

Inverclyde Dementia Care Co-ordination Programme: Learning and innovations in Inverclyde during the first wave of the COVID-19 pandemic

This snapshot shares experiences from Inverclyde Health and Social Care Partnership (HSCP) during the first wave of the COVID-19 pandemic. This includes how Health and Social Care services responded and how staff wellbeing was supported. We also highlight the role of technology, the experiences of people living with dementia and their carers, and how the third sector and local community supported the COVID-19 response.

Background

Inverclyde is the Dementia Care Co-ordination Programme implementation site, aiming to improve care co-ordination for people with dementia and their carers.

Inverclyde was significantly affected during the first wave of the pandemic. Challenges for the delivery of Health, Social Care, Third Sector and Community Services required change in how services and supports operated. This also led to the suspension of the Dementia Care Co-ordination programme for six months in March 2020.

When the programme was reactivated we consulted with our stakeholders again, and during this time some highlighted their experiences during the pandemic and how the local community had responded. They shared rich examples of the lessons learned and local innovations and, while this is not related to the Dementia Care Co-ordination Programme, there was agreement to collate and share a snapshot of their experiences within Inverclyde that many other areas across Scotland will recognise. Examples provided are how people in Inverclyde were supported and includes people with dementia, people with learning disabilities and people living in care homes. The examples outlined here focus on the delivery of Health and Social Care Services, staff experiences and wellbeing, the role of technology, the experiences of people with dementia and their carers, and the role of the third sector and local community.



For more information on Dementia Care Co-ordination visit the [programme website](#).

Delivering Services during COVID-19

Health and social care services adapted their normal operating procedures in response to the first wave of the pandemic, prioritising services and support for those with critical and substantial need. Non-essential face to face services and support were suspended or had to be adapted because of lockdown restrictions. This created challenges such as closure of day care and respite services, increased waiting times for non-essential services and visiting restrictions in care homes and inpatient services, separating families. Here is a snapshot of how some services addressed these challenges.

Learning Disability Services

- Occupational Therapists provided home activity packs in easy-read format to help people stay active and well at home.
- The Fitzgerald Team provided alternative services while the day centre was closed. They co-ordinated hot meal delivery and some home care services.
- Small dedicated teams provided support for individuals with advanced dementia in supported living settings. This reduced the risk of COVID-19 exposure, provided consistency of care provider and the service users remained calm and happy.
- Developed easy-read guides explaining COVID-19 lockdown restrictions.
- Used technology such as smartphones and tablets to keep in touch with those who did not have support at home.

Glenfield and Bagatelle Care Homes

- Introduced headphones and microphones to improve communication between residents and their visitors who had to wear PPE and socially distance.
- Created a new physiotherapy department to help residents with movement, as access to communal spaces was restricted. This new department worked alongside the existing activities department and all activities had a physical focus, for example, exercising in the corridors, dancing and doing housework. This whole home approach involves all staff, with housekeepers encouraging residents to help with housework, catering staff encouraging residents to walk to the trolley and pick their own cake, and nurses encouraging residents to walk to the medicine trolley. A focus on movement within everyday activities was resulted in good outcomes for the residents.

Dementia Services

- Put steps into place to safely re-establish the Post Diagnostic Support (PDS) Service. Remote IT access from home was arranged to facilitate continued telephone or online interventions instead of usual face to face interventions in the service user's home.
- Provided written information to people living with dementia and their carers who were on the waiting list for the PDS service, regarding available supports and services during the pandemic.
- Inverclyde's Alzheimer Scotland Resource Centre continued to provide support for people living with dementia and their carers by telephone and online platforms.
- Nursing and support staff continued to carry out memory assessments.
- The Older People's Mental Health team carried out keep in touch telephone calls with their patients.

Orchard View

- Ensured carer and family involvement in ward rounds using virtual technology.
- Used virtual technology on tablets to ensure person centred visiting continued.
- Used Stimulated Presence Therapy, which involves recording a personalised video from family members and uploading these onto a tablet. Staff then played the videos when the person living with dementia was distressed or agitated.

Further information on the response to COVID-19 within Inverclyde is available on the [Inverclyde HSCP website](#).

Workplace Wellbeing Matters: A Wellbeing & Resilience Delivery Plan for Inverclyde's Health & Social Care Workforce

Inverclyde recognises that staff are their biggest asset and that health and social care services have been impacted by the pandemic. In order to support staff, staff engagement and consultation was undertaken to identify what was important to them based on their experiences during the pandemic. This information was used to inform the Wellbeing and Resilience Delivery Plan, developed to support and sustain an effective, resilient, and valued health and social care workforce.

