

The Health and Social Care ALLIANCE Scotland

# Self Management Fund

2019-2020

## learning report 2

*August 2020*

Focus on:

- ▶ Change
- ▶ Resilience
- ▶ Connections
- ▶ Social Care Integration
- ▶ Emerging themes

 **Evaluation  
Support  
Scotland**



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# Background

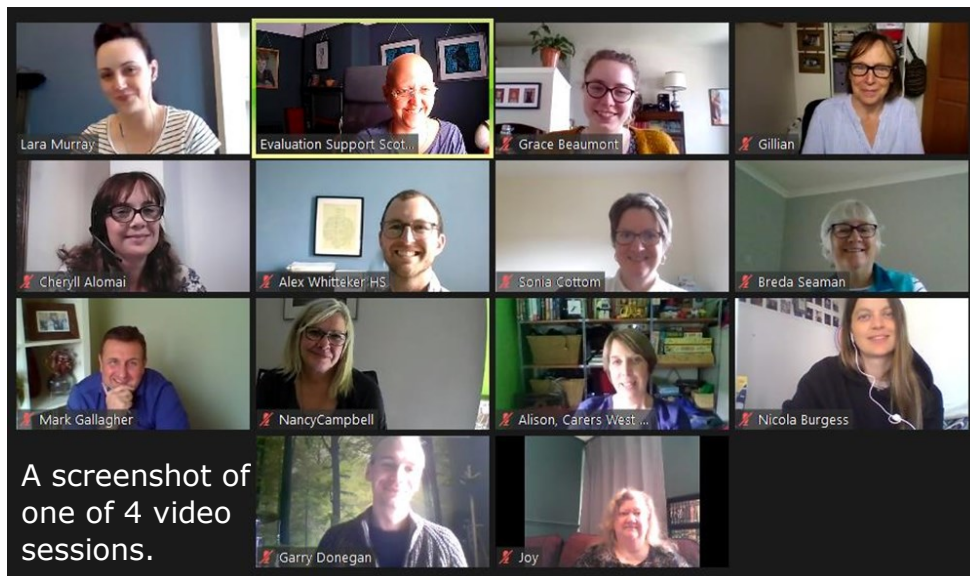
In 2019 the Self Management Fund, a Scottish Government Fund administered by The Health and Social Care Alliance Scotland (The ALLIANCE), awarded grants to **53 projects**.

Instead of writing traditional self-evaluation reports\*, projects have been asked to share their learning by:

- ♦ completing a series of online questionnaires
- ♦ participating in one of four 2-hour online video discussion sessions
- ♦ submitting short financial and activity monitoring reports to The ALLIANCE.

The aim is to generate **shared learning** from a cohort of funded projects in a way that is **easy to use and disseminate**. There is the added benefit of supporting projects to get to know and support each other. This way of working has been adapted from the successful pilot by the Self Management Fund last year (which involved face-to-face learning days) in the light of COVID-19 restrictions.

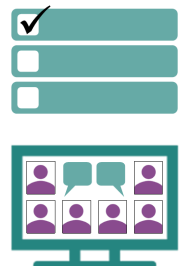
*\*1 project has elected to submit a standard written report & 6 projects have been paused during lockdown.*



Working with the Fund Manager to identify key areas of interest, Evaluation Support Scotland devises the questionnaires, uses the responses to inform the online sessions, analyses the information gathered and writes the resulting reports. Projects have the opportunity to check their experiences are represented before the reports are finalised.

This second report is based on:

- ♦ responses to the second questionnaire sent out in June 2020 (44 projects)
- ♦ small group video discussions between projects in July 2020 to explore emerging themes in more detail, with each group capturing their thoughts using Google Forms (45 participants from 41 projects)



## *Funded Projects 2019-20*

<b>Organisation</b>	<b>Project</b>
Aberdeen Alcohol and Drugs Action	<i>Trauma Informed Practice (TIP)</i>
Alzheimer Scotland	
Anam Cara	
Argyll & the Isles Coast & Countryside Trust	<i>ACT Outdoors</i>
Befrienders Highland	<i>Befrienders Highland Memory and Carer Service</i>
Bipolar Scotland	<i>Self Management Peer Support</i>
Cancer Support Scotland	<i>Cancer Support Scotland</i>
Carers Link East Dunbartonshire	<i>Working Together to Strengthen Integration</i>
Carers of West Lothian	<i>Locality based self management</i>
Carers Scotland and Coalition for Carers	<i>Equal, Expert and Supported (training for carer representatives)</i>
Centrestage Communities	<i>Centrestage Communities</i>
Clackmannanshire Citizens Advice Bureau	<i>Clacks CAB Outreach Project</i>
Clydesdale Community Initiatives	
CTSI/ SVE	<i>Public Health Champions</i>
CVO East Ayrshire	<i>The HART (Home Activity Real Talk) Project</i>
Deaf Links	<i>Deaf Links</i>
Dunblane Development Trust	<i>Dementia Friendly Dunblane</i>
Eczema Outreach Support	<i>SPACE Programme (Support Programme for Adolescents with Chronic Eczema)</i>
Fife Employment Access Trust	<i>Fife Employment Access Trust Cognitive Remediation Therapy</i>
Fife Voluntary Action	<i>Mental Health Peer Support Network Coordinator</i>
Haemophilia Scotland	<i>Haemophilia Scotland Self-Management Project</i>
Health in Mind	<i>iThrive Edinburgh</i>
Hearing Link	
Healthy n Happy Community Development Trust	<i>Blue to Green</i>
Highland Children and Young People's Forum (HCYPF)	<i>Co-design and Development of a Digital Self-management Tool in Partnership with Children and Young People with Additional Support Needs</i>
Impact Arts (Projects) Ltd	<i>Craft Cafe Govan</i>

*Funded Projects 2019-20 (cont.)*

<b>Organisation</b>	<b>Project</b>
Leuchie House	
LGBT Health and Wellbeing	<i>LGBT Self-Management Project</i>
Macmillan Cancer Support	<i>Macmillan My Data Store Pilot</i>
Maggie's Cancer Caring Centre - Glasgow	<i>Living well with cancer in older age</i>
Mental Health Foundation	<i>What I Need to Tell You</i>
MS Society Scotland	<i>Lanarkshire Project</i>
MS Therapy Centre Lothian	<i>Development of an holistic and inclusive fatigue management programme</i>
National Rheumatoid Arthritis Society	<i>On line self management</i>
Options in Life	<i>Options in Life Social Enterprise Coffee Shop</i>
Pain Association Scotland	<i>Self-management for Carers</i>
Pain Concern	<i>NHS Online Forums Project</i>
PAMIS	<i>PAMIS</i>
Parkinson's UK Scotland	<i>Parkinson's Connect</i>
Penumbra	
Perth Autism Support	<i>Supporting Anxiety in Young Adults</i>
Pillar Kincardine	<i>Pillar Kincardine</i>
Recovery Enterprises Scotland	<i>Recovery Enterprises Scotland</i>
Rowan Alba Ltd CARDS	<i>CARDS Cafe</i>
Scottish Union of Supported Employment	
S.I.S.G Enterprises Ltd (Charity)	<i>Reducing Loneliness &amp; Developing Management of Stress for Older People with Sensory Loss</i>
Spina Bifida Hydrocephalus Scotland	<i>Health &amp; Wellbeing Clinic</i>
Support in Mind Scotland	<i>Caring Connections</i>
The Braveheart Association	<i>My Health For Life</i>
The Moira Anderson Foundation	<i>Glasgow Satellite Service</i>
Voluntary Action South Ayrshire	
Wellbeing Scotland	<i>Wellbeing Scotland</i>
West Dunbartonshire CVS	

# The Current Mood

In **ONE WORD** - how do you **currently** feel about your project?

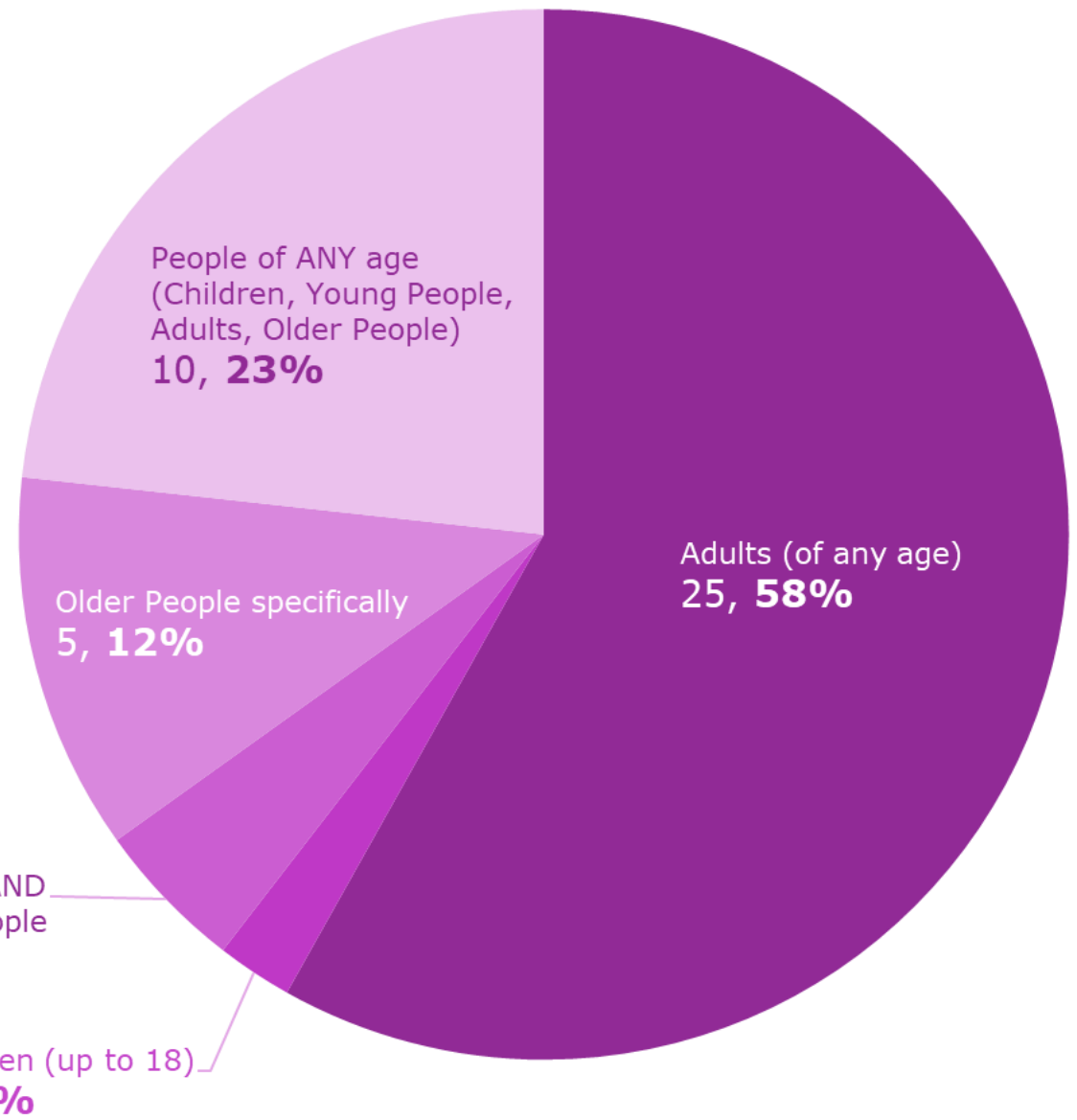


The bigger the word, the more often it was used.  
[Compare with p4 of 1st report (April 2020).]



# Who do projects work with?

## Age criteria



Total responses: 44

5 respondents answered "other".

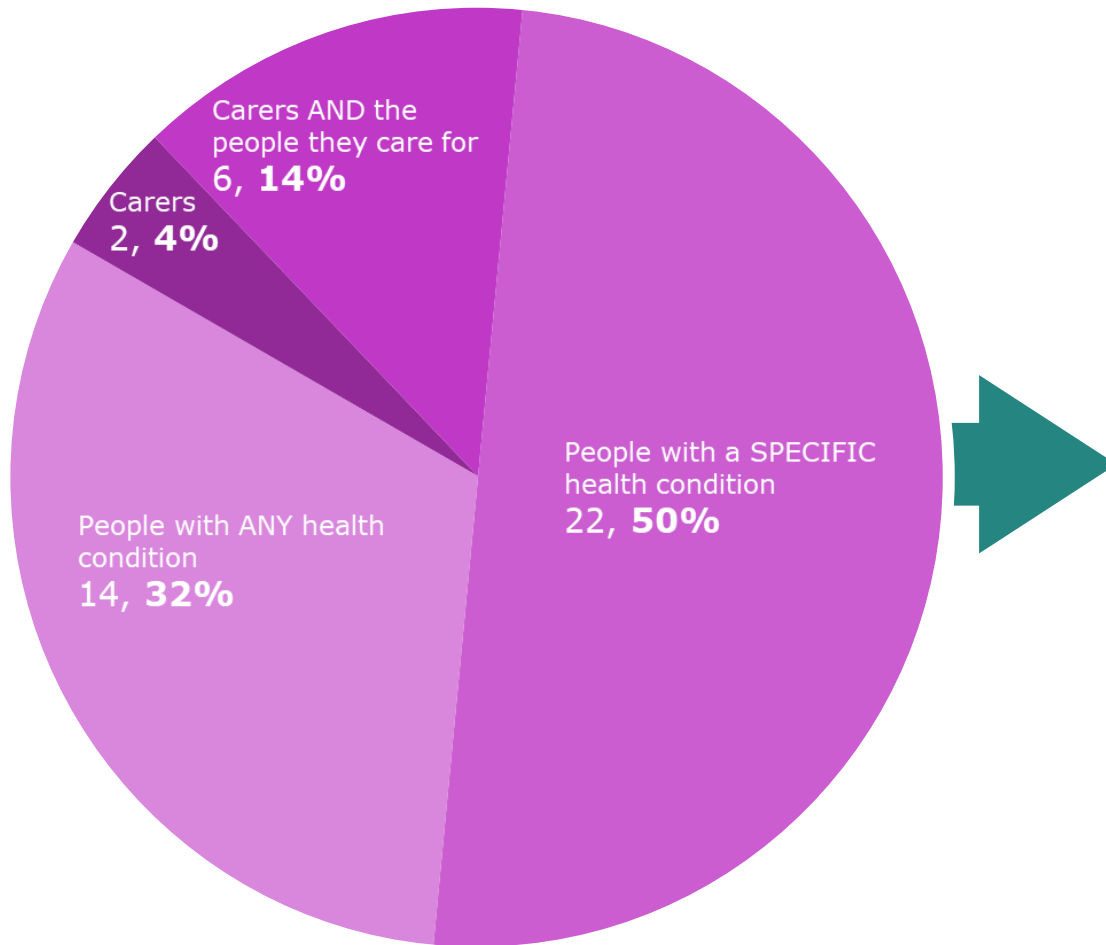
4 were easily reclassified as "Adults (of any age)".

1 could not be reclassified and has been excluded.

**43 responses included in this chart.**



# Health Condition criteria



