

# The Intergenerational Programme at Nightingale House:

A study into the impact on the  
well-being of elderly residents

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# Content

|  |    |
|--|----|
| Introduction   | 3  |
| How change occurs for elderly residents in intergenerational sessions    | 5  |
| Observable benefits to residents   | 6  |
| Core weekly intergenerational programme at Nightingale House             | 8  |
| Headline findings  | 10 |
| Key recommendations  | 10 |
| How to develop an interdisciplinary intergenerational impact methodology | 11 |
| Acknowledgements   | 11 |



## Introduction

Nightingale House is a faith-based elderly residential care home located in South West London. The Jewish charity Nightingale Hammerson runs the care home and is over 175 years old. In January 2017, a weekly intergenerational baby and toddler group began in the home's main lounge. This was followed by the opening of an on-site social enterprise day nursery, Apples and Honey Nightingale CIC in September 2017. Apples and Honey Nightingale sets aside 20% of nursery places for care home staff to use for their own children at a heavily subsidised rate.

The intergenerational programme is delivered jointly by both organisations and takes place daily between nursery children and elderly care home residents. The majority of residents at Nightingale House are between 85 and 106 years old, with a small proportion of residents younger than 85. The children who attend Apples and Honey Nightingale are 2 to 4 years old.

The full research report details the findings of a study to determine the extent to which the regular intergenerational programme has an impact on the well-being of elderly residents at Nightingale House. This summary provides an overview of the study and key findings.

Impact is defined here as *observable changes* to resident behaviour, and can include (but is not limited to) improvements to physical mobility, verbal and nonverbal communication, cognitive function, and expressed feelings of self-worth. While the research framework accounted for positive and negative changes for residents, almost entirely positive changes were observed.

### Objectives of the study are to:

- 1) capture the breadth of the intergenerational programme taking place on-site;
- 2) identify any repeated observed benefits of the programme on the residents of the care home; and
- 3) make recommendations about its potential future direction.

Nightingale House's intergenerational programme is unique because it is based in one of the largest care homes in the United Kingdom. It houses on average 185 residents, and provides the widest range of support including residential, nursing, respite, palliative and dementia-specialist care.

The intergenerational programme takes place between nursery children and care home residents multiple times a day. It is comprised of many different types of intergenerational activity that have been piloted onsite. Because of the wide variety of care provided and the large number of elderly residents at Nightingale House, it has been an ideal setting in which to conduct this research. Findings include how a range of intergenerational activities affect the well-being of residents differently.

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*“The intergenerational sessions are lovely. The children, parents and staff all seemed very happy and welcoming. My father of 102 loved it and really comes to life interacting with the children.”* Daughter of resident

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With more than 30 days of observations taken regularly over a five-month period, the study identifies both *what* residents respond to and *how* they respond to intergenerational sessions. *The research makes a further contribution by creating a framework that other sites can use to measure the impact of intergenerational interaction on elderly residents.* In sharing these findings with policy-makers, researchers and practitioners across the care and early years sectors in the United Kingdom and internationally, Nightingale Hammerson aims to contribute to the growing body of intergenerational best practice.

### AN EXTRAORDINARY RESPONSE

In one baby and toddler session, a gentleman in his late 60s walked in pushing his father in a wheelchair, who was 101. The son asked what was happening in the lounge. It turned out he was down from Scotland visiting his father. He asked if they could stay and attend the intergenerational session, and explained he wasn't sure how long his father would cope with all of the people but the son wanted to give it a try. It was his father's first time attending. They settled in and enjoyed themselves.

The pair stayed for the whole 90 minutes and at the end of the session, the son began to gently cry. After asking what his tears were for, he explained they were for joy. The son shared that his father had been bed bound for the past several months. He was visiting because it was expected that his father would pass away soon. The son was moved because he said while his father was mostly deaf, he had spent the past hour and a half smiling and engaged and interacting. At one point a new mum placed her 6-month-old child in the 102 year-old resident's lap!

The son said he was so emotional because his father in that one morning session had been more himself than his son had seen in years. He asked if photos of his father could be taken so they could be shared with his siblings who were scattered around the country. The son wanted to show the rest of the family that their father had come back to life- even if only for a short time.