Inverclyde Staff Wellbeing Task Group

A task group was established to oversee and implement national and local staff wellbeing work. Actions from the task group included:

- 191 Care at Home staff received wellbeing telephone calls and were signposted to support.
- A staff wellbeing and agile working survey was carried out by a separate team.
- 54 members of staff provided feedback through focus groups and online questionnaires.
- Local Staff Wellbeing Champions were identified to link with National and GGC wellbeing groups.

A number of improvement activities have been identified and are summarised in the Wellbeing and Resilience Delivery Plan Driver Diagram and within the [Inverclyde Wellbeing Delivery Plan](#).

WORKPLACE WELLBEING MATTERS (INVERCLYDE'S WELLBEING & RESILIENCE DELIVERY PLAN DRIVER DIAGRAM)					
Outcome	Primary Drivers		Secondary Drivers	Change Ideas	Measures
Across Inverclyde we will deliver on integrated and collaborative approaches to support and sustain effective, resilient, and valued health and social care workforce	Embed and support organisational cultures, where all staff are valued	←	Communication Plan Staff Wellbeing message embedded into all work streams Build on and develop further work to date	Well being campaign (email tagline with links to support) Enable all staff to promote kindness/supportive workplaces Impact on staff wellbeing is actively considered in all our work.	Measure improvement in sickness absence relating to mental health and stress, staff surveys, iMatter, user group feedback Pulse surveys
	Staff Feel Safe in their Workplaces	←	Confidence in PPE Understanding workplace guidelines Risk assessment skills/tasks	Clear and consistent guidance ease of access Message safety everyone's responsibility Promote & recruit workplace Health and Safety Ambassador role	Monitoring PPE availability Staff feedback around confidence in safety Increase number of workplace reps Development and uptake of environmental risk assessment training in teams
	Staff maintain a sense of connectedness to their team, line manager and organisation	←	Staff feel engaged not isolated All Staff roles valued Team Identity Valued	Training frontline managers in Staff Resilience and supported teams Opportunities for peer support Increase social opportunities	Uptake of training Staff feedback, good practice examples shared, Dedicated time for peer support and team connections (audit across teams) (QI approach)
	Staff, where possible, have the tools and resources to work flexibly (Home, Office, and Community)	←	IT solutions available to all Managers have flexibility to support creative work Learning around new ways of working bedded in.	Link with digital strategy and employ whole systems operational approach Test of change around IT opportunities in practice Address gaps in IT training to ensure no opportunities to modernise are missed.	Evaluate and build business case for enhanced systems such as -Attend anywhere, 4G connection access to recording systems. Monitor access across services
	Staff have access to information and resources, which sustains and improves their wellbeing	←	Ease of Access to Information Working Knowledge of resources Staff understand that peer support is instrumental to recovery	Central and accessible repository of information (communication strategy) Easy read literature Promotion of Psychological first aid approach	Uptake of National training Staff feedback measure Championing within teams

Driver Diagram for Workplace Wellbeing Matters:
Inverclyde's Wellbeing and Resilience Delivery Plan

Across Inverclyde we will deliver on integrated and collaborative approaches to support and sustain effective, resilient, and a valued health and social care workforce.

Overarching aim of the Workplace Wellbeing Matters: Inverclyde's Wellbeing and Resilience Delivery Plan

The Role of Technology

A common theme when looking at lessons learned and innovation during the first wave of the pandemic is the important role of technology. Examples include delivering services and support through telephone and online platforms, keeping staff and service users connected, enhancing communication, facilitating flexible working and remote access and supporting independent living. Here are some examples where technology was used.

Telephone

Keep-in-touch calls for service users, people who were isolated or shielding, as well as local wellbeing calls to staff.

"Although IT is important, the role of telephones was also important, as everyone knows how to use them."

(Carer, Dementia Reference Group)



Online Platforms

Near Me online platform used to deliver services and support. This required service users & staff to have access to IT equipment and knowledge of how to use this.



Support groups and services

Organisations are continuing to provide community support using technology. For example Alzheimer Scotland in Inverclyde arranged the following via online platforms:

- Dementia reference group
- carer support groups
- weekly football memory discussions, and
- weekly friendship groups.



Staff remote access and virtual meetings

Staff across Health, Social Care, third sector and community services within Inverclyde had to change how they worked. Those who had appropriate IT kit were able to work from home and access meetings via online platforms. This worked well when staff had the right IT equipment and knew how to use it.



