood residents scored one item with just over 80% agreement on satisfaction “I am competent and capable in the activities that are important to me”. It is interesting to note that Pakuranga residents scored one item with over 90% on satisfaction “I am a good person and live a good life” and three items with over 80% on satisfaction “People respect me” (85.7%), “I am engaged and interested in my daily activities” (82.2%) and “I actively contribute to the happiness and wellbeing of others” (82.2%).
- QOL – Geriatric Depression Scale: Crestwood residents scored higher in “I am in good spirits most of the time” (92.3% vs 78.6%), “I feel happy most of the time” (88.5% vs 75.0%), “I think it is wonderful to be alive now” (77.0% vs 67.8%) and “I feel full of energy” (38.5% vs 25.5%) when compared with Pakuranga residents. Overall, less than 30% of the residents from both facilities felt they were bored and lonely. Pakuranga residents scored 46.4% on “I often feel helpless” when compared to 30.7% of Crestwood residents.
- QOL – Loneliness Scale: Less than 30% of the residents from both facilities felt lonely in general.
- See Table 2 for more information.
- QOL – Comfort: Residents in both facilities reported having good night’s sleep (CWD=73.1%; PAK=75.0%). Crestwood residents seemed to experience slightly higher discomfort in “noise” and “physical pain” than Pakuranga.
- QOL – Functional Component: Both facilities scored reasonably high on agreement of satisfaction when it comes to residents’ ability in functional component.
- QOL – Privacy: Crestwood residents reported over 80% of satisfaction on three items and over 70% on two items while Pakuranga only had two items over 70%.
- QOL – Dignity: All items were rated 80% or higher by Crestwood residents. Pakuranga in general did well with their items ranged from 78.5% to 89.3%.
- QOL – Meaningful Activities: In general, Crestwood residents scored higher in engaging in meaningful activities than did residents at Pakuranga. The majority of the residents in both facilities did not feel “the days here seem too long to you”.
- QOL – Relationship: Crestwood residents reported higher scores in relationship items than Pakuranga.
- See Table 2a for more details

- In terms of overall satisfaction, Crestwood residents scored over 80% in all the items (compared with Pakuranga residents).
- Over 90% of the Crestwood residents would mostly recommend the care facility to others while over 85% of the Pakuranga residents would.
- See Table 2c for more details

2.0 Overview of the Warmth Survey on Care Home Residents Results Collected in April 2016

The Eden Warmth Surveys were developed to measure the levels of optimism, trust and generosity across an organisation (<http://www.edenalt.org/resources/warmth-surveys/>). Three versions of Eden Warmth Surveys were used in this study, which can be completed annually by families, residents and staff care providers. The EWS-R consists of twenty statements rated by care home residents in five domains – questions are based on the categories of generosity, trust, optimism as well as pessimism and cynicism on a Likert scale as follows: 1=strongly disagree, 2= disagree, 3=neutral, 4=agree, and 5=strongly agree.

2.1 Warmth Survey – Care Resident Satisfaction

- Survey responses: 23 residents from Crestwood and 12 residents from Pakuranga
- Overall, of the 16 items to the positive aspects of living in the facilities, scores of agreement to satisfaction reported by residents at Crestwood were all higher than those at Pakuranga.
- 100% agreement of satisfaction was reported in two items “I feel safe” and “The staff care about me”.
- Only one resident in Crestwood indicated boredom while none of them reported feeling lonely and helpless.
- On the other hand, between 17 and 33% of Pakuranga residents reported feeling bored, lonely and helpless.
- While all Crestwood residents reported seeing the manager frequently, 25% of Pakuranga residents reported rarely seeing the manager.
- Crestwood residents also reported 100% agreement of satisfaction in four overall satisfaction areas: “nursing care”, “care facility or rest home/hospital and its services”, “overall cleanliness” and “general quality of meals provided”.. Only two areas were scored over 90% agreement of satisfaction from Pakuranga residents on “nursing care” and “rights are met and respected overall”.
- See Table 3 and 3a for more information

2.2 Warmth Survey – Family Satisfaction on Care Homes

- Survey responses: 12 families from Crestwood and 4 families from Pakuranga
- Pakuranga scored 100% agreement of family satisfaction on six items “the residents who live here are safe in the environment”, “I am comfortable bringing my concerns to a staff member”, “the staff care about residents”, “staff members are friendly”, “I believe this is an abuse-free environment”, and “staff members are respectful to the residents” while Crestwood scored 100% family satisfaction agreement on three items “the staff are well trained and know what they are doing”, “the manager/staff know my name”, and “staff members take time to talk and listen to the residents”.
- Both facilities scored 100% agreement on “In general, I am satisfied with the home”.
- Only around half of the families from both facilities indicated their agreement on satisfaction on “I trust the medical doctor and their interventions who attends to my family member”.
- 3 out of 4 families (75%) reported that they “rarely see the manager” at Pakuranga.
- 2 out of 4 families (50%) reported that “the residents appear bored” at Pakuranga
- See Table 4 for more information.

2.3 Warmth Survey – Care Home Employee Satisfaction

- Survey responses: 37 employees from Crestwood and 9 employees from Pakuranga
- In terms of positive aspects and growth potential, employees from Pakuranga scored 100% on satisfaction agreement on three items “my work has meaning and purpose”, “the manager knows my name” and “at the end of a typical day, I feel I have contributed to the quality of life of the residents I serve”.
- Overall, Crestwood scored 18 out of 29 items 70% or over on employee satisfaction agreement while Pakuranga only scored 15 items that were 70% or over on employee satisfaction agreement.
- See Table 5 for more information

- In terms of concerns, constraints and negative perceptions, employees from Crestwood only scored one negative item with over 50% agreement “I regularly hear co-worker making negative remarks about their employees”.
- Pakuranga scored four negative items that had over 50% agreement “if you start doing favours for people, they will just walk all over you”, “people pretend to care more about one another than they really do”, “management values money more than people”, “I don’t blame anyone for trying to grab all he/she can get in this world”.
- See Table 5a for more information

3.0 Overview of the Quality of Life Results Collected in April 2016

The Quality of Life survey consists of 11 sections, ranging from Flourishing Scale, Geriatric Depression Scale, Loneliness Scale, six constructs of QOL, overall satisfaction and overall recommendation.

3.1 QOL Survey – Care Home Residents

- Survey responses: 14 residents from Crestwood and 10 residents from Pakuranga
- QOL -The flourishing scale: This scale is to measure the respondent’s self-perceived success in important areas such as relationship, self-esteem, purpose and optimism. Crestwood residents scored 70% or more agreement on satisfaction on five items: “People respect me” (93%), “I am a good person and live a good life” (71%), “My social relationships are supportive and rewarding” (71%), “I am engaged and interested in my daily activities” and “I actively contribute to the happiness and wellbeing of others”.
Pakuranga residents scored seven items with 70% or more: “People respect me” (90%), “I actively contribute to the happiness and wellbeing of others” (80%), “I am a good person and live a good life” (90%), “My social relationships are supportive and rewarding” (70%), “I am competent and capable in the activities that are important to me” (70%), “I am engaged and interested in my daily activities”, and “I lead a purposeful and meaningful life”. Pakuranga residents had the lowest agreement on satisfaction on “I am optimistic about my future” (60%) while Crestwood residents had two items scored less than 60% agreement on satisfaction: “I lead a purposeful and meaningful life” (57%) and “I am optimistic about my future” (57%).
- QOL – Geriatric Depression Scale: Crestwood residents in general scored over 75% of agreement on satisfaction on “I feel happy most of the time” (93%), “I am in good spirits most of the time” (86%) and “I think it is wonderful to be alive now” (76%). Pakuranga residents, however, only had one item scored over 75%: “I am in good spirits most of the time” (80%). Residents from both facilities did not score high on feeling lonely, bored and helpless.
- QOL – Loneliness Scale: In terms of loneliness, 90% of Pakuranga residents indicated “feeling isolated from others” compared to 71% in Crestwood. Around 40% of residents in both facilities felt “lack of companionship”.
- See Table 6 for more information
- QOL – Comfort: Crestwood residents reported over 75% of satisfaction with “Get a good night’s sleep” when compared to only half in Pakuranga. Crestwood and Pakuranga residents in general reported low level in experiencing coldness in the facility, in the same position for too long, noise in their rooms and other parts of the facility. Yet, half of the Pakuranga residents reported frequently in physical pain compared to only 14% among Crestwood residents.
- QOL – Functional Component: Residents in both facilities reported similar high level of satisfaction in functional component (79% to 90%).
- QOL – Privacy: Residents in both facilities reported similar high level of satisfaction in privacy (70% to 86%).
- QOL – Dignity: Residents in both facilities reported similar high level of satisfaction in dignity (70% to 100%) with Crestwood scored the highest in all aspects, particularly with 100% satisfaction on “Do you feel that you are treated with respect here?”
- QOL – Meaningful Activities: Pakuranga residents had the highest score in “Do you get a chance to

go outdoors” (90%) compared with Crestwood (57%). Over half of the Pakuranga residents (60%) felt “days here seem too long” compared with Crestwood (29%).

- QOL – Relationship: Crestwood residents had the highest satisfaction score (79%) on “this facility tries to make this an easy and pleasant place for families and friends of residents to visit” and “consider your staff member to be your friend” compared to Pakuranga (50% and 20% respectively). Over 71% of Crestwood residents indicated their satisfaction on ‘people who worked here stopped just to have friendly conversation with you’ when compared with Pakuranga with only 50%.
- Crestwood residents scored 100% satisfaction on “conditions of the current living place” and “satisfaction of life as a whole these days” while only 90% and 70% respectively for Pakuranga residents.
- Quality of life rating seemed to be a bit low among Pakuranga residents (60%) when compared with Crestwood residents (93%).
- Over 90% of Crestwood residents would recommend Crestwood to others while only 60% of Pakuranga would do so.
- See Table 6a for more information

3.2 QOL Survey – Village Residents

- Survey responses: 104 village residents from Crestwood and 56 residents from Pakuranga
- QOL – The Flourishing Scale: Overall, both villages had similar scores in the Flourishing scale (CWD: 52% to 77%; PAK: 59% to 84%). Pakuranga Village residents had two items that scored at 80% or over: “I am competent and capable in the activities that are important to me” (84%) and “I am a good person and live a good life” (80%).
- QOL – Geriatric Depression Scale: Both Villages also had similar scores on positive outlook “I am in good spirits most of the time” (CWD: 79%; PAK: 80%), “I feel happy most of the time” (CWD: 77%; PAK: 82%), “I think it is wonderful to be alive now” (CWD: 66%; PAK: 75%), “I feel full of energy” (CWD: 37%; PAK: 36%). Both Villages did not score high on residents’ perceptions on feeling “lonely”, “helpless”, “problems with memory than most” and “bored”.
- QOL – Loneliness Scale: Both Villages also did not score high on loneliness scale.
- See Table 7 for more information

- QOL – Comfort: Both Villages scored reasonably high on their satisfaction with “a good night sleep” (CWD=80%; PAK=79%) and were not too bothered by noises in living space or other parts of the village.
- QOL – Privacy: Both Villages score over 90% satisfaction in the area of dignity.
- QOL – Dignity: Both Villages rated over 85% of satisfaction of in the privacy aspects. Pakuranga Villages had the highest scores in all three items with two of them obtained 100% “staff treat you politely” and “feel you are treated with respect here”.
- QOL – Meaningful Activities: over 50% of the residents from both Villages engaged with giving helps to others while more residents at Pakuranga reported enjoying more with the organised activities at the village (50%) when compared with Crestwood (38%). Less than 15% from both Villages reported feeling “the days seem too long here”.
- QOL – Relationship: Pakuranga Village residents reported higher in “This Village tries to make this

an easy and pleasant place for families and friends of residents to visit” (80%), “Easy to make friends at this village” (79%) and “Consider any of the residents here as close friend” (52%) when compared with Crestwood Village residents (74%; 49%; 36%).

- Overall, Pakuranga Village residents scored slightly higher in their overall satisfaction on “living place” (PAK=86%; CWD=83%), and “quality of life” (PAK=84%; CWD=79%). Similar scores were reported between the two Villages on “satisfied with your life as a whole” (PAK=75%; CWD=77%).
- Over 65% of the residents at both Villages reported they would mostly recommend the care facility to others (CWD=68%; PAK=77%).
- See Table 7a for more information

4.0 Comparison of the Warmth Surveys on Care Home Residents - May 2015 and April 2016

4.1 Comparison – Warmth Survey Care Home Residents (Crestwood)

- Overall, the majority of Warmth Survey questions reported by Crestwood residents in April 2016 were increased, indicating they were in general more satisfied with the services received than in May 2015. Two items from April 2016 obtained 100% satisfaction: “I feel safe” and “The staff care about”.
- Only one person (4%) in April 2016 surveyed reported feeling bored and no one reported feeling lonely, helpless or rarely saw the manager compared to the results in May 2015 with a range between 10 and 20% on these items.
- See Table 8 for more information.
- Four items in April 2016 survey obtained 100% satisfaction: “overall impression of the nursing care you receive”, “overall impression of the care facility or rest home/hospital its services”, “overall cleanliness of the nursing home/hospital” and “impression of the general quality of the meals provided” compared to none in May 2015 results.
- Two items have some substantial drops on satisfaction on agreement compared to May 2015 results: “Metlifecare’s understanding of the needs of older people” (dropped from 96% to 70%) and “the manner in which your rights are met and respected overall” (dropped from 90% to 78%).
- See Table 8a for more information.

4.2 Comparison – Warmth Survey Family Satisfaction (Crestwood Care Home)

- Compared to the results in May 2015, there are some drops in the April 2016 results. Noticeably are four items: “I am comfortable bringing my concerns to a staff member” (dropped from 100 to 83%), “Staff members are respectful of the residents” (dropped from 100% to 75%), “I trust the medical doctor and their interventions who attends to my family member” (dropped from 88% to 58%) and “People from the community are involved in the home” (dropped from 63% to 42%).
- Two items have remained the same on getting 100% from the two periods “The residents and families are able to participate in decision-making about care and activities of daily living” and “in general, I am satisfied with the home”.
- Two items from April 2016 have increased to 100% satisfaction “the manager/staff know my name” (increased from 88 to 100%) and “Staff members take time to talk and listen to the residents” (increased from 88 to 100%).
- Two items in April 2016 increased substantially from May 2015: “Residents’ room look much like a room in someone’s home” (increased from 25 to 75%) and “I often see children in the facility” (increased from 13 to 50%).
- Loneliness, helplessness and boredom reported by Crestwood residents remained relatively low across the two periods.
- See Table 9 for more information.