He reflected that even if his father did pass away soon, he had peace by having shared this special time with him in the baby and toddler group.

“*We were very touched and amazed by the interaction of both the children and the residents – our friend is unable to make any form of contact with us but she put out her arms for a little girl to sit on her lap and the little girl was happy to do so – very touching for us especially as our friend kept eye contact with the little girl – something she is unable to do with us*”

Friend of resident with dementia

## *How change occurs for elderly residents in intergenerational sessions*

This study captured which components of an intergenerational session residents respond to. These can be considered new stimuli for elderly residents and are markedly different from what they normally experience in a care home setting.

The list below describes the different aspects of all intergenerational sessions that elderly residents consistently responded to, regardless of cognitive ability, underlying health, or age. Importantly, many of the sessions that were observed included residents from the widest possible range within the care home. Elderly residents who were frail, had dementia, or had lost verbal communication, participated alongside those who lived almost independently and received only light touch support from the care home.

- **Children:** Some residents respond hugely to the nursery and baby and toddler group children. For many residents, it is the opportunity to interact with and develop ongoing relationships with the children that has the greatest effect.
- **Middle age demographic:** Nursery children and baby and toddler visitors are accompanied by a new age demographic of 30-50 year-old adults. These could be early years teachers, child minders, nannies, parents, or volunteers who regularly attend sessions with the children, and they represent an age group that was missing from daily life in the care home. For some residents, while the children were interesting to observe, the befriending opportunities were most significant with this particular age group.
- **Child-centric setting:** It cannot be underestimated how different it felt for residents to enter into spaces in their elderly care home that had been transformed into a child-centric environment. Spaces could have bright colours, and lots of sensory stimuli that transported residents back to their own childhoods. Even if the settings did not trigger personal childhood memories, the environment created a very different feel and experience for residents that was completely apart from a space that constantly reminded them of their age and stage of life.
- **The activity:** Often, the activities themselves triggered memory, stimulated the senses, promoted learning and provoked curiosity and exploration. The intergenerational sessions are designed to deliver the Early Years Statutory Framework in order to meet the learning and development needs of the nursery children. As a result, tasks were designed with learning and development at the core. This was an entirely new experience for elderly care home residents and so stood out from the other engagement experiences on offer to them.
- **Leader of the session:** The qualities of the professional leading the activity in many instances benefitted the elderly residents who participated. An early years teacher, through their professional training, brought new skills to an intergenerational session than a resident normally experiences. Early years teachers are experienced in looking for spontaneous opportunities to extend participation and learning one to one. In all sessions that teachers led, they applied these same skills to encouraging the participation of elderly residents as they did to the nursery children.
- **Religious element:** A religious component was not present in every intergenerational activity, but as a faith-based setting, these were built into many sessions. For a small number of residents, particularly those with advanced dementia, they experienced a strong reaction to either re-living a religious task or singing a traditional Hebrew song, as it enabled reminiscing to occur. In other settings, this factor could be substituted for other cultural or religious specific practices that would have the same effect of triggering memory and providing comfort.

**Once it became clear *what* residents responded to across a range of activities, it was possible to determine *how* they benefitted from intergenerational sessions.**

# Observable benefits to residents from participation in intergenerational sessions

The table below identifies the range of benefits observed across the different types of intergenerational sessions that took place over a five-month period. When the study was conducted, the programme had been in place for more than one year.

| <b>The range of benefits observed:</b>   |
|--|
| <b>Relief from being the object of care, a break from thinking about aches and pains, being transported to another space</b> |
| <b>Be-friending and socialising (prevents social isolation and depression and improves well-being)</b>                       |
| <b>Cognitive stimulation through direct learning and participation (active)</b>  |
| <b>Cognitive stimulation through observation of the children (passive)</b>   |
| <b>Reminiscing – chance to remember and relive or process earlier experiences of childhood</b>                               |
| <b>Able to give back and lead, share experience and help children</b>  |
| <b>Increased physical movement (coordination, balance, strength)</b>   |

These different benefits were measured using data collected from in-person timed observations. The observation method used here was influenced by how data is collected using a range of techniques including; dementia care mapping, measuring depression in the elderly, and also identifying and tracking indicators of loneliness. The Leuven involvement scales which captures participation and involvement in young children as part of early learning also underpins this methodology. Once benefits were identified and observed to occur regularly, additional information was collected in order to understand the significance of the benefit for residents.