Technology enabled support and communication aids

These were used to support communication with family members in care homes and inpatient services.

Using Technology Enabled Care promoted independence and exercise.



Inverclyde Dementia Reference Group: experiences during a pandemic

The Inverclyde Dementia reference group is jointly co-ordinated and facilitated by [Your Voice](#) and [Alzheimer Scotland](#). The group is for people living with dementia and their carers. It is a place where stories, experiences, ideas and coping strategies are shared. It was agreed that the Dementia reference group would oversee and inform the Inverclyde Dementia Care Co-ordination Programme. Here is a summary of the group's experiences during the initial lockdown:

Loneliness

Loneliness was discussed due to loss of social interaction with others, in particular when community support was discontinued. Having to stay at home was difficult for the person living with dementia and they felt lost a lot of the time.

"It's been a very long 20 weeks or so. I suppose the biggest factor was not having the social contact that we were used to...we missed the groups and our church, we really were cut off from everything and this definitely made the whole experience a lot less pleasant."

"It has been an inconvenience, I felt lonely with not being able to go out, and no-one allowed to come in. For the first 6 weeks I had no internet and no TV as no one was able to come out to fix it.... I coped okay though; and was eventually fortunate enough to be able to speak with my son every day using my iPad".

"In general, it was lonely during the peak period...there was no pleasure, no enjoyment... it became very stressful at times."

Caring responsibilities

Because of their caring commitments and lack of social interaction with others, carers expressed that they had no 'me time'.

Due to the lockdown restrictions one carer did not get help from others to carry out their daily chores. They described this like being on a 'hamster wheel' and were exhausted by the end of the day. There were also concerns about what would happen to the person they cared for if the carer became unwell, in particular if the reason was related to COVID-19, and who would look after the person they cared for.



What helped

The availability of IT was described as a 'life saver', allowing connection to family and friends. Although IT was seen as important, the role of telephones was also important and it was acknowledged that everyone knows how to use them. A challenge was that some did not know how to use IT systems.

The support provided by Alzheimer Scotland, their neighbours and the wider community were valued by the group.

"It's brought the community closer together."

"People have generally been nicer to one another...there really has been a good community spirit."

Third Sector and Community Response

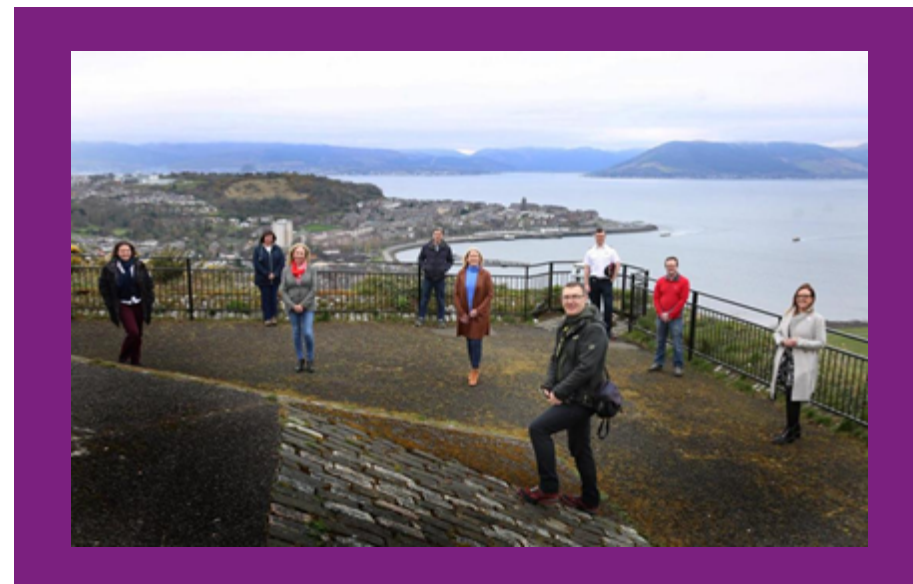
The role of third sector organisations and the local community was significant during the initial period of lockdown. The Inverclyde Community Action Response Group was set up by local campaigners. The group included Belville Community Garden, Branchton Community Centre, CVS, Your Voice, the Trust, Inverkip Hub, Compassionate Inverclyde, Mind Mosaic Counselling and Therapy and local community volunteers. Partners came together to assist older and vulnerable people who were shielding or were unable to leave home during the pandemic. The group also arranged support for frontline key workers through a dedicated helpline run by counselling experts Mind Mosaic.