4.3 Comparison – Warmth Survey Staff Satisfaction (Crestwood Care Home)

- Results from the two surveys on positive aspects and growth potential were quite similar. Four items have indicated some substantial drop: “I have an opportunity to grow in my workplace” (dropped from 88 to 68%), “I have the resources I need to be effective in my job” (dropped from 82 to 59%), “I am given opportunities to use my talents for the home’s benefit” (dropped from 76 to 68%) and “My work provides me with adequate pay and benefits” (dropped from 59 to 35%).

- Two items have demonstrated some substantial increase: “At the end of a typical day, I feel I have contributed to the quality of life of the residents I serve” (increased from 71 to 92%) and “There is a happy atmosphere in the place I work” (increased from 59 to 73%).
- See Table 10 for more information.
- In terms of concerns, constraints and negative perceptions from Crestwood staff, results from both periods indicated that over 50% of staff reported “regularly hearing co-worker making negative remarks about their employee”.
- Noticeably three items have indicated some substantial drop on agreement in April 2016: “I have to follow procedures that prevent me from doing my job well” (dropped from 71 to 35%), “When I do my work, I run into obstacles that make it difficult to do my job” (dropped from 35 to 19%) and “I feel like a number, nobody here really cares about me” (dropped from 24 to 8%).
- Some increase in the statement “I only do my job because I need the money” from 6% in May 2015 to 14% in April 2016.
- See Table 10a for more information.

4.4 Comparison – Warmth Survey Residents (Pakuranga Care Home)

- Overall, Pakuranga residents have reported more satisfaction in the April 2016 survey results than in May 2015 (14 out of 16 positive statements recorded increase in satisfaction).
- In terms of overall satisfaction, results from Pakuranga residents indicated some drops in 5 out of the 7 items. The most substantial drop was “overall impression of the care facility or rest home/hospital and its services” from 80 to 67%.
- Two satisfaction scores were increased in April 2016 with “Metlifecare’s understanding of the needs of older people” having the biggest jump from 40 to 75%.
- See Table 11 and 11a for more information.

4.5 Comparison – Warmth Survey Family Satisfaction (Pakuranga Care Home)

- Families reported more areas of satisfaction of the homes in April 2016, with six areas achieving 100% satisfaction: “the residents who live here are safe in the environment”, “I am comfortable bringing my concerns to a staff member”, “the staff care about residents”, “staff members are friendly”, “I believe this is an abuse-free environment”, and “staff members are respectful of the residents”, compare to only two areas recorded 100% satisfaction in May 2015.
- Only 4 family satisfaction results received for the April 2016. Among the four, only half of the respondents indicated that the manager/staff knew their names (87% in May 2015). Only half of them reported “trusting the medical doctor and their interventions who attends to their family” (80% in May 2015). Half of the respondents felt that the residents appeared bored (13% in May 2015) and nearly 75% reported that they rarely saw the manager (13% in May 2015).
- Interestingly, all four respondents surveyed in April 2016 indicated 100% satisfied with the home compared to 93% in May 2015.
- See Table 12 for more information.

4.6 Comparison – Warmth Survey Staff Satisfaction (Pakuranga Care Home)

- In general, staff perceptions on positive aspects and growth potential were quite similar between the two periods. There are two items that scored 100% satisfaction in April 2016: “my work has meaning and purpose” and “the manager knows my name”.
- Three items had substantial drop on satisfaction from April 2016 results: “I can trust the people I work

with to lend me a hand if I need it” (dropped from 76 to 22%), “There is opportunity to advance here” (dropped from 71 to 44%) and “I am given opportunities to use my talents for the home’s benefit” (dropped from 65 to 44%).

- See Table 13 for more information.
- Results from the two periods on staff concerns, constraints and negative perceptions were quite similar. Three substantial drops in two areas: “I regularly hear co-worker making negative remarks about their employees” (dropped from 65 to 44%), “My work is boring” (dropped from 47 to 11%) and “I have to follow procedures that prevent me from doing my job well” (dropped from 59 to 33%).
- No respondent reported dissatisfaction on “I feel like a number, nobody here really cares about me” and “I spent too much time in unnecessary activities” in May 2015 survey but 22% (2 out of 9 staff) reported dissatisfaction on these two items in April 2016.
- See Table 13a for more information.

5.0 Comparison of the Quality of Life Care Home Resident Surveys - July 2015, Oct 2015, Jan 2016 & April 2016

5.1 Comparison – Quality of Life Care Home Resident Satisfaction (Crestwood)

- QOL – The Flourishing Scale: Overall, results of the Flourishing Scale among the four periods were consistent.
- QOL – Geriatric Depression Scale: Over 71% of Crestwood residents in the July 2015 survey reported experiencing boredom but have reduced in the next three periods (10% and 36% respectively). Over 40% of Crestwood residents reported feeling lonely and nearly 30% of Crestwood residents felt they have more problems with memory than most in the April 2016 survey when compared with the other three periods.
- QOL – Loneliness Scale: There were also substantial increases in residents’ perceptions on “lack companionship”, “felt left out” and “isolated from others” in the April 2016 survey when compared with the other three periods.
- See Table 14 for more information.
- QOL – Comfort: The April 2016 had the highest satisfaction in having a good night’s sleep; yet, there were some increases in terms of frequency in physical pain, experiencing coldness in the facility, being in the same position and bothered by noises in other parts of the facility when compared with the other three periods. “Bothered by noise in your room” was substantially reduced from result collected in Jan 2016 to April 2016 (dropped from 31 to 7%).
- QOL – Functional Component: Results from July 2015 were the best. The April 2016 results demonstrated the satisfaction levels of all items scored between 79 and 86%.
- QOL – Privacy: July 2015 results were the best. The April 2016 results were better than Oct 2015. No item on satisfaction in April 2016 survey scored below 70%.
- QOL – Dignity: “treated with respect in the facility” continued to be the most important and satisfied area living in the facility (100% satisfaction in July 2015 and April 2016). Scores on the four phases were in general quite consistent.
- QOL – Meaningful Activities: satisfaction scores resulted from April 2016 survey on “go outdoors” and “enjoyed organised activities at the facility” were the lowest. There was increase in “give help to others” in the April 2016 survey. Residents in April 2016 survey also reported higher percentage in feeling “the days here seem too long to them” (29%) when compared to the other three periods (18%, 5% and 15% respectively).
- QOL – Relationship: July 2015’s result on “an easy and pleasant place for families and friends of residents to visit” was the best with 100% satisfaction. Two items “people who worked here stopped just to have a friendly conversation with you” and “consider staff to be your friend” received over 70% agreement on satisfaction in Jan 2016 and April 2016. “Easy to make friends at this facility” and “consider any residents here as your close friend” across all four survey periods reported to receive between 29 and 65% agreement on satisfaction.
- Overall satisfaction: April 2016 survey results received 100% satisfaction on “satisfied with the conditions of current living place” and “satisfied with life in general”. It also received the highest score on quality of life and over 90% of the Crestwood residents would recommend this care facility to others.
- See Table 14a for more information.

5.2 Comparison – Quality of Life Care Home Resident Satisfaction (Pakuranga)

- The April 2016 survey results on Flourishing Scale among Pakuranga residents were higher than July 2015 results. They were also quite similar to the Oct 2015 and Jan 2016 results. Overall, Pakuranga residents reported satisfaction level was between 60 and 90% in the last phase of the survey period (April 2016).

- The four survey periods indicated that less than 36% of the Pakuranga residents experienced helplessness, loneliness and boredom.
- Over 75% reported feeling in “good spirits most of the time” over the four survey periods.
- “Feeling happy most of the time” and “wonderful to be alive now” were down in the final survey period (April 2016) (60% and 40% respectively).
- Overall, 30% of the Pakuranga residents in the final survey indicated that they were “helpless”, lonely” or ‘bored”, which was a small portion.
- In terms of feeling “lack of companionship”, the four survey periods produced similar results among the Pakuranga residents (between 35 and 40%) on agreement.
- Half of the Pakuranga residents reported “feeling isolated from others”, moderately higher than the first three survey periods.
- Between 10 and 23% of the Pakuranga residents reported “feeling left out”, with the April 2016 results scoring the lowest in agreement.
- QOL – Comfort: Only 50% of the Pakuranga residents reported “getting a good night’s sleep” compared to 77% in July 2015, 88% in Oct 2015 and 75% in Jan 2016. In addition, 50% reported “often in physical pain” compared to 23% in July 2015, 13% in Oct 2015 and 21% in Jan 2016. Not many residents reported being bothered by noise in their rooms across three survey periods and other parts of the facility.
- QOL – Functional Component: Results in April 2016 had the highest satisfaction rates compared with the other three periods, indicating Pakuranga residents in general felt they were quite able and competent to move around and reach things in the facility.
- QOL – Privacy: Results in April 2016 had the highest satisfaction rates compared with the other three periods, indicating residents were in general felt their privacy was highly respected.
- QOL – Dignity: All four survey periods had similar satisfaction rates scoring between 64 and 89%, indicating residents were in general felt their dignity was highly respected.
- QOL – Meaningful Activities: 90% of the Pakuranga residents reported being satisfied of “getting a chance to go outdoors” compared to 59% in July 2015, 75% in Oct 2015 and 72% in Jan 2016. Between 40 and 63% of the residents reported to be satisfied with the “organised activities at the facility”. 50% of the residents reported to “give help to others” in Oct 2015 and April 2016, which was higher than the result in July 2015 (27%). 60% of the residents in Pakuranga reported “the days here seem too long to them” in April 2016, compared with 18% in July 2015, 50% in Oct 2015 and 18% in Jan 2016.
- QOL – Relationship: Compared to results in July 2015, Oct 2015 and Jan 2016, results obtained from April 2016 scored the lowest agreement rates on “this facility tries to make this an easy and pleasant place for families and friends of residents to visit”, and “consider your staff member to be your friend”. In the last survey period (April 2016), half of the residents reported “easy to make friends at this care facility” and 60% reported “consider any of the residents here as your close friend”.
- Overall Satisfaction: April 2016 result on “satisfied with the conditions of your current living place” scored the highest score (90%). Between 70 and 88% of the residents across four survey periods reported to be “satisfied with your life as a whole these days”. Quality of life was reported to down from 88% (Oct 2015) to 60% (April 2016). Only 60% of Pakuranga residents reported to “recommend this care facility to others” compared to 68% (July 2015), 100% (Oct 2015) and 86% in Jan 2016.
- See Table 15a for more information.

6.0 Comparison of the Quality of Life Village Surveys - July 2015, Dec 2015, Jan 2016 & April 2016

6.1 Comparison – Quality of Life Village Resident Satisfaction (Crestwood)

- While the three survey periods collected on Flourishing Scale indicated similar scores, most agreement scores collected in April 2016 reported to have gone down slightly compared to the other two periods.
- Scores on “good spirits”, “feel happy”, “wonderful to be alive now” and “full of energy” were consistent across the three survey periods. Only between 6 and 12% of the Crestwood Village residents reported feeling “bored”, “lonely”, “have more problems with memory than most” and “helplessness”.
- Less 10% of the Village residents across three survey periods indicated “lack companionship”, “isolated from others” and “feel left out”.
- QOL – Comfort: Almost 80% of the Crestwood Village residents reported “getting a good night’s sleep” across the three survey collection. Only a small portion of the Village residents ($\leq 10\%$) reported to be bothered by noise.
- QOL – Privacy: Between 93 and 95% of the Village residents were satisfied with their privacy being respected.
- QOL – Dignity: Surveys among the three collection periods indicated a consistent range of satisfaction (88 to 97%) on Village residents’ dignity being respected and upheld.
- QOL – Meaningful Activities: Over 55% of the Village residents reported frequently “giving help to others” across the three survey periods. Less than 50% of the Village residents reported frequently “enjoying the organised activities at the village” across the three survey periods. Only a small portion of Village residents ($\leq 10\%$) agreed “the days here seem too long to them”.
- QOL – Relationship: Results from the three survey periods on items comprised of QOL (Relationship) were similar. “Village tries to make this an easy and pleasant place for families and friends of residents to visit” was considered the most important aspect among Village residents ($> 70\%$). Between 36 and 53% of the Village residents considered “any of the residents here as your close friend” and less than 35% of them “considered staff member to be their friend”.
- Overall Satisfaction: Consistent with the three survey periods, over 80% of the Crestwood Village residents reported satisfaction “with the conditions of their current living space”. Between 77 and 85% of the Village residents were “satisfied with their life as a whole” and between 77 and 84% of them were satisfied with “their quality of life”. Only 68% of the Village residents in the April 2016 survey reported to recommend the care facility to others compared to 82% in July 2015 and 78% in Dec 2015.
- See Table 16a for more information.

6.2 Comparison – Quality of Life Village Resident Satisfaction (Pakuranga)

- The three survey periods collected on Flourishing Scale indicated similar satisfaction scores (between 55 and 84%)
- Scores on “good spirits”, “feel happy”, “wonderful to be alive now” and “full of energy” were consistent across the three survey periods among Pakuranga Village residents. Only between 5 and 14% of the Pakuranga Village residents reported feeling “bored”, “lonely”, “have more problems with memory than most” and “helplessness”.
- Less 15% of the Village residents across three survey periods indicated “lack companionship”, “isolated from others” and “feel left out”.
- See Table 17 for more information.
- QOL – Comfort: Between 73 and 79% of the Pakuranga Village residents reported “getting a good

night's sleep" across the three survey collection. Only a small portion of the Village residents ($\leq 18\%$) reported to be bothered by noise.