All of the measures above were supplemented with interviews with elderly residents, and key members of staff across the care home and nursery. In addition, surveys were conducted with staff from both organisations. Family members of residents were also surveyed and interviewed to capture any positive or negative impacts they saw in their loved ones. This way, a holistic view was captured of what was taking place on site and how it affected those who took part.

When monitoring the different areas of impact across types of intergenerational activity, a clear picture emerged of which activities delivered the greatest benefit for specific groups of residents. A wide range of intergenerational activities were observed including the core weekly programme summarised opposite.

| <b>Benefits observed:</b>  | <b>How was this measured?</b>   |
|--|---|
| <b>Relief from being the object of care, a break from thinking about aches and pains, being transported to another space</b> | By observing and recording what residents talked about just before, during, and after an intergenerational session. Residents shared what happened so far that day and what was on their mind. Next, residents visibly relaxed when sessions began, and often tensed up again when sessions were over.  |
| <b>Be-friending and socialising (prevents social isolation and depression and improves well-being)</b>                       | By observing and recording the number and quality of interactions between residents and children/teachers/family members. This included one off interactions, and sustained relationships where interaction was maintained week on week. How people greeted each other and held each other was also noted.  |
| <b>Cognitive stimulation through direct learning and participation (active)</b>  | By observing and recording resident participation in intergenerational sessions. This emerged in literacy and numeracy sessions when residents played early maths games and shared story books with the children. Again, this was captured by observing residents just before, during, and after these sessions to identify effects on their mood and behaviour, as well as their overall level of participation. |
| <b>Cognitive stimulation through observation of the children (passive)</b>   | By observing and recording what residents talked about just before an intergenerational session, during, and after. Residents self-identified that this was what was happening for them. As a result, it was included in the research design. Specific examples of which children the residents observed were also noted.   |
| <b>Reminiscing – chance to remember and relive or process earlier experiences of childhood</b>                               | By observing and recording what residents were talking about during a session. This was particularly clear for residents with dementia who talked their way through their experiences.  |
| <b>Able to give back and lead, share experience and help children</b>  | By observing and recording how residents participated in intergenerational sessions when working with small groups of children or one to one. Instances where residents worked one to one with children and helped and encouraged were recorded. This could include offering verbal praise or reassurance, or holding objects for children when working on tasks together (scissors, string, books, toys).        |
| <b>Increased physical movement (coordination, balance, strength)</b>   | By observing and recording how residents moved and how this movement differed from what they would do physically when not in an intergenerational session. For example, when singing with nursery children, residents followed actions designed by early years teachers to encourage movement of upper and lower limbs. This enhanced coordination and balance.   |

# Core weekly intergenerational programme at Nightingale House

The programme regularly changes, and the activities captured in the table below reflect those that most frequently occurred during the research project. In addition to these weekly activities, there are outings between residents and nursery children as well as large community-wide celebrations. These additional intergenerational sessions take place roughly four to five times a month and run alongside the weekly programme.

| MONDAY   | TUESDAY                                  | WEDNESDAY   | THURSDAY                                    | FRIDAY   |
|--|--|---|---|--|
| Baby and Toddler Group (Large Lounge Ground Floor) 10:00-11:30 | Literacy session (Osha Lounge) 2:00-2:45 | Drama therapy (Sampson Lounge) Group 1, 11:00-12:00 (delivered by an outside provider for 12 weeks) | Exercise class (Wine Lounge) 10:00-11:00    | Kabbalat Shabbat (Wine Lounge) 11:00-11:45<br><br>*Nursery has an early close each Friday for Shabbat observance |
| Havdallah (Osha Lounge) 11:15-12:00                            |  | Drama therapy (Sampson Lounge) Group 2, 2:00-3:00 (delivered by an outside provider for 12 weeks)   | Exercise class (Sherman Lounge) 11:00-11:45 |  |
| Open Studio in Activities Centre, 2:00 (twice a month)         |  | Baking in the Activities Centre (once a month)  | Numeracy session (Sampson Lounge) 2:15-3:00 |  |