A snapshot of the group's achievements:

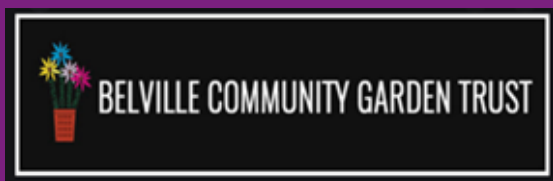
- 1,070 prescriptions were collected
- 27,232 meals were distributed to those who needed them
- 4,059 food boxes were distributed to those who needed them
- 8,683 keep-in-touch calls were made
- 67 shielding toiletry bags were distributed
- 95 'lifeline grocery' deliveries for those who were self-isolating



37,224 volunteer hours across 5 months of COVID-19 support – 24.2 years of effort



Some of the partners involved in the response



Other third sector support

Third sector services also had to adapt their services and support during the pandemic. The following are examples of what was achieved.



Inverclyde Carers Centre is a dedicated service that identifies and supports unpaid Carers. During the pandemic they:

- Continued to stay in touch and provide support and services for local carers either online, via telephone or text.
- Introduced a befriending service where carers were trained to support other carers and share their own experiences
- Supplied PPE for carers
- Provided funding for the provision of alternative short breaks, and are continuing to do so, allowing carers to have sufficient and regular periods away from their caring routines or responsibilities. Examples included supplying walking boots, tablets, fitness equipment and garden equipment.



Alzheimer Scotland is a national dementia charity. They aim to ensure no one faces dementia alone and provide support and information for people with dementia, their carers and families. With the Inverclyde Dementia Resource Centre, during the pandemic they:

- Provided regular telephone & video call support
- Facilitated support groups & activities online to keep people connected.
- Provided information and advice about dementia diagnosis through their Local Dementia Advisor.
- Co-hosted the Dementia Reference Group with Your Voice and collated feedback on their experiences during lockdown.
- Successfully applied for iPads through the Connecting Scotland Programme, distributed to those who required them.

Your Voice Community Care Forum brings together a collective voice of voluntary, community groups, service users and carers to be heard in the planning and provision of community care services in Inverclyde. During the pandemic they:

- Provided support & isolation calls from their Community Connectors
- Co-hosted the Dementia Reference Group with Alzheimer Scotland, obtaining feedback on the group's experiences during lockdown. This was shared locally and nationally, informing COVID-19 recovery planning.
- Provided online activities, quizzes and support groups.
- Collated feedback from 126 people in the local community about their experiences during lockdown.



CVS Inverclyde has a key role in co-ordinating the community and third sector's response to the pandemic. This is in partnership with Inverclyde's Third Sector, the HSCP & Council, Housing Associations, Scottish Government and the local community.

During the pandemic they:

- Supported people across Inverclyde who were shielding
- Created a helpline for residents in need during the pandemic, in partnership with Inverclyde Council.
- Recruited 319 volunteers since 18 March 2020
- Arranged for Inverclyde's Community Link Workers to help the local community through the use of technology such as phone calls, video calls and text messaging.



Compassionate Inverclyde

The Compassionate Inverclyde project enables ordinary people to help ordinary people, guided by the community values of being kind, helpful and neighbourly. The project aims to help transform attitudes and everyday practices around loneliness, social isolation, death and bereavement across Inverclyde.

Find more information on the [Compassionate Inverclyde - Ardgowan Hospice website](#).

Between 17 March and 31 July 2020 Compassionate Inverclyde supplied items to patients and staff within Inverclyde Royal Hospital and the wider Inverclyde community. All items were donated by Inverclyde residents and businesses.



Ordinary people helping ordinary people
Compassionate Inverclyde

Some of the items donated



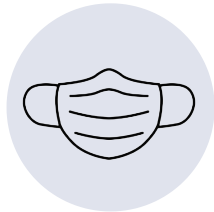
197

back home boxes



327

isolation boxes



183

face masks



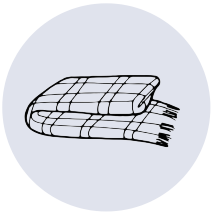
25

pairs of socks



895

pyjamas



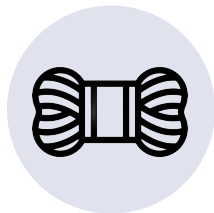
119

blankets



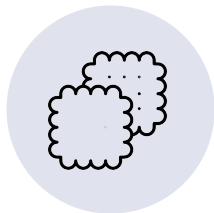
238

Greenock
Telegraphs



25

bags of wool



419

packets of biscuits



596

toiletry items



58

packs of sweets



675

bottles of juice