- QOL – Privacy: Between 91 and 97% of the Village residents were satisfied with their privacy being respected.
- QOL – Dignity: Surveys among the three collection periods indicated a consistent range of satisfaction (96 to 100%) on Village residents' dignity being respected and upheld. Both Dec 2015 and April 2016 received 100% agreement on satisfaction on two items "staff treat you politely" and "you are treated with respect here".
- QOL – Meaningful Activities: Over 50% of the Village residents reported frequently "giving help to others" across the three survey periods. Over 50% of the Village residents reported frequently "enjoying the organised activities at the village" across the three survey periods. Dec 2015 scored 35% of Village residents agreed "the days here seem too long to them" but result in April 2016 reported this to have dropped to 14%.
- QOL – Relationship: Results from the three survey periods on items comprised of QOL (Relationship) were similar. "Village tries to make this an easy and pleasant place for families and friends of residents to visit" and "easy to make friends at this village" were considered the most important aspects among Village residents (between 77 and 88%). Only 29% of them "considered staff member to be their friend" in April 2016 compared to 43% in July 2015 and 47% in Dec 2015.
- Overall Satisfaction: Consistent with the three survey periods, over 80% of the Crestwood Village residents reported satisfaction "with the conditions of their current living space". Between 75 and 85% of the Village residents were "satisfied with their life as a whole" and between 82 and 87% of them were satisfied with "their quality of life". 77% of the Village residents in the April 2016 survey reported to recommend the care facility to others compared to 80% in July 2015 and 85% in Dec 2015.
- See Table 17a for more information.

7.0 Summary of Residents' and Families (Care Home, Serviced Apartment and Village) Interview Collected in April 2016

7.1 Interview responses:

- 3 CWD care home residents
 - 3 CWD care home residents' family members (two interviewed in person and one via email)
 - 1 CWD serviced apartment resident's family member
 - 1 CWD serviced apartment residents
 - 4 CWD village residents
 - 2 CWD village residents' family members
- Family members from CWD care home in general were very positive about their older family members' lifestyle in Crestwood. They certainly considered the home-like environment with caring staff was an important aspect for their older family members to grow old and feel safe. They have provided fairly positive and constructive comments on changes that have happened since the implementation of Eden Alternative. They particularly commended the change of culture – moving away from an institution style of care provision to adopt a more flexible, empowered and resident-centred approach. Many of them have mentioned the change of shower schedule, the inclusion of pets (e.g., cats, dogs and birds), plants, children from the community and other people from the community to provide entertainment and activities have definitely improved the atmosphere and wellbeing of residents.
 - CWD care home residents considered the importance of having different activities being made available, including in the weekend, and more involvement with the wider community such as visits from children has helped them to be more inclusive and involved with the wider community outside of Crestwood. Building relationship with staff, people from the community and having pets around are important to enhance quality of life and life satisfaction among care home residents.
 - The views from those who live or have family members living in the Serviced Apartment saw more residents mixing together between the Service Apartments and Care Home was a good sign as to reduce barriers and misconceptions.
 - Loneliness was not clearly defined or facilitated among all the interviews, particularly for residents as many of them also considered this as a personal preference. However, it was clear from the interview data that CWD and staff have been proactive to support residents in all kinds of areas to improve their quality of life living in the facility. Residents also indicated that they themselves tried to engage or encourage others to engage if they felt someone was lonely or not often engaged with others.
 - Village residents tended to have mixed views about life in the Care Home or Serviced Apartments. While some of them may acknowledge different kinds of activities available, the general feeling was that many of the Village residents continued to maintain their own personal and social networks within or outside of the Village. They considered that their physical and functional independence makes them different to the kind of living offered in the care home or service apartment residents.
 - Family members of Village residents considered Crestwood has provided good quality of services through staff, a variety of activities and positive environment. They do acknowledge staff work hard to make sure people around the Village are being looked after and cared for.
 - While all of the family members from CWD care homes have praised the changes made, many of them have urged the need to make sure changes made through the Eden Alternative will be sustained. Some also said that while providing variety of activities is important to change atmosphere in a care home, focusing on individual residents' needs is also vital to ensure individuality is maintained living in a group situation.
 - Table 18 and 18a provides a brief summary of the interviewees' comments.

Part 2 – Overview of the Leadership Interviews

The following is a summary of the findings of the surveys and interview data collected for the pilot study period between May and December 2015.

1.0 Summary of First Round of Leadership Interviews and Leadership Circles

First round of Leadership Interviews

Leadership interviews were conducted with fourteen personnel as part of the Eden Alternative pilot at Crestwood between 17 September and 16 October 2015. These personnel included management staff, professional staff and support service staff. They were asked to discuss their perceptions and experiences on three areas: general leadership, Eden Alternative specific leadership and their self-perception in a leadership role.

The main findings from the first round of leadership interviews demonstrated that:

- Key characteristics of leadership were enthusiasm, motivation, respect, listening skills, resilience, honesty and integrity through role modelling, leading by example, provision of support and feedback, acting decisively and mentoring;
- General sense of positive feeling of their experience in leadership regarding the implementation of the Eden Alternative and aware of the responsibility of leaders to ensure the Eden Alternative was for the benefits of residents;
- Post Eden Alternative training has increased their confidence and clarified their focus on Eden as a positive development;
- Able to witness a sense of engagement with new leaders who demonstrated commitment to the changes required for Eden to happen but noted the importance of needing pre-training preparation and timing for training in order to maintain sustainability;
- A clear recognition of the importance of resident voice and engagement and congruence between the Eden Alternative and resident-directed care emerged;
- Some challenges identified: maintaining self-confidence, managing staff performance, time management and stress-management;
- Mechanisms such as supervision (both administrative and supportive dimensions) and mentoring will be crucial to ensure staff with leadership responsibility are able to discharge their roles effectively

Themes generated from the first round of leadership interviews were used to develop interview questions for the second round of leadership interviews.

Two Leadership Learning Circles – Facilitated Group Discussion

Between the first and second rounds of leadership interviews, two rounds of leadership learning circle were undertaken during the study period. One was conducted in December 2015 and the other one was February 2016. Nine senior personnel participated in each of the circle. In each circle, participants were asked to reflect on this question “how do you see your role as a leader on the Eden Alternative journey?”

The common themes emerged in the first leadership circle on 7 December 2016 were “positive”, “keeping momentum alive at the ground level” and “leading by example”. There was a sense that while many participants agreed with the common theme, there was an underlying tone that “this [implementing Eden] isn’t easy – some don’t accept change/don’t see the need for change/don’t see that they’re not Eden Alternative oriented.”

In the second leadership circle on 29 February 2016, seven participants from the first round returned to the circle, along with two new members. The common themes emerged in this round of circle were “supporting” and “encouraging”. It was noted that the atmosphere of the discussion was much more positive than during the first learning circle in December.

2.0 Second Round of Leadership Interviews

Participants

Leadership interviews were completed with the following sixteen personnel as part of the Eden Alternative pilot at Crestwood.

Management staff: Chief Executive Officer, GM Operations, GM Marketing, Learning and Development Manager, Change/Project Lead, Village Manager, HR Manager, and Operations Manager

Professional Staff: Clinical Nursing Director, Nurse Manager, Registered Nurse, Enrolled Nurse, Homecare Coordinator,

Support Services Staff: Sales Executive, Kitchen Manager, and Head Gardener.

The interview schedule was developed jointly with Massey University and the interviews completed and recorded by Metlifecare staff between 31 March and 25 May 2016.

Leadership Questionnaire

Three clusters of questions were asked regarding the participants’ perceptions and experiences regarding: (1) the importance of resident voice and engagement (2) the importance of empowering and developing team members and maintaining the vision of the Eden Alternative of Eden specific

leadership (3) leadership characteristics and (4) the provision of supervision (both administrative and supportive dimensions) and mentoring.

Following qualitative analysis processes outlined by Babbie (2013)¹ and Pope, Ziebland and Mays (2000)²: responses to the questions were transcribed and collated under the question headings; a thematic index was developed; the index was then applied to the transcripts; charts were developed to mapped the range and nature of the data; and associations between themes were identified

3.0 Findings

Findings are presented relating to (1) resident voice and engagement (2) empowerment and development of team members, and maintaining the Eden vision, (3) leadership characteristics, and (4) supervision and mentoring.

(1) Resident voice and engagement

Participants were asked:

- How have residents been able to express their views and be engaged in decision making regarding their care?
- What has facilitated this?
- What else could be done to foster this?

Management staff placed emphasis upon the importance and success of learning circles and resident interviews in engaging residents and giving them voice. Reference was made to residents expressing their views around personal care and appearing more comfortable regarding expressing problems. Feedback had been received from residents that they ‘feel that they are being listened to’. This improved engagement was thought to stem from the Eden training and the increased emphasis placed upon more open communication with residents. It was considered important to continually reinforce the Eden principles with staff.

Professional staff emphasised a change in the ‘mind-set’ of staff – who now seek to clarify resident expectations; the mechanism of the learning circles was considered instrumental. The offsite Eden training was thought to be valuable, in particular it afforded staff with dedicated time to reflect and consider options for implementation; staff were described as being empowered to come up with solutions. The importance of senior leadership commitment was noted. Ongoing communication between residents and staff was thought to be essential to the success of the Eden pilot.

The *support staff* noted the success of the learning circles and observed that residents were now being consulted more on their preferences. It was considered important that residents were acknowledged as individuals. Staff awareness of the Eden philosophy and principles was considered an essential foundation to the implementation of the Eden pilot.

¹ Babbie, E. (2013). *The Practice of Social Research*. (13th Ed.). Wadsworth: Cengage Learning.

² Pope, C., Ziebland, S. & Mays, N. (2000) Analysing Qualitative Data, *British Medical Journal*, 320: 114-124

(2) Empowerment and development of team members - maintaining the Eden vision

Participants were asked:

- What actions have been taken to empower and develop team members?
- Do you consider these to have been successful?
- What else could be done to support staff?
- What actions have been taken to maintain the vision of the Eden Alternative?
- Do you consider these to have been successful?
- What else could be done to support staff?

Management staff placed emphasis upon the investment into training and using Eden Alternative trainers from Australia. Monthly training sessions were identified as a forum where ‘We are trying to create a culture where team members can be listened to and fostered through their ideas’. The appointment of the Change/Project Lead was seen to be significant and key to helping staff to maintain the Eden vision. Of particular note were observations regarding the emotional nature of the care industry and the need for staff to be supported. It was acknowledged that staff could be resistant to the Eden pilot when they were feeling time pressured with other tasks; having adequate budget provide staff cover when required was identified as important to maintaining the Eden vision. Further, it was acknowledged that staff will embrace change differently and that this should be taken into account, with additional support to be available as required.

The *professional staff* emphasised the importance of training, regular communication, and the provision of feedback to team members. One participant expressed the view that ‘Any staff member could talk about Eden and feel ownership’. Mention was made of videos as a successful device that ‘capture important moments that show why we are trying to make a change’. Feedback from the senior leadership team was thought to be important in supporting staff maintain commitment. An increase in wages for care staff was given as an example of recognising and valuing care staff. The stress module completed as part of the leadership training was thought to be relevant, and this could also be completed by other staff.

The *support staff* noted meetings and training sessions as being important in developing team members’ empowerment and development. For one participant a consequence of the training was feeling more assertive about leading within their own team, noting the importance of following up with staff. It was thought that the Eden vision was clear amongst staff and the importance of learning circles was mentioned. Further, the involvement of others in leadership roles was identified as important to maintaining staff commitment.

(3) Leadership characteristics

The need for leaders to (a) maintain self-confidence, (b) manage staff performance, (c) manage time effectively and (d) to manage stress

For each of the above elements participants were asked:

- What challenges have you experienced?
- What steps have you taken to address these challenges?
- What else could be done to support you?

Management staff identified a range of factors that influenced their leadership behaviour. Buy-in from the executive and enthusiasm from the leadership group was thought to influence others. The emotional impact of the project was noted as was the importance of relationship behaviours with staff. Leadership workshops had covered leadership tools, self-awareness, and managing stress. Eden Alternative registration requirements were identified as adding to workloads. The absence of the Village Manager for an extended period, and the impending departure of the CEO were also thought to have created a level of uncertainty that affected others.

For the *professional staff* leadership was facilitated by the level of commitment to care demonstrated by other staff. Part of the success of the Eden pilot was attributed to the fact that they had undergone the Eden journey as a group, and had had the opportunity to ‘sit and think and share, and brainstorm’. The challenge of incorporating the Eden model while maintaining business as usual requirements (for example, certification and legal standards, and audit requirements) was thought to be demanding. Finally, the need for resourcing and support was identified.

The *support staff* identified time-management as a significant issue that can generate stress. The stress training received at the leadership training was regarded as beneficial. It was commented that some staff work extended (unpaid) hours in order to meet performance requirements. For one participant greater role clarity was suggested as something that would assist in resolving role tension that sometimes occurs. There was a general tenor of satisfaction with the level of support received.

(4) Supervision and mentoring.

Participants were asked:

- What supervision and mentoring has been available to you?
- How has this supported you in your leadership role?
- What else could be done to support you?

Management staff made varying comments regarding supervision and mentoring that ranged from high to lower levels of satisfaction. It was observed that a higher level of Board support would be appreciated. For one participant the value of having an Eden trainer as a mentor was regarded as beneficial. All participants (who had attended) valued the formal training regarding the Eden project. Suggestions for additional support included being able to network with other organisations that are also implementing the Eden model, and further change management training.

The *professional staff* were positive regarding the supervision and mentoring received. This was expressed by one participant as follows: ‘As leaders on the Eden journey, we’ve been supporting each other along the way’.

Other factors noted were: encouragement from the CEO and senior managers, having an Eden project leader in place, and the quality of the Eden training. One comment exemplifies the professional staff perspective:

‘It comes down to maintaining organizational commitment at every level to resident directed care.’

For the *support staff* being part of the Eden leadership group was important. Mention was made of supporting each other to remain motivated and focused upon the implementation of the Eden model. A theme of responsibility emerged, of giving responsibility to others, and of helping each other and other teams – as one participant put it: ‘We don’t have to ask anymore’.

Conclusion

Following the first round of leader interviews observations were made regarding the participants’ construction of leadership:

The participants’ responses evidence awareness of *transformational leadership*³ (providing vision and direction regarding the implementation of the Eden alternative) and *transactional leadership*⁴ (implementing organisational objectives and balancing change with the requirements of BAU). Key *characteristics* of leadership were identified (enthusiasm, motivation, respect, listening skills, resilience, honesty, and integrity) and the following *behaviours* of leaders were noted (role modelling; leading by example; provision of support and feedback; acting decisively; and mentoring). The nature of *the leader/follower relationship* was identified as being based upon the recognition and empowerment of staff, the leader’s ability to influence followers, and effective delegation.

These hold true on the basis of the second round of interviews.

Summary observations are provided regarding (1) the issues and challenges associated with embedding the Eden Alternative, in particular how residents have been engaged, and (2) how the leaders have been able to address identified challenges and develop their leadership skills.

Embedding the Eden Alternative

The following points emerged as central to the successful implementation and embedding of the Eden alternative:

- (1) The commitment of senior leaders whose actions are seen to influence other staff. Also, having an Eden project leader in place

³ Transformational leadership is a process involving the mutual engagement of both leader and follower in a way which raises the motivation of both to pursue collective goals.

- (2) The increased emphasis upon direct engagement and open communication with residents, most importantly including clarifying resident expectations
- (3) The mechanism of learning circles has been instrumental allowing dialogue to occur both between staff, and staff and residents. Time has been made available via the learning circles for participants to reflect and consider options regarding how to address issues.
- (4) The leaders held that there was awareness of the Eden philosophy and principles amongst other staff.

Development of Leadership

Building upon the participants' earlier construction of leadership noted above the following points emerged from the interviews:

- (1) Role clarity is associated with increasing confidence in the leadership role. Being part of the broader Eden leadership group was reinforcing.
- (2) The importance of relational behaviours between leaders and staff. In particular, in light of the emotional impact of the project.
- (3) The emergence of more diffused leadership was evident in the sharing of responsibility amongst teams and team members; also in the level of commitment to care that was demonstrated by staff.
- (4) The importance of training and ongoing support is important for the continuing development of leadership knowledge and skills. The stress training received at the leadership training was regarded positively and further change management training was requested.

A clear recognition of the importance of resident voice and engagement and congruence between the Eden Alternative and resident-directed care emerged from the participants' responses. The participants continue to demonstrate confidence in their ability to empower and develop team members, and to maintain the vision of the Eden Alternative. These skills reflect positively on the participants' ability to continue to provide effective leadership. The leadership group should focus upon the issues and challenges associated with embedding the Eden Alternative, and how the leaders can continue to address identified challenges and develop their leadership skills

⁴ Transactional leadership is based upon exchange basis - followers receive rewards in return for compliance with organisational requirements.

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Appendices

Table 1. Overview of Aggregated Socio-Demographic on Crestwood (N=35) and Pakuranga (N=39) Care Home Residents

Socio-demographic Variables	Crestwood Care Home (N)	Pakuranga Care Home (N)
Residents (May 2015 to April 2016)	35	39
Gender		
Male	28	27
Female	7	12
Age (mean)	88	85
Length of stays (days)	728.3	1026.83
Ethnicity		
NZ European	22	32
Other European	10	0
NZ Maori	2	3
Pacific Island	1	0
Asian	0	1
Other	0	3
Relationship status		
Widowed	27	27
Single	3	3
Married	3	3
Divorced	1	8
Discharged reasons		
Death	2	0
Moved to hospital	5	0
Moved to care elsewhere	2	4

Table 1a. Overview of Aggregated Clinical Data on Crestwood (N = 35) and Pakuranga (N = 39) Care Home Residents

Clinical Data	Crestwood Care Home N (%)	Pakuranga Care Home N (%)
Barthel Index (0-20)	Mean = 15.4	Mean = 14.8
0-13	10 (29)	11 (28)
14-20	25 (71)	28 (72)
Total number of falls		
July 2015	20	55
Oct 2015	22	66
Jan 2016	18	39
Apr 2016	29	24
Resident complaints		
July 2015	2	1
Oct 2015	0	0
Jan 2016	0	0
Apr 2016	0	1
Body weight down by 10%		
July 2015	0	0
Oct 2015	0	0
Jan 2016	0	0
Apr 2016	0	0
Antipsychotic use		
July 2015	2	3
Oct 2015	1	4
Jan 2016	2	5
Apr 2016	2	4
Antidepressant use		
July 2015	4	10
Oct 2015	4	10
Jan 2016	5	5
Apr 2016	4	3
Hypnotic/Sedative use		
July 2015	6	10
Oct 2015	6	4
Jan 2016	5	11
Apr 2016	4	9

Table 2. Comparison of Quality of Life Survey (Flourishing, Depression and Loneliness)– Care Home Residents for CWD (N = 26) and PAK (N = 28) – Jan 2016

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
Flourishing Scale		
I am competent and capable in the activities that are important to me	21 (81)	22 (77)
My social relationships are supportive and rewarding	20 (77)	21 (75)
I am a good person and live a good life	20 (77)	26 (93)
I lead a purposeful and meaningful life	18 (69)	17 (61)
People respect me	18 (69)	24 (86)
I am engaged and interested in my daily activities	16 (62)	23 (82)
I am optimistic about my future	16 (62)	17 (61)
I actively contribute to the happiness and wellbeing of others	15 (58)	23 (82)
Geriatric Depression Scale		
I am in good spirits most of the time	24 (92)	22 (77)
I feel happy most of the time	23 (89)	21 (75)
I think it is wonderful to be alive now	20 (77)	19 (68)
I feel full of energy	10 (39)	7 (25)
I often feel bored	9 (35)	7 (25)
I often feel helpless	8 (31)	13 (46)
I feel I have more problems with memory than most	6 (23)	8 (29)
I feel lonely	5 (19)	12 (43)
Loneliness Scale		
I lack companionship	7 (27)	7 (25)
I feel isolated from others	7 (27)	6 (21)
I feel left out	6 (23)	4 (14)

Table 2a. Comparison of Quality of Life Survey (Comfort, Functional, Privacy, Dignity, Activities & Relationship) – Care Home Residents for CWD (N =26) and PAK (N = 28) – Jan 2016 [cont.]

	CWD Often + Always N (%)	PAK Often + Always N (%)
QOL - Comfort		
Do you get a good night's sleep here?	19 (73)	21 (75)
How often are you bothered by noise when you are in your room?	8 (31)	4 (14)
How often are you in physical pain?	5 (42)	6 (21)
How often are you bothered by noise in other parts of the care facility, for example, in the dining room?	3 (12)	6 (21)
How often are you too cold in the care facility?	2 (8)	1 (4)
How often are you in the same position so long that it hurts?	2 (8)	3 (11)
QOL – Functional Component		
Can you easily reach the things that you need?	22 (75)	22 (79)
Can you easily reach your toiletries and things that you want to use in your bathroom?	21 (81)	23 (82)
If you are anywhere in the care facility and need a bathroom, can you get to one quickly?	21 (81)	21 (75)
Do you do as much to take care of your own things and your room as you can and want?	19 (73)	23 (82)
Is it easy for you to get around in your room by yourself?	13 (89)	24 (86)
QOL - Privacy		
When you have a visitor, can you find a place to visit in private?	22 (85)	19 (68)
Can you have the privacy to make a private phone call?	21 (81)	17 (61)
Can you be together in private with another resident?	21 (81)	18 (64)
Can you find a place to be alone if you wish?	19 (73)	22 (79)
Do the people who work here knock and wait for a reply before entering your room?	19 (73)	21 (75)
QOL - Dignity		
Do you feel that you are treated with respect here?	23 (88)	23 (82)
Do staff here treat you politely?	23 (88)	25 (89)
Do staff take time to listen to you when have something to say?	22 (85)	22 (79)
Do staff here handle you gently while giving you care?	21 (81)	22 (79)
Do staff here respect your modesty?	21 (81)	23 (82)
QOL – Meaningful Activities		
Do you get a chance to go outdoors?	20 (77)	20 (72)
Do you enjoy the organised activities here at the care facility?	19 (73)	17 (61)
Despite your health condition, do you give help to others?	16 (62)	9 (32)
Outside of religious activities, do you have enjoyable things to do at the care facility during the weekend?	12 (46)	10 (36)
Do the days here seem too long to you?	4 (15)	5 (18)
QOL – Relationship		
Do you think that this facility tries to make this an easy and pleasant place for families and friends of residents to visit?	21 (81)	23 (82)
Do you consider your staff member to be your friend?	21 (81)	10 (36)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	19 (73)	16 (57)
Is it easy to make friends at this care facility?	17 (65)	12 (43)
Do you consider any of the residents here as your close friend?	12 (46)	12 (43)

Table 2c. Comparison of Quality of Life Survey (Overall Satisfaction) – Care Home Residents for CWD (N =26) and PAK (N = 28) – Jan 2016 [cont.]

	CWD	PAK
Overall Satisfaction	Very Satisfied + Satisfied	Very Satisfied + Satisfied
How satisfied are you with the conditions of your current living place?	23 (88)	21 (75)
All things considered, how satisfied are you with your life as a whole these days?	23 (88)	24 (86)
How would you rate your quality of life?	21 (81)	23 (82)
Overall Recommendation	Mostly Yes	Mostly Yes
Would you recommend this care facility to others?	24 (92)	24 (86)

Table 3. Resident Satisfaction: Warmth Survey – Care Home Residents for CWD (N = 23) and PAK (N = 12) (collected in April 2016)

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
I feel safe	23 (100)	9 (75)
The staff care about me	23 (100)	10 (83)
Staff members are respectful of me	22 (96)	9 (75)
I am given privacy	22 (96)	10 (83)
Staff members take time to talk and listen to me	22 (96)	8 (67)
I can get up and go the bed when I choose	21 (91)	8 (67)
I can choose what I want to eat	21 (91)	8 (67)
The administration staff know my name	21 (91)	11 (92)
My room looks much like a room in someone’s home	21 (91)	7 (58)
I trust my doctor	20 (87)	7 (58)
The staff are well-trained and know what they are doing	20 (87)	9 (75)
I am content here	20 (87)	8 (67)
I enjoy my bathing time	20 (87)	9 (75)
I trust staff to advocate on my behalf	19 (83)	10 (83)
I am comfortable bringing my concerns to a staff member	19 (83)	10 (83)
I am allowed to participate in decision-making about my care and resident related activities within the home	16 (70)	8 (67)
I am bored	1 (4)	4 (33)
I rarely see my manager	0 (0)	3 (25)
I am lonely	0 (0)	4 (33)
I feel helpless	0 (0)	2 (17)

Table 3a. Resident Overall Satisfaction – Care Home Residents for CWD (N = 23) and PAK (N = 12) (collected in April 2016) [cont.]

	CWD Strongly Satisfied + Satisfied N (%)	PAK Strongly Satisfied + Satisfied N (%)
Your overall impression of the nursing care you receive	23 (100)	11 (92)
Your overall impression of the care facility or rest home/hospital and its services	23 (100)	8 (67)
The overall cleanliness of the nursing home/hospital	23 (100)	9 (75)
Your impression of the general quality of the meals provided	23 (100)	8 (67)
Your overall impression of the medical care you receive	20 (87)	9 (75)
The manner in which your rights are met and respected overall	18 (78)	11 (92)
Metlifecare’s understanding of the needs of older people	16 (70)	9 (75)

Table 4. Family Satisfaction: Warmth Survey – Family of Care Home Residents for CWD (N = 12) and PAK (N = 4) (collected in April 2016)

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
The residents and families are able to participate in decision-making about care and activities of daily living	12 (100)	3 (75)
The staff are well trained and know what they are doing	12 (100)	3 (75)
The manager/staff know my name	12 (100)	2 (50)
Staff members take time to talk and listen to the residents	12 (100)	3 (75)
The residents who live here are safe in the environment	11 (92)	4 (100)
The staff care about residents	11 (92)	4 (100)
Staff members are friendly	11 (92)	4 (100)
I believe this is an abuse-free environment	11 (92)	4 (100)
I am comfortable bringing my concerns to a staff member	10 (83)	4 (100)
Residents' room look much like a room in someone's home	9 (75)	3 (75)
People work here because they enjoy working with the elderly	9 (75)	3 (75)
Staff members are respectful of the residents	9 (75)	4 (100)
I trust the medical doctor and their interventions who attends to my family member	7 (58)	2 (50)
I often see children in the facility	6 (50)	0 (0)
People from the community are involved in the home	5 (42)	1 (25)
The residents appear lonely	4 (33)	1 (25)
The residents appear helpless	2 (17)	0 (0)
The residents appear bored	2 (17)	2 (50)
I rarely see the manager	1 (8)	3 (75)
Overall Satisfaction		
In general, I am satisfied with the home	12 (100)	4 (100)

Table 5. Staff Satisfaction: Warmth Survey – Employees for CWD (N = 37) and PAK (N = 9): Positive Aspects and Growth Potential (collected in April 2016)

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
My work has meaning and purpose	35 (95)	9 (100)
I have a clear understanding of what is expected of me	35 (95)	7 (78)
At the end of a typical day, I feel I have contributed to the quality of life of the residents I serve	34 (92)	9 (100)
The manager knows my name	33 (89)	9 (100)
I enjoy helping my team members	33 (89)	8 (89)
I know and understand the mission of this organisation/home	33 (89)	8 (89)
My working condition are safe	33 (89)	6 (67)
Management is leading us in the right direction	33 (89)	6 (67)
My work contributes to the overall philosophy and goals of the home	33 (89)	7 (78)
I can be creative in completing my tasks and working in my team	32 (86)	8 (89)
Management actively encourages cooperation and teamwork	30 (86)	7 (78)
I am free to ask questions	32 (86)	7 (78)
My work is recognised by my team members as worthwhile	29 (78)	6 (67)
There is good in everybody	29 (78)	7 (78)
I can trust the people I work with to lend me a hand if I need it	29 (78)	2 (22)
I am an important part of the care team	28 (76)	6 (67)
There is a happy atmosphere in the place I work	27 (73)	3 (33)
I can voice my concerns without risking my job	27 (73)	5 (56)
I am given opportunities to use my talents for the home's benefit	25 (68)	4 (44)
Management listens to me and takes my opinions seriously	25 (68)	7 (78)
I have an opportunity to grow in my workplace	25 (68)	7 (78)
The manager is fair to everyone	25 (68)	6 (67)
I would recommend a close friend to join our staff	25 (68)	4 (44)
Management is interested in me and in my development as a person	25 (68)	6 (67)
I am kept up-to-date on changes occurring that affect my job	24 (65)	7 (78)
People usually tell the truth	23 (62)	2 (22)
I have the resources I need to be effective in my job	22 (59)	7 (78)
There is opportunity to advance here	19 (51)	4 (44)
My work provides me with adequate pay and benefits	13 (35)	1 (11)
Length of time working in this facility	CWD N (%)	PAK N (%)
Less than 6 months	2 (5)	0 (0)
6 months to less than 1 year	2 (5)	1 (11)
1 year to less than 2 years	3 (8)	0 (0)
2 years to less than 3 years	3 (8)	0 (0)
3 years to less than 5 years	7 (19)	1 (11)
More than 5 years	20 (54)	7 (78)

Table 5a. Staff Satisfaction: Warmth Survey – Employees for CWD (N = 37) and PAK (N = 9): Concerns, Constraints and Negative Perceptions (collected in May 2015) [cont.]

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
I regularly hear co-worker making negative remarks about their employees	22 (59)	4 (44)
People pretend to care more about one another than they really do	15 (41)	5 (56)
I have to follow procedures that prevent me from doing my job well	13 (35)	3 (33)
I work under a great deal with tension	13 (35)	3 (33)
I don't blame anyone for trying to grab all he/she can get in this world	13 (35)	5 (56)
If you start doing favours for people, they will just walk all over you	13 (35)	5 (56)
Management values money more than people	9 (24)	5 (56)
I would leave this home if offered the same job with another home	9 (24)	3 (33)
I rarely see the manager	8 (22)	2 (22)
When I do my work, I run into obstacles that make it difficult to do my job	7 (19)	3 (33)
I spent too much time in unnecessary activities	6 (16)	2 (22)
I only do my job because I need the money	5 (14)	4 (44)
I feel like a number, nobody here really cares about me	3 (8)	2 (22)
My work is boring	2 (5)	1 (11)

Table 6. Quality of Life Survey (Flourishing, Depression & Loneliness) – Care Home Residents for CWD (N = 14) and PAK (N = 10) (collected in April 2016)

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
Flourishing Scale		
People respect me	13 (93)	9 (90)
I am a good person and live a good life	10 (71)	9 (90)
My social relationships are supportive and rewarding	10 (71)	7 (70)
I actively contribute to the happiness and wellbeing of others	10 (71)	8 (80)
I am engaged and interested in my daily activities	10 (71)	7 (70)
I am competent and capable in the activities that are important to me	9 (64)	7 (70)
I lead a purposeful and meaningful life	8 (57)	7 (70)
I am optimistic about my future	8 (57)	6 (60)
Geriatric Depression Scale		
I feel happy most of the time	13 (93)	6 (60)
I am in good spirits most of the time	12 (86)	8 (80)
I think it is wonderful to be alive now	11 (79)	4 (40)
I feel lonely	6 (43)	3 (30)
I often feel bored	5 (36)	3 (30)
I feel full of energy	4 (29)	2 (20)
I feel I have more problems with memory than most	4 (29)	4 (40)
I often feel helpless	3 (21)	3 (30)
Loneliness Scale		
I feel isolated from others	2 (14)	5 (50)
I lack companionship	6 (43)	4 (40)
I feel left out	3 (21)	1 (10)

Table 6a. Quality of Life Survey (Comfort, Functional, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Care Home Residents for CWD (N = 14) and PAK (N = 10) (collected in April 2016) [cont.]

	CWD Often + Always N (%)	PAK Often + Always N (%)
QOL – Comfort		
Do you get a good night's sleep here?	11 (79)	5 (50)
How often are you in the same position so long that it hurts?	3 (21)	0 (0)
How often are you in physical pain?	2 (14)	5 (50)
How often are you too cold in the care facility?	2 (14)	0 (0)
How often are you bothered by noise in other parts of the care facility, for example, in the dining room?	2 (14)	2 (20)
How often are you bothered by noise when you are in your room?	1 (7)	1 (10)
QOL – Functional Component		
If you are anywhere in the care facility and need a bathroom, can you get to one quickly?	12 (86)	9 (90)
Can you easily reach your toiletries and things that you want to use in your bathroom?	12 (86)	8 (80)
Do you do as much to take care of your own things and your room as you can and want?	12 (86)	8 (80)
Is it easy for you to get around in your room by yourself?	11 (79)	9 (90)
Can you easily reach the things that you need?	11 (79)	9 (90)
QOL – Privacy		
Can you find a place to be alone if you wish?	12 (86)	8 (80)
Can you have the privacy to make a private phone call?	11 (79)	7 (70)
Do the people who work here knock and wait for a reply before entering your room?	11 (79)	7 (70)
Can you be together in private with another resident?	11 (79)	8 (80)
When you have a visitor, can you find a place to visit in private?	10 (71)	8 (80)
QOL – Dignity		
Do you feel that you are treated with respect here?	14 (100)	7 (70)
Do staff here treat you politely?	13 (93)	7 (70)
Do staff here handle you gently while giving you care?	12 (86)	8 (80)
Do staff here respect your modesty?	12 (86)	8 (80)
Do staff take time to listen to you when have something to say?	11 (79)	7 (70)
QOL – Meaningful Activities		
Despite your health condition, do you give help to others?	9 (64)	5 (50)
Do you get a chance to go outdoors?	8 (57)	9 (90)
Outside of religious activities, do you have enjoyable things to do at the care facility during the weekend?	7 (50)	4 (40)
Do you enjoy the organised activities here at the care facility?	6 (43)	4 (40)
Do the days here seem too long to you?	4 (29)	6 (60)
QOL – Relationship		
Do you think that this facility tries to make this an easy and pleasant place for families and friends of residents to visit?	11 (79)	5 (50)
Do you consider your staff member to be your friend?	11 (79)	2 (20)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	10 (71)	5 (50)
Is it easy to make friends at this care facility?	8 (57)	5 (50)
Do you consider any of the residents here as your close friend?	8 (57)	6 (60)
Overall Satisfaction		
How satisfied are you with the conditions of your current living place?	Very Satisfied + Satisfied 14 (100)	Very Satisfied + Satisfied 9 (90)
All things considered, how satisfied are you with your life as a whole these days?	14 (100)	7 (70)
How would you rate your quality of life?	13 (93)	6 (60)
Overall Recommendation		
Would you recommend this care facility to others?	Mostly Yes 13 (93)	Mostly No 6 (60)

Table 7. Quality of Life Survey (Flourishing, Depression & Loneliness) – Village Residents for CWD (N = 104) and PAK (N = 56) (collected in April 2016).

	CWD Strongly Agree + Agree N (%)	PAK Strongly Agree + Agree N (%)
Flourishing Scale		
I am engaged and interested in my daily activities	80 (77)	40 (71)
I am a good person and live a good life	79 (76)	45 (80)
I am competent and capable in the activities that are important to me	73 (70)	47 (84)
My social relationships are supportive and rewarding	74 (71)	39 (70)
I lead a purposeful and meaningful life	71 (68)	37 (66)
People respect me	58 (56)	40 (71)
I am optimistic about my future	58 (56)	34 (61)
I actively contribute to the happiness and wellbeing of others	54 (52)	33 (59)
Geriatric Depression Scale		
I am in good spirits most of the time	82 (79)	45 (80)
I feel happy most of the time	80 (77)	46 (82)
I think it is wonderful to be alive now	69 (66)	42 (75)
I feel full of energy	38 (37)	20 (36)
I often feel helpless	12 (12)	5 (9)
I feel I have more problems with memory than most	11 (11)	6 (11)
I often feel bored	10 (10)	8 (14)
I feel lonely	8 (8)	6 (11)
Loneliness Scale		
I feel isolated from others	7 (7)	2 (4)
I lack companionship	6 (6)	7 (13)
I feel left out	4 (4)	0 (0)

Table 7a. Quality of Life Survey (Comfort, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Village Residents for CWD (N = 104) and PAK (N = 56) cont. (collected in April) (cont.)

	CWD Often + Always N (%)	PAK Often + Always N (%)
QOL - Comfort		
Do you get a good night's sleep here?	83 (80)	44 (79)
How often are you bothered by noise when you are in your living space?	10 (10)	7 (13)
How often are you bothered by noise in other parts of the village?	4 (4)	1 (2)
QOL - Privacy		
Do the people who work here knock and wait for a reply before entering your living space?	99 (95)	51 (91)
QOL - Dignity		
Do staff here treat you politely?	97 (93)	56 (100)
Do you feel that you are treated with respect here?	95 (91)	56 (100)
Do staff take time to listen to you when have something to say?	91 (88)	54 (96)
QOL – Meaningful Activities		
Do you give help to others?	59 (57)	30 (54)
Do you enjoy the organised activities here at the village?	39 (38)	28 (50)
Do the days here seem too long to you?	10 (10)	8 (14)
QOL - Relationship		
Do you think that this Village tries to make this an easy and pleasant place for families and friends of residents to visit?	77 (74)	45 (80)
Is it easy to make friends at this village?	51 (49)	44 (79)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	45 (43)	19 (34)
Do you consider any of the residents here as your close friend?	37 (36)	29 (52)
Do you consider your staff member to be your friend?	28 (27)	16 (29)
Overall Satisfaction		
How satisfied are you with the conditions of your current living place?	Very Satisfied + Satisfied 86 (83)	Very Satisfied + Satisfied 48 (86)
All things considered, how satisfied are you with your life as a whole these days?	80 (77)	42 (75)
How would you rate your quality of life?	82 (79)	47 (84)
Overall Recommendation		
Would you recommend this care facility to others?	Mostly Yes 71 (68)	Mostly Yes 43 (77)

Table 8. Comparison of Resident Satisfaction: Warmth Survey – Care Home Residents for CWD (N = 20) (collected in May 2015) and CWD (N = 23) (collected in April 2016)

	CWD (2015) Strongly Agree + Agree N (%)	CWD (2016) Strongly Agree + Agree N (%)
The administration staff know my name	19 (95)	21 (91)
Staff members are respectful of me	19 (95)	22 (96)
I feel safe	18 (90)	23 (100)
I am given privacy	18 (90)	22 (96)
The staff care about me	17 (85)	23 (100)
I trust staff to advocate on my behalf	17 (85)	19 (83)
My room looks much like a room in someone's home	17 (85)	21 (91)
I trust my doctor	16 (80)	20 (87)
I am comfortable bringing my concerns to a staff member	16 (80)	19 (83)
The staff are well-trained and know what they are doing	16 (80)	20 (87)
I enjoy my bathing time	16 (80)	20 (97)
I am allowed to participate in decision-making about my care and resident	15 (75)	16 (70)
I am content here	15 (75)	20 (87)
I can get up and go the bed when I choose	14 (70)	21 (91)
I can choose what I want to eat	13 (65)	21 (91)
Staff members take time to talk and listen to me	13 (65)	22 (96)
I rarely see my manager	4 (20)	0 (0)
I am bored	3 (15)	1 (4)
I am lonely	2 (10)	0 (0)
I feel helpless	2 (10)	0 (0)

Table 8a. Comparison of Resident Overall Satisfaction – Care Home Residents for CWD (N = 20) (collected in May 2015) and CWD (N = 23) (collected in April 2016) [cont.]

	CWD (2015) Strongly Satisfied + Satisfied N (%)	CWD (2016) Strongly Satisfied + Satisfied N (%)
Metlifecare's understanding of the needs of older people	19 (95)	16 (70)
Your overall impression of the nursing care you receive	19 (95)	23 (100)
Your overall impression of the care facility or rest home/hospital and its services	18 (90)	23 (100)
Your overall impression of the medical care you receive	18 (90)	20 (87)
The manner in which your rights are met and respected overall	18 (90)	18 (78)
The overall cleanliness of the nursing home/hospital	18 (90)	23 (100)
Your impression of the general quality of the meals provided	18 (90)	23 (100)

Table 9. Comparison of Family Satisfaction: Warmth Survey – Family of Care Home Residents for CWD (N = 16) (Collected in May 2015) and CWD (N = 12) (collected in April 2016)

	CWD (2015)	CWD (2016)
	Strongly Agree + Agree N (%)	Strongly Agree + Agree N (%)
The residents who live here are safe in the environment	16 (100)	11 (92)
I am comfortable bringing my concerns to a staff member	16 (100)	10 (83)
The residents and families are able to participate in decision-making about care and activities of daily living	16 (100)	12 (100)
The staff care about residents	16 (100)	11 (92)
Staff members are friendly	16 (100)	11 (92)
I believe this is an abuse-free environment	16 (100)	11 (92)
Staff members are respectful of the residents	16 (100)	9 (75)
The staff are well trained and know what they are doing	16 (100)	12 (100)
The manager/staff know my name	14 (88)	12 (100)
Staff members take time to talk and listen to the residents	14 (88)	12 (100)
I trust the medical doctor and their interventions who attends to my family member	14 (88)	7 (58)
People work here because they enjoy working with the elderly	14 (88)	9 (75)
People from the community are involved in the home	8 (63)	5 (42)
Residents' room look much like a room in someone's home	4 (25)	9 (75)
I rarely see the manager	4 (25)	1 (8)
The residents appear lonely	3 (19)	4 (33)
The residents appear helpless	3 (18.8)	2 (17)
I often see children in the facility	2 (13)	6 (50)
The residents appear bored	2 (13)	2 (17)
Overall Satisfaction		
In general, I am satisfied with the home	16 (100)	12 (100)