Residents in *all* of the sessions benefitted from socialising and be-friending, and this *directly improved* mental health, decreased social isolation and helped to alleviate depression. However, the literacy and numeracy sessions delivered the *greatest cognitive benefit* for participants as the way in which elderly residents participated and interacted with early years teachers and children was very different from how other intergenerational sessions were designed.

One striking benefit for the elderly care home residents was relief from being the object of care. The care home experience, by its nature, can lead residents to feel disempowered and passive. The introduction of children into the setting reverses roles; distracting residents from their aches and pains and empowering them to take the initiative and care for others. Loneliness and isolation can be alleviated by building relationships with the on-site nursery children and their teachers. The residents benefit from cognitive stimulation by observing the development of the nursery children and participating alongside them in learning. These interactions can bring back memories of resident’s own childhoods and provide much comfort and joy as they approach the end of their own lives.

“*Watching the children is better than watching television. I can follow what’s happening and I like to see how the children’s minds work as they figure out how to move from one part of the room to another to get a toy they are interested in. It’s very uplifting and brings me joy.*” Arthur, 92 year-old resident

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*“When I first arrived at the care home, I really didn’t want to go on. But then, when the nursery began I had a whole new life. I never had children of my own and it has been a wonderful experience. I have made so many new friends. I see the children almost every day, and I love being part of the children’s and teachers’ lives.”* Farrah, 90 year-old resident

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*Benefits build up over time.* Residents who regularly socialise with nursery children report significant improvements in mental health and well-being. The entire feel of the care home is lighter, filled with a new range of sounds (mainly laughter from nursery children) and there is a deep sense of community between all the age groups, staff, family members, volunteers and residents. The intergenerational programme has become a glue that brings the different parts of the care home together.

### **Being transported to another space...**

Before one literacy session, four residents were watching television and waiting for the nursery children to arrive in the lounge. There was an elderly male resident in a wheelchair, with early stages of dementia. He was holding a box of Kleenex and there was a pile of used tissues next to him on a stand. Neil\* (name has been changed to protect his identity) began to explain that he had just been to see the nurse to have some blood drawn. Neil was frustrated and upset because it had been difficult to draw blood and there were bruises on his arm. He is usually relaxed, but now, he was agitated and feeling sorry for himself.

As soon as the nursery children arrived, Neil began to smile. He maintained his smile throughout the 45-minute session. Towards the end, the children were instructed to find a ‘friend’ to share a story with. One particularly energetic three-year-old boy came bounding over to Neil and asked to be his partner. The two had a lovely time together and he forgot all about his bad experience of having his blood drawn for the time being.

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*“As with many residents my Mum reacts in real time and has only vague memories. Her thoughts reflect that it makes Nightingale more homely. Often the children will chat and respond to her when walking through the garden or café. It always improves her mood.”* Daughter of resident

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## Headline findings:

- Combatting depression is a major challenge for care homes. In one study<sup>1</sup>, 46.2% of elderly care home residents were found either to have depression or presented with symptoms of depression, nearly half of the care home population. Intergenerational activities demonstrate that as an intervention, they lift the spirits of residents and are an effective way to respond to loneliness.
- ALL elderly residents who participated in intergenerational sessions benefitted in *multiple ways*, regardless of underlying health condition or cognitive ability, including those with dementia (even though they will have benefitted differently).
- Residents participated in the programme and were observed to benefit from the interaction *even when close to death*. This finding challenged assumptions about who within a care home would be able to participate in intergenerational sessions.
- Impact was lasting even if residents participated to different extents (some once a month, once a week, or four times a week).
- Literacy and numeracy sessions led by early years teachers provided residents with a unique type of cognitive stimulation. Residents with dementia benefitted hugely from the one to one attention with early years teachers and having opportunities to 'learn'.
- Intergenerational activities created opportunities for intellectual engagement for elderly residents, something care home environments do not regularly provide.
- Every type of intergenerational activity delivered the impact of relationship-building between the generations or befriending, which was demonstrated to alleviate symptoms of depression.
- Regular contact between the *same children and residents* had the *greatest* impact on residents.