Table 10. Comparison of Staff Satisfaction: Warmth Survey – Employees for CWD (N = 17) (collected in May 2015) and CWD (N = 37) (collected in April 2016): Positive Aspects and Growth Potential

	CWD (2015) Strongly Agree + Agree N (%)	CWD (2016) Strongly Agree + Agree N (%)
My work has meaning and purpose	17 (100)	35 (95)
The manager knows my name	17 (100)	33 (89)
I am an important part of the care team	16 (94)	28 (76)
I enjoy helping my team members	16 (94)	33 (89)
I know and understand the mission of this organisation/home	15 (88)	33 (89)
My work contributes to the overall philosophy and goals of the home	15 (88)	33 (89)
I have a clear understanding of what is expected of me	15 (88)	35 (95)
I can be creative in completing my tasks and working in my team	15 (88)	32 (86)
I am free to ask questions	15 (88)	32 (86)
I have an opportunity to grow in my workplace	15 (88)	25 (68)
My working condition are safe	14 (82)	33 (89)
Management is leading us in the right direction	14 (82)	33 (89)
I have the resources I need to be effective in my job	14 (82)	22 (59)
I can trust the people I work with to lend me a hand if I need it	14 (82)	29 (78)
My work is recognised by my team members as worthwhile	13 (76)	29 (78)
Management actively encourages cooperation and teamwork	13 (76)	30 (86)
I am given opportunities to use my talents for the home's benefit	13 (76)	25 (68)
There is good in everybody	13 (76)	29 (78)
I am kept up-to-date on changes occurring that affect my job	12 (71)	24 (65)
Management listens to me and takes my opinions seriously	12 (71)	25 (68)
At the end of a typical day, I feel I have contributed to the quality of life of the residents I serve	12 (71)	34 (92)
The manager is fair to everyone	12 (71)	25 (68)
Management is interested in me and in my development as a person	11 (65)	25 (68)
I can voice my concerns without risking my job	11 (65)	27 (73)
There is opportunity to advance here	11 (65)	19 (51)
There is a happy atmosphere in the place I work	10 (59)	27 (73)
My work provides me with adequate pay and benefits	10 (59)	13 (35)
I would recommend a close friend to join our staff	9 (53)	25 (68)
People usually tell the truth	9 (53)	23 (62)
Length of time working in this facility	CWD N (%)	CWD N (%)
Less than 6 months	2 (12)	2 (5)
6 months to less than 1 year	0 (0)	2 (5)
1 year to less than 2 years	2 (12)	3 (8)
2 years to less than 3 years	2 (12)	3 (8)
3 years to less than 5 years	2 (12)	7 (19)
More than 5 years	8 (47)	20 (54)

Table 10a. Comparison of Staff Satisfaction: Warmth Survey – Employees for CWD (N = 17) (collected in May 2015) and CWD (N = 37) (collected in April 2016): Concerns, Constraints and Negative Perceptions [cont.]

	CWD (2015) Strongly Agree + Agree N (%)	CWD (2016) Strongly Agree + Agree N (%)
I have to follow procedures that prevent me from doing my job well	12 (71)	13 (35)
If you start doing favours for people, they will just walk all over you	10 (59)	13 (35)
I regularly hear co-worker making negative remarks about their employees	9 (53)	22 (59)
People pretend to care more about one another than they really do	8 (47)	15 (41)
When I do my work, I run into obstacles that make it difficult to do my job	6 (35)	7 (19)
Management values money more than people	6 (35)	9 (24)
I don't blame anyone for trying to grab all he/she can get in this world	5 (29)	13 (35)
I would leave this home if offered the same job with another home	4 (24)	9 (24)
I feel like a number, nobody here really cares about me	4 (24)	3 (8)
I rarely see the manager	3 (18)	8 (22)
I work under a great deal with tension	3 (18)	13 (35)
My work is boring	2 (12)	2 (5)
I spent too much time in unnecessary activities	2 (12)	6 (16)
I only do my job because I need the money	1 (6)	5 (14)

Table 11. Comparison of Resident Satisfaction: Warmth Survey – Care Home Residents for PAK (N = 15) (collected in May 2015) and PAK (N = 12) (collected in April 2016)

	PAK (2015) Strongly Agree + Agree N (%)	PAK (2016) Strongly Agree + Agree N (%)
The administration staff know my name	11 (73)	11 (92)
The staff care about me	10 (67)	10 (83)
I trust my doctor	9 (60)	7 (58)
I enjoy my bathing time	9 (60)	9 (75)
I am allowed to participate in decision-making about my care and resident related activities within the home	9 (60)	8 (67)
I can get up and go the bed when I choose	9 (60)	8 (67)
I am comfortable bringing my concerns to a staff member	9 (60)	10 (83)
I am given privacy	9 (60)	10 (83)
Staff members are respectful of me	8 (53)	9 (75)
I feel safe	8 (53)	9 (75)
I can choose what I want to eat	8 (53)	8 (67)
I trust staff to advocate on my behalf	8 (53)	10 (83)
The staff are well-trained and know what they are doing	7 (47)	9 (75)
I am content here	7 (47)	8 (67)
Staff members take time to talk and listen to me	7 (47)	8 (67)
I rarely see my manager	6 (40)	3 (25)
My room looks much like a room in someone's home	5 (33)	7 (58)
I am lonely	4 (27)	4 (33)
I am bored	3 (20)	4 (33)
I feel helpless	2 (13)	2 (17)

Table 11a. Comparison of Resident Overall Satisfaction – Care Home Residents for PAK (N = 15) (collected in May 2015) and PAK (N = 12) (collected in April 2016) [cont.]

	PAK (2015) Strongly Satisfied + Satisfied N (%)	PAK (2016) Strongly Satisfied + Satisfied N (%)
The manner in which your rights are met and respected overall	14 (100)	11 (92)
Your overall impression of the nursing care you receive	12 (80)	11 (92)
Your overall impression of the care facility or rest home/hospital and its services	12 (80)	8 (67)
Your overall impression of the medical care you receive	12 (80)	9 (75)
The overall cleanliness of the nursing home/hospital	12 (80)	9 (75)
Your impression of the general quality of the meals provided	9 (60)	8 (67)
Metlifecare's understanding of the needs of older people	6 (40)	9 (75)

Table 12. Comparison of Family Satisfaction: Warmth Survey – Family of Care Home Residents for PAK (N = 15) (collected in May 2015) and PAK (N = 4) (collected in April 2016)

	PAK (2015) Strongly Agree + Agree N (%)	PAK (2016) Strongly Agree + Agree N (%)
The residents who live here are safe in the environment	15 (100)	4 (100)
I am comfortable bringing my concerns to a staff member	15 (100)	4 (100)
The residents and families are able to participate in decision-making about care and activities of daily living	14 (93)	3 (75)
The staff care about residents	14 (93)	4 (100)
Staff members are friendly	14 (93)	4 (100)
I believe this is an abuse-free environment	14 (93)	4 (100)
Staff members are respectful of the residents	13 (87)	4 (100)
The staff are well trained and know what they are doing	13 (87)	3 (75)
The manager/staff know my name	13 (87)	2 (50)
Staff members take time to talk and listen to the residents	12 (80)	3 (75)
I trust the medical doctor and their interventions who attends to my family	12 (80)	2 (50)
Residents' room look much like a room in someone's home	12 (80)	3 (75)
People from the community are involved in the home	10 (67)	1 (25)
People work here because they enjoy working with the elderly	9 (60)	3 (75)
I often see children in the facility	2 (13)	0 (0)
The residents appear bored	2 (13)	2 (50)
I rarely see the manager	2 (13)	3 (75)
The residents appear lonely	1 (7)	1 (25)
The residents appear helpless	0 (0)	0 (0)
Overall Satisfaction		
In general, I am satisfied with the home	14 (93)	4 (100)

Table 13. Comparison of Staff Satisfaction: Warmth Survey – Employees for PAK (N = 17) (collected in May 2015) and PAK (N = 9) (collected in April 2016): Positive Aspects and Growth Potential

	PAK (2015) Strongly Agree + Agree N (%)	PAK (2016) Strongly Agree + Agree N (%)
My work has meaning and purpose	16 (94)	9 (100)
The manager knows my name	15 (88)	9 (100)
I have a clear understanding of what is expected of me	15 (88)	7 (78)
Management actively encourages cooperation and teamwork	14 (82)	7 (78)
My work contributes to the overall philosophy and goals of the home	14 (82)	7 (78)
At the end of a typical day, I feel I have contributed to the quality of life of the residents I serve	14 (82)	9 (100)
I enjoy helping my team members	13 (76)	8 (89)
I know and understand the mission of this organisation/home	13 (76)	8 (89)
I can trust the people I work with to lend me a hand if I need it	13 (76)	2 (22)
I can be creative in completing my tasks and working in my team	13 (76)	8 (89)
I am an important part of the care team	12 (71)	6 (67)
My work is recognised by my team members as worthwhile	12 (71)	6 (67)
There is good in everybody	12 (71)	7 (78)
My working condition are safe	12 (71)	6 (67)
There is opportunity to advance here	12 (71)	4 (44)
I have an opportunity to grow in my workplace	11 (65)	7 (78)
Management is leading us in the right direction	11 (65)	6 (67)
I have the resources I need to be effective in my job	11 (65)	7 (78)
I am given opportunities to use my talents for the home's benefit	11 (65)	4 (44)
I am free to ask questions	10 (59)	7 (78)
The manager is fair to everyone	10 (59)	6 (67)
Management is interested in me and in my development as a person	10 (59)	6 (67)
I can voice my concerns without risking my job	10 (59)	5 (56)
Management listens to me and takes my opinions seriously	9 (53)	7 (78)
I would recommend a close friend to join our staff	8 (47)	4 (44)
There is a happy atmosphere in the place I work	8 (47)	3 (33)
I am kept up-to-date on changes occurring that affect my job	7 (41)	7 (78)
People usually tell the truth	5 (29)	2 (22)
My work provides me with adequate pay and benefits	4 (24)	1 (11)
Length of time working in this facility	PAK N (%)	PAK N (%)
Less than 6 months	2 (12)	0 (0)
6 months to less than 1 year	0 (0)	1 (11)
1 year to less than 2 years	2 (12)	0 (0)
2 years to less than 3 years	2 (12)	0 (0)
3 years to less than 5 years	2 (12)	1 (11)
More than 5 years	8 (47)	7 (78)

Table 13a. Comparison of Staff Satisfaction: Warmth Survey – Employees for PAK (N = 17) (collected in May 2015) and PAK (N = 9) (collected in April 2016): Concerns, Constraints and Negative Perceptions [cont.]

	PAK (2015) Strongly Agree + Agree N (%)	PAK (2016) Strongly Agree + Agree N (%)
I regularly hear co-worker making negative remarks about their employees	11 (65)	4 (44)
I don't blame anyone for trying to grab all he/she can get in this world	11 (65)	5 (56)
I have to follow procedures that prevent me from doing my job well	10 (59)	3 (33)
Management values money more than people	9 (53)	5 (56)
People pretend to care more about one another than they really do	9 (53)	5 (56)
If you start doing favours for people, they will just walk all over you	8 (47)	5 (56)
My work is boring	8 (47)	1 (11)
When I do my work, I run into obstacles that make it difficult to do my job	6 (35)	3 (33)
I would leave this home if offered the same job with another home	4 (24)	3 (33)
I rarely see the manager	4 (24)	2 (22)
I only do my job because I need the money	3 (18)	4 (44)
I work under a great deal with tension	2 (12)	3 (33)
I feel like a number, nobody here really cares about me	0 (0)	2 (22)
I spent too much time in unnecessary activities	0 (0)	2 (22)

Table 14. Comparison of Quality of Life Survey (Flourishing, Depression & Loneliness) – Care Home Residents for CWD (N = 17) (July 2015), CWD (N = 21) (Oct 2015), CWD (N = 26) (Jan 2016) and CWD (N = 14) (April 2016)

	CWD (July 2015) Strongly Agree + Agree N (%)	CWD (Oct 2015) Strongly Agree + Agree N (%)	CWD (Jan 2016) Strongly Agree + Agree N (%)	CWD (April 2016) Strongly Agree + Agree N (%)
Flourishing Scale				
People respect me	14 (82)	21 (100)	18 (69)	13 (93)
I am a good person and live a good life	13 (76)	19 (91)	20 (77)	10 (71)
My social relationships are supportive and rewarding	12 (71)	13 (62)	20 (77)	10 (71)
I am competent and capable in the activities that are	11 (65)	15 (72)	21 (81)	9 (64)
I am engaged and interested in my daily activities	11 (65)	17 (81)	16 (82)	10 (71)
I lead a purposeful and meaningful life	10 (59)	16 (76)	18 (69)	8 (57)
I am optimistic about my future	9 (53)	8 (38)	16 (62)	8 (57)
I actively contribute to the happiness and wellbeing of others	7 (41)	4 (19)	15 (58)	10 (71)
Range of Score	18-35	16-34	15-35	25-33
Summated Mean	27.4	27.2	28.3	28.6
Geriatric Depression Scale				
I feel happy most of the time	12 (71)	20 (95)	23 (89)	13 (93)
I am in good spirits most of the time	12 (71)	19 (91)	24 (92)	12 (86)
I think it is wonderful to be alive now	11 (65)	13 (62)	20 (77)	11 (79)
I feel full of energy	6 (35)	7 (33)	10 (39)	4 (29)
Range of Score (positive statements)	6-20	8-19	3-20	12-17
Summated Mean	14.2	14.8	14.6	14.1
Geriatric Depression Scale (cont.)				
I often feel bored	12 (71)	2 (10)	9 (35)	5 (36)
I often feel helpless	4 (24)	1 (5)	8 (31)	3 (21)
I feel lonely	3 (18)	1 (5)	5 (19)	6 (43)
I feel I have more problems with memory than most	1 (6)	1 (5)	6 (23)	4 (29)
Range of Score (negative statements)	5-16	6-12	6-18	8-16
Summated Mean	10.5	8.9	10.2	11.4
Loneliness Scale				
I lack companionship	1 (6)	0 (0)	7 (27)	6 (43)
I feel left out	1 (6)	0 (0)	6 (23)	3 (21)
I feel isolated from others	1 (6)	0 (0)	7 (27)	2 (14)
Range of Scores	3-9	4-10	3-14	5-12
Summated Mean	6.1	6.0	7.5	7.7

Table 14a. Comparison of Quality of Life Survey (Comfort, Functional, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Care Home Residents for CWD (N = 17) (July 2015), CWD (N = 21) (Oct 2015), CWD (N = 26) and CWD (N = 14) (April 2016) [cont.]

	CWD (Jul 15) Often + Always N (%)	CWD (Oct 15) Often + Always N (%)	CWD (Jan 16) Often + Always N (%)	CWD (Apr 16) Often + Always N (%)
QOL - Comfort				
Do you get a good night's sleep here?	13 (77)	14 (67)	19 (73)	11 (79)
How often are you in physical pain?	4 (24)	1 (5)	5 (42)	2 (14)
How often are you too cold in the care facility?	1 (6)	0 (0)	2 (8)	2 (14)
How often are you in the same position so long that it hurts?	1 (6)	0 (0)	2 (8)	3 (21)
How often are you bothered by noise when you are in your room?	1 (6)	0 (0)	8 (31)	1 (7)
How often are you bothered by noise in other parts of the care facility, for example, in the dining room?	1 (6)	1 (5)	3 (12)	2 (14)
Range of Score	8-19	9-16	9-21	10-22
Summated Mean	14.2	12.0	14.1	14.4
QOL – Functional Component				
Is it easy for you to get around in your room by yourself?	16 (94)	18 (86)	13 (89)	11 (79)
Can you easily reach your toiletries and things that you want to use in your bathroom?	16 (94)	17 (81)	21 (81)	12 (86)
Do you do as much to take care of your own things and your room as you can and want?	16 (94)	16 (76)	19 (73)	12 (86)
Can you easily reach the things that you need?	14 (82)	18 (86)	22 (75)	11 (79)
If you are anywhere in the care facility and need a bathroom, can you get to one quickly?	13 (77)	18 (86)	21 (81)	12 (86)
Range of Score	17-25	12-25	9-25	16-25
Summated Mean	22.2	22.0	20.4	20.1
QOL - Privacy				
Can you find a place to be alone if you wish?	15 (88)	16 (76)	19 (73)	12 (86)
Can you have the privacy to make a private phone call?	15 (88)	15 (71)	21 (81)	11 (79)
When you have a visitor, can you find a place to visit in private?	15 (88)	13 (62)	22 (85)	10 (71)
Do the people who work here knock and wait for a reply before entering your room?	13 (77)	16 (76)	19 (73)	11 (79)
Can you be together in private with another resident?	10 (59)	6 (29)	21 (81)	11 (79)
Range of Score	12-25	7-25	14-25	14-25
Summated Mean	21.4	18.1	20.6	19.1
QOL - Dignity				
Do you feel that you are treated with respect here?	17 (100)	20 (95)	23 (88)	14 (100)
Do staff here handle you gently while giving you care?	17 (100)	20 (95)	21 (81)	12 (86)
Do staff here treat you politely?	16 (94)	20 (95)	23 (88)	13 (93)
Do staff here respect your modesty?	15 (88)	19 (91)	21 (81)	12 (86)
Do staff take time to listen to you when have something to say?	14 (82)	18 (86)	22 (85)	11 (79)
Range of Score	11-25	15-25	9-25	16-24
Summated Mean	22.5	23.5	22.1	20.9
QOL – Meaningful Activities				
Do you get a chance to go outdoors?	14 (82)	18 (86)	20 (77)	8 (57)
Do you enjoy the organised activities here at the care facility?	13 (77)	19 (91)	19 (73)	6 (43)
Despite your health condition, do you give help to others?	8 (47)	7 (33)	16 (62)	9 (64)
Outside of religious activities, do you have enjoyable things to do at the care facility during the weekend?	8 (47)	13 (62)	12 (46)	7 (50)
Do the days here seem too long to you?	3 (18)	1 (5)	4 (15)	4 (29)
Range of Score	9-22	11-25	8-21	13-22
Summated Mean	17.7	17.5	17	16.8

QOL - Relationship

Do you think that this facility tries to make this an easy and pleasant place for families and friends of residents to visit?	17 (100)	14 (67)	21 (81)	11 (79)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	11 (65)	11 (52)	19 (73)	10 (71)
Do you consider your staff member to be your friend?	8 (47)	2 (10)	21 (81)	11 (79)
Is it easy to make friends at this care facility?	9 (53)	10 (48)	17 (65)	8 (57)
Do you consider any of the residents here as your close friend?	7 (41)	6 (29)	12 (46)	8 (57)
Range of Score	10-25	4-21	11-25	11-23
Summated Mean	18.4	15.8	19.1	18.6

Overall Satisfaction	Very Satisfied + Satisfied	Very Satisfied + Satisfied	Very Satisfied + Satisfied	Very Satisfied + Satisfied
How satisfied are you with the conditions of your current living place?	15 (88)	18 (86)	23 (88)	14 (100)
All things considered, how satisfied are you with your life as a whole these days?	14 (82)	19 (91)	23 (88)	14 (100)
How would you rate your quality of life?	13 (77)	18 (86)	21 (81)	13 (93)
Overall Recommendation	Mostly Yes	Mostly Yes	Mostly Yes	Mostly Yes
Would you recommend this care facility to others?	15 (88)	11 (52)	24 (92)	13 (93)

Table 15. Comparison of Quality of Life Survey (Flourishing, Depression & Loneliness) – Care Home Residents for PAK (N = 22) (July 2015), PAK (N = 8) (Oct 2015), PAK (N = 28) (Jan 2016) and PAK (N = 10) (April 2016)

	PAK (July 2015) Strongly Agree + Agree N (%)	PAK (Oct 2015) Strongly Agree + Agree N (%)	PAK (Jan 2016) Strongly Agree + Agree N (%)	PAK (April 2016) Strongly Agree + Agree N (%)
Flourishing Scale				
People respect me	15 (68)	7 (88)	24 (86)	9 (90)
I am a good person and live a good life	16 (73)	7 (88)	26 (93)	9 (90)
My social relationships are supportive and rewarding	16 (73)	7 (88)	21 (75)	7 (70)
I am competent and capable in the activities that are	15 (68)	7 (88)	22 (77)	7 (70)
I am engaged and interested in my daily activities	14 (64)	6 (75)	23 (82)	7 (70)
I actively contribute to the happiness and wellbeing of others	13 (59)	7 (88)	23 (82)	8 (80)
I lead a purposeful and meaningful life	11 (50)	6 (75)	17 (61)	7 (70)
I am optimistic about my future	5 (23)	5 (63)	17 (61)	6 (60)
Range of Score	19-40	25-38	20-38	14-34
Summated Mean	28.1	30.1	30.5	28.6
Geriatric Depression Scale				
I feel happy most of the time	17 (77)	8 (100)	21 (75)	6 (60)
I am in good spirits most of the time	17 (77)	7 (88)	22 (77)	8 (80)
I think it is wonderful to be alive now	15 (68)	6 (75)	19 (68)	4 (40)
I feel full of energy	5 (23)	4 (50)	7 (25)	2 (20)
Range of Score (positive statements)	8-19	10-20	3-20	7-16
Summated Mean	14.3	14.6	14.6	12.0
Geriatric Depression Scale (cont.)				
I often feel helpless	14 (55)	4 (50)	13 (46)	3 (30)
I feel lonely	8 (36)	2 (25)	12 (43)	3 (30)
I often feel bored	7 (32)	3 (38)	7 (25)	3 (30)
I feel I have more problems with memory than most	2 (9)	2 (25)	8 (29)	3 (30)
Range of Score (negative statements)	8-16	7-15	6-18	8-13
Summated Mean	11.4	10.5	10.8	10.9
Loneliness Scale				
I lack companionship	8 (36)	3 (38)	7 (25)	4 (40)
I feel isolated from others	6 (27)	2 (25)	6 (21)	5 (50)
I feel left out	5 (23)	1 (13)	4 (14)	1 (10)
Range of Score	3-15	4-11	3-12	6-12
Summated Mean	8.4	7.6	7.5	8.3

Table 15a. Comparison of Quality of Life Survey (Comfort, Functional, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Care Home Residents for PAK (N = 22) (July 2015), PAK (N = 8) (Oct 2015), PAK (N = 28) (Jan 2016) and PAK (N = 10) (April 2016) [cont.]

	PAK (Jul 15) Often + Always N (%)	PAK (Oct 15) Often + Always N (%)	PAK (Jan 16) Often + Always N (%)	PAK (Apr 16) Often + Always N (%)
QOL – Comfort				
Do you get a good night’s sleep here?	17 (77)	7 (88)	21 (75)	5 (50)
How often are you in physical pain?	5 (23)	1 (13)	6 (21)	5 (50)
How often are you too cold in the care facility?	3 (14)	1 (13)	1 (4)	0 (0)
How often are you in the same position so long that it hurts?	2 (9)	0 (0)	3 (11)	0 (0)
How often are you bothered by noise when you are in your room?	3 (14)	0 (0)	4 (14)	1 (10)
How often are you bothered by noise in other parts of the care facility, for example, in the dining room?	3 (14)	0 (0)	6 (21)	2 (20)
<i>Range of Score</i>	10-22	11-18	9-24	12-20
<i>Summated Mean</i>	15.2	14.6	15.0	15.8
QOL – Functional Component				
Is it easy for you to get around in your room by yourself?	14 (64)	6 (75)	24 (86)	9 (90)
Can you easily reach your toiletries and things that you want to use in your bathroom?	17 (77)	5 (63)	23 (82)	8 (80)
Do you do as much to take care of your own things and your room as you can and want?	16 (73)	6 (75)	23 (82)	8 (80)
Can you easily reach the things that you need?	12 (55)	5 (63)	22 (79)	9 (90)
If you are anywhere in the care facility and need a bathroom, can you get to one quickly?	15 (68)	6 (75)	21 (75)	9 (90)
<i>Range of Score</i>	12-25	13-25	12-25	12-20
<i>Summated Mean</i>	20.2	20.9	22.5	21.9
QOL - Privacy				
Can you find a place to be alone if you wish?	15 (68)	6 (75)	22 (79)	8 (80)
Can you have the privacy to make a private phone call?	15 (68)	6 (75)	17 (61)	7 (70)
When you have a visitor, can you find a place to visit in private?	14 (64)	4 (50)	19 (68)	8 (80)
Do the people who work here knock and wait for a reply before entering your room?	13 (59)	6 (75)	21 (75)	7 (70)
Can you be together in private with another resident?	7 (32)	2 (25)	18 (64)	8 (80)
<i>Range of Score</i>	4-25	10-25	11-25	17-25
<i>Summated Mean</i>	18.1	19.0	21.1	22.1
QOL - Dignity				
Do you feel that you are treated with respect here?	18 (82)	7 (88)	23 (82)	7 (70)
Do staff here handle you gently while giving you care?	17 (77)	7 (88)	22 (79)	8 (80)
Do staff here treat you politely?	17 (77)	7 (88)	25 (89)	7 (70)
Do staff here respect your modesty?	18 (82)	7 (88)	23 (82)	8 (80)
Do staff take time to listen to you when have something to say?	14 (64)	5 (63)	22 (79)	7 (70)
<i>Range of Score</i>	14-25	12-25	17-25	11-25
<i>Summated Mean</i>	21.6	21.5	23.4	21.2
QOL – Meaningful Activities				
Do you get a chance to go outdoors?	13 (59)	6 (75)	20 (72)	9 (90)
Do you enjoy the organised activities here at the care facility?	13 (59)	5 (63)	17 (61)	4 (40)
Despite your health condition, do you give help to others?	6 (27)	4 (50)	9 (32)	5 (50)
Outside of religious activities, do you have enjoyable things to do at the care facility during the weekend?	12 (55)	1 (13)	10 (36)	4 (40)
Do the days here seem too long to you?	4 (18)	4 (50)	5 (18)	6 (60)
<i>Range of Score</i>	11-22	14-24	6-23	15-22
<i>Summated Mean</i>	16.5	17.9	17.2	17.9

QOL - Relationship

Do you think that this facility tries to make this an easy and pleasant place for families and friends of residents to visit?	15 (68)	7 (88)	23 (82)	5 (50)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	7 (32)	6 (75)	16 (57)	5 (50)
Do you consider your staff member to be your friend?	11 (50)	4 (50)	10 (36)	2 (20)
Is it easy to make friends at this care facility?	7 (32)	4 (50)	12 (43)	5 (50)
Do you consider any of the residents here as your close friend?	10 (45)	5 (63)	12 (43)	6 (60)
<i>Range of Score</i>	9-22	11-21	9-25	10-25
<i>Summated Mean</i>	15.7	18.0	18.2	17.4

Overall Satisfaction	Very Satisfied + Satisfied	Very Satisfied + Satisfied	Very Satisfied + Satisfied	Very Satisfied + Satisfied
How satisfied are you with the conditions of your current living place?	15 (68)	6 (75)	21 (75)	9 (90)
All things considered, how satisfied are you with your life as a whole these days?	17 (77)	7 (88)	24 (86)	7 (70)
How would you rate your quality of life?	16 (73)	7 (88)	23 (82)	6 (60)
Overall Recommendation	Mostly Yes	Mostly Yes	Mostly Yes	Mostly Yes
Would you recommend this care facility to others?	15 (68)	8 (100)	24 (86)	6 (60)

Table 16. Quality of Life Survey (Flourishing, Depression & Loneliness) – Village Residents for CWD (N = 103) (collected in July 2015), CWD (N = 91) (collected in Dec 2015) and CWD (N = 104) (collected in April 2016).

	CWD (Jul 2015) Strongly Agree + Agree N (%)	CWD (Dec 2015) Strongly Agree + Agree N (%)	CWD (Apr 2016) Strongly Agree + Agree N (%)
Flourishing Scale			
I am competent and capable in the activities that are important to me	88 (85)	73 (80)	73 (77)
I am engaged and interested in my daily activities	84 (82)	75 (82)	80 (77)
My social relationships are supportive and rewarding	80 (78)	71 (78)	74 (71)
I lead a purposeful and meaningful life	77 (75)	64 (70)	71 (68)
I am a good person and live a good life	72 (70)	68 (75)	79 (76)
People respect me	64 (62)	60 (66)	58 (56)
I am optimistic about my future	62 (60)	47 (52)	58 (56)
I actively contribute to the happiness and wellbeing of others	58 (56)	66 (73)	54 (52)
Range of Score	18-40	12-40	4-40
Summated Mean	30.8	30.2	29.5
Geriatric Depression Scale			
I am in good spirits most of the time	87 (85)	72 (79)	82 (79)
I feel happy most of the time	86 (84)	80 (88)	80 (77)
I think it is wonderful to be alive now	77 (75)	61 (67)	69 (66)
I feel full of energy	29 (28)	35 (39)	38 (37)
Range of Score (positive statements)	8-20	4-20	4-20
Mean	14.9	15.0	14.7
Geriatric Depression Scale (cont.)			
I often feel bored	11 (11)	10 (11)	10 (10)
I feel lonely	10 (10)	8 (9)	8 (8)
I feel I have more problems with memory than most	7 (7)	12 (13)	11 (11)
I often feel helpless	6 (6)	12 (13)	12 (12)
Range of Score (negative statements)	1-17	2-14	1-17
Mean	7.6	8.3	8.3
Loneliness Scale			
I lack companionship	10 (10)	5 (6)	6 (6)
I feel isolated from others	4 (4)	3 (3)	7 (7)
I feel left out	3 (3)	3 (3)	4 (4)
Range of Score (positive statements)	2-12	2-11	2-12
Mean	5.5	5.7	6.1

Table 16a. Quality of Life Survey (Comfort, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Village Residents for CWD (N = 103) (collected in July 2015), CWD (N = 91) (collected in Dec 2015) and CWD (N = 104) (collected in April 2016) [cont.]

	CWD (Jul 2015) Often + Always N (%)	CWD (Dec 2015) Often + Always N (%)	CWD (Apr 2016) Often + Always N (%)
QOL - Comfort			
Do you get a good night's sleep here?	82 (80)	70 (77)	83 (80)
How often are you bothered by noise when you are in your living space?	6 (6)	3 (3)	10 (10)
How often are you bothered by noise in other parts of the village?	1 (1)	2 (2)	4 (4)
Range of Score	3-12	2-12	3-13
Summated Mean	7.5	7.7	7.8
QOL - Privacy			
Do the people who work here knock and wait for a reply before entering your living space?	96 (93)	86 (95)	99 (95)
Range of Score	--	--	--
Summated Mean	4.8	4.9	4.9
QOL – Dignity			
Do you feel that you are treated with respect here?	97 (94)	87 (96)	95 (91)
Do staff here treat you politely?	96 (93)	88 (97)	97 (93)
Do staff take time to listen to you when have something to say?	93 (90)	82 (90)	91 (88)
Range of Score	8-15	7-15	7-15
Summated Mean	14.1	14.0	13.7
QOL – Meaningful Activities			
Do you give help to others?	66 (61)	53 (58)	59 (57)
Do you enjoy the organised activities here at the village?	44 (48)	43 (47)	39 (38)
Do the days here seem too long to you?	1 (1)	4 (4)	10 (10)
Range of Score	2-13	2-13	3-13
Summated Mean	8.8	9.1	8.7
QOL - Relationship			
Do you think that this Village tries to make this an easy and pleasant place for families and friends of residents to visit?	73 (71)	81 (78)	77 (74)
Is it easy to make friends at this village?	59 (57)	53 (58)	51 (49)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	52 (51)	45 (50)	45 (43)
Do you consider any of the residents here as your close friend?	40 (39)	48 (53)	37 (36)
Do you consider your staff member to be your friend?	34 (33)	28 (31)	28 (27)
Range of Score	1-25	2-25	4-24
Summated Mean	16.5	17.5	15.7
Overall Satisfaction			
How satisfied are you with the conditions of your current living place?	Very Satisfied + Satisfied 91 (88)	Very Satisfied + Satisfied 79 (87)	Very Satisfied + Satisfied 86 (83)
All things considered, how satisfied are you with your life as a whole these days?	88 (85)	67 (74)	80 (77)
How would you rate your quality of life?	86 (84)	70 (77)	82 (79)
Overall Recommendation			
Would you recommend this care facility to others?	Mostly Yes 84 (82)	Mostly Yes 71 (78)	Mostly Yes 71 (68)

Table 17. Quality of Life Survey (Flourishing, Depression & Loneliness) – Village Residents for PAK (N = 60) (collected in July 2015), PAK (N = 60) (collected in Dec 2015) and PAK (N = 56) (collected in April 2016).

	PAK (Jul 2015) Strongly Agree + Agree N (%)	PAK (Dec 2015) Strongly Agree + Agree N (%)	PAK (Apr 2016) Strongly Agree + Agree N (%)
Flourishing Scale			
My social relationships are supportive and rewarding	46 (77)	43 (72)	39 (70)
I am competent and capable in the activities that are important to me	45 (75)	46 (77)	47 (84)
I am engaged and interested in my daily activities	44 (73)	46 (77)	40 (71)
I am a good person and live a good life	44 (73)	50 (83)	45 (80)
I lead a purposeful and meaningful life	42 (70)	36 (65)	37 (66)
People respect me	41 (68)	41 (68)	40 (71)
I actively contribute to the happiness and wellbeing of others	38 (63)	33 (55)	33 (59)
I am optimistic about my future	33 (55)	40 (67)	34 (61)
Range of Score	12-40	14-39	20-38
Summated Mean	31.3	30.5	30.4
Geriatric Depression Scale			
I am in good spirits most of the time	53 (88)	54 (90)	45 (80)
I feel happy most of the time	49 (81)	51 (85)	46 (82)
I think it is wonderful to be alive now	45 (75)	51 (85)	42 (75)
I often feel helpless	9 (15)	3 (5)	5 (9)
Range of Score (positive statements)	9-20	4-20	4-20
Summated Mean	15.3	14.7	14.8
Geriatric Depression Scale (cont.)			
I feel full of energy	25 (42)	21 (35)	20 (36)
I feel I have more problems with memory than most	8 (13)	7 (12)	6 (11)
I feel lonely	7 (12)	8 (13)	6 (11)
I often feel bored	3 (5)	6 (10)	8 (14)
Range of Score (negative statements)	2-18	2-16	2-18
Summated Mean	8.4	8.3	8.8
Loneliness Scale			
I lack companionship	8 (13)	6 (10)	7 (13)
I feel isolated from others	4 (7)	4 (7)	2 (4)
I feel left out	3 (5)	2 (3)	0 (0)
Range of Score	3-12	2-12	3-11
Summated Mean	6.0	6.1	6.2

Table 17a. Quality of life Survey (Comfort, Privacy, Dignity, Activity, Relationship & Overall Satisfaction) – Village Residents for PAK (N = 60) (collected in July 2015), PAK (N = 60) (collected in Dec 2015) and PAK (N = 56) (collected in April 2016) [cont.]

	PAK (Jul 2015) Often + Always N (%)	PAK (Dec 2015) Often + Always N (%)	PAK (Apr 2016) Often + Always N (%)
QOL - Comfort			
Do you get a good night's sleep here?	44 (73)	46 (77)	44 (79)
How often are you bothered by noise when you are in your living space?	3 (5)	11 (18)	7 (13)
How often are you bothered by noise in other parts of the village?	0 (0)	0 (0)	1 (2)
Range of Score	3-11	2-10	5-10
Summated Mean	7.4	7.5	7.8
QOL - Privacy			
Do the people who work here knock and wait for a reply before entering your living space?	58 (97)	57 (95)	51 (91)
Range of Score	--	--	--
Summated Mean	4.8	4.8	4.7
QOL – Dignity			
Do staff here treat you politely?	60 (100)	60 (100)	56 (100)
Do you feel that you are treated with respect here?	59 (98)	60 (100)	56 (100)
Do staff take time to listen to you when have something to say?	58 (97)	58 (97)	54 (96)
Range of Score	10-15	10-15	10-15
Summated Mean	14.5	14.7	14.5
QOL – Meaningful Activities			
Do you give help to others?	37 (62)	34 (57)	30 (54)
Do you enjoy the organised activities here at the village?	36 (60)	42 (70)	28 (50)
Do the days here seem too long to you?	8 (13)	21 (35)	8 (14)
Range of Score	3-14	5-14	6-15
Summated Mean	9.5	9.8	9.8
QOL - Relationship			
Do you think that this Village tries to make this an easy and pleasant place for families and friends of residents to visit?	47 (78)	53 (88)	45 (80)
Is it easy to make friends at this village?	46 (77)	46 (77)	44 (79)
In the last month, have people who worked here stopped just to have a friendly conversation with you?	28 (47)	32 (53)	19 (34)
Do you consider any of the residents here as your close friend?	33 (55)	27 (45)	29 (52)
Do you consider your staff member to be your friend?	26 (43)	28 (47)	16 (29)
Range of Score	6-25	3-25	3-25
Summated Mean	17.6	19.1	16.6
Overall Satisfaction			
	Very Satisfied + Satisfied	Very Satisfied + Satisfied	Very Satisfied + Satisfied
How satisfied are you with the conditions of your current living	52 (87)	51 (85)	48 (86)
All things considered, how satisfied are you with your life as a whole these days?	49 (82)	51 (85)	42 (75)
How would you rate your quality of life?	49 (82)	52 (87)	47 (84)
Overall Recommendation			
	Mostly Yes	Mostly Yes	Mostly Yes
Would you recommend this care facility to others?	48 (80)	51 (85)	43 (77)

Table 18. Summary of Residents' and Families' Interviews (April 2016)

Themes	Care Home Residents (N=3)	Family Members of CWD Residents (N=3) Family Member of Village Residents (N = 2)	Serviced Apartment Resident (N = 1) and family member (N = 1)	Village Residents (N=4)
What makes a place a home and also at Crestwood?	<ul style="list-style-type: none"> • A case of necessity when no longer being able to live at own home • Staff to look after me, meals are good and entertaining available • Have my own things • Surrounded by people and animals in the care home • Engage with activities in the care home 	<ul style="list-style-type: none"> • Security, a sense of belonging, freedom to live like in their own home • Full of love “everything else just blossoms” • Welcoming place • Atmosphere, sense of family, sense of belonging and size • Caring staff and my family member feels comfortable living in the room of the care home • My “father” embraced the care home and called it a “lodge”, not a “rest home” • Surrounded by animals, participating in outings and activities, mixing with other people • Care and friendly staff • Home-like environment 	<ul style="list-style-type: none"> • Environment and friendly people • Sense of belonging • Comfortable and easy environment to move around and have social connection – that’s a home but here it doesn’t feel like home because I had to move here 	<ul style="list-style-type: none"> • A place we do what we like, more or less • Comfortable living in the village but miss my own home • What you do makes it a home – still working on the attitude to make this my home • Home is where your families are and in a familiar environment – takes time to come to terms this is now my home
Changes since Eden Alternative implementation	<ul style="list-style-type: none"> • Plenty of entertainment • Good to see children and pets in the care home facility 	<ul style="list-style-type: none"> • Increased social activities, more photos of care home residents, pets around and more festive atmosphere created by staff • To create a more flexible and social environment for the residents – a greater sense of energy and a more personal atmosphere • Staff try hard to make their presence felt by the residents to get them engaged • Giving the power back to the clients e.g., shower time • More freedom of decision making and more homely feeling at the care home • There are more activities on the weekend • Lots more community engagement involved in the home now (children, music...etc.) • Residents are happier and more engaging 	<ul style="list-style-type: none"> • More socialising opportunities for my mum as she enjoys the card game playing group • More involvement from the community into the facility • Care centre people coming into the lounge more often • A lot more mixing going on • The dogs – that’s part of life now • Therapeutic to have cats around • A lot more receptiveness to the care centre, barriers are falling down • Changes our view on retirement village seeing my mum living in this environment retaining her independence and not stuck at home when we are out all day working. It is a nice place for her 	<ul style="list-style-type: none"> • Have heard about the Eden but doesn’t really affect us at all • Didn’t think Crestwood is involved with the community at all • It works in the rest home or the care facility but I don’t notice much difference as far as the village is concerned

Table 18a. Summary of Residents' and Families' Interviews (April 2016) [cont.]

Themes	Care Home Residents (N=3)	Family Members of CWD Residents (N=3) Family Member of Village Residents (N = 2)	Serviced Apartment Resident (N = 1) and family member (N = 1)	Village Residents (N=4)
Further improvement from Metlifecare	<ul style="list-style-type: none"> • More involvement with children and young people as it helps them seeing how the other side of life is when they group up • Consider rest home as a lodge (more friendlier term – homely environment) • Other residents come and play with us, that's good 	<ul style="list-style-type: none"> • Continue to provide more support for residents to get out of their rooms as sometimes they worry about their mobility • To help them to develop the feeling that their new home is greater than just their room • One to one attention for staff to residents (like just touching their hand, asking how you are and making a conversation about the animals, pop them into their arms) • Continue to bring the outside world to them with the help from children coming in, singers, bands...etc. • Continue to see happy people, lots of love and caring and the compassion that they show here • Keep on encouraging and engaging with residents in activities • Carrying on doing the good work already doing • Sustain the changes and keep going as the success of seeing all the residents being so happy • Hope the success from Crestwood will be rolled out to all the centres (a good investment) • Make sure this is sustainable "I have been seen where new ideas have been implemented by people who don't work within the environment where the change will occur" • The preference of the elderly is to keep its simple, understandable and practical 	<ul style="list-style-type: none"> • Not just focus on activities and contact but to also think about what suits their needs, not just the general needs of older people but the individual needs as well so that they don't feel like they are just one of the 50 people here. 	<ul style="list-style-type: none"> • People in the village still got outside interest and those outside interests can't be duplicated in the village • Eden may not work particularly well with independent living