## Key recommendations:

- 1) "Prescribe" participation in intergenerational sessions as a potential intervention for elderly care home residents who show signs of depression.
- 2) Bring in early years teachers to lead intergenerational sessions, prioritising places for those residents with dementia.
- 3) When designing an intergenerational programme, make sure the majority of planned activities happen at regular intervals with the same participants of children and elderly residents, as this consistency and routine is what underpins successful sessions and allows for maximum benefit for both populations.
- 4) Promote greater cross-practice learning and feedback by developing joint training between early years teachers and care, engagement, nursing, and therapy professionals. In this way, the capacity and multi-faceted skill of the team is increased in order to then deliver innovative intergenerational sessions.
- 5) Encourage members of staff from different professional teams (therapy, nursing, care, engagement, and nursery) to regularly observe intergenerational sessions in order to create a reflective environment for the programme to evolve, and to identify the widest range of benefits that residents may experience. For example, early years teachers may spot opportunities to increase cognitive stimulation in sessions physical therapy teams run and vice versa. Therapists may signal areas where greater physical movement could be encouraged within an intergenerational session.
- 6) Use this information to determine which residents should be recommended for participation in intergenerational activities in order to support their individual care needs and deliver care plans.

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1 Jongenelis et al (2004): Prevalence and risk indicators of depression in elderly nursing home patients: the AGED study.

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*“When we visited our friend, she put her arms out to a little girl. This is the first time we have seen her connect to anything or anyone, as she has lost all other forms of communication because of her dementia.”* Friend of resident

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## How to develop an interdisciplinary intergenerational impact methodology

The next steps in further research could be to use this framework as a foundation from which quantitative measures specific to each benefit could be applied to provide more comprehensive data. For example, if an objective is to decrease depression amongst care home residents, a baseline depression assessment could be administered before beginning an intergenerational programme. During sessions, observations could be taken in order to identify changes in resident behaviour. The same depression assessment could then be run after an intergenerational programme ended, or a fixed period of time, to capture if symptoms increased or decreased, and to what extent change occurred.

By taking the existing map of potential benefits, researchers can apply this framework to any intergenerational session. Using observations and linking to existing scales for measuring depression, physical mobility, and communication in elderly residents, greater detail can be gathered as to how interacting with younger children improves the well-being of elderly residents. This study was limited to exploring the benefits to elderly residents. However, most early years measurement is also conducted through observation. The next stage of this research will be to map how toddlers benefit from daily interaction with elderly care home residents using the same methodological approach. One of the objectives of this project was to bridge the gap between anecdotal evidence of benefit when toddlers and elderly play together to how those in the research community can begin to identify and track specific impact across a wide range of areas for these two vulnerable populations. The better the information generated becomes, the better the decision-making around resource allocation and programme design can become.

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\*For an electronic copy of the study's full report, please contact Nightingale Hammerson.

## About the author:



Dr Ali Somers is the Co-Founder of Apples and Honey Nightingale CIC, and is an expert in social impact research. Ali has a twenty-year career in the field of social entrepreneurship, as a researcher, academic lecturer, policy advisor, and campaigner. Ali set up the MA in Social Entrepreneurship at Goldsmiths College, University of London in 2010, and continues to contribute as an Associate Lecturer. Dr Somers earned her BA in Political Science and Women's Studies from Barnard College, Columbia University; her Masters in Public Administration from the Wagner Graduate School of Public Service at New York University; and her PhD in Politics from Goldsmiths College. Ali also holds a PGCE in Early Years Education from Kingston University, and is a Fellow of the RSA. Before moving to the UK in 2002, Ali worked for the United Nations Secretariat and was a US Peace Corps Volunteer.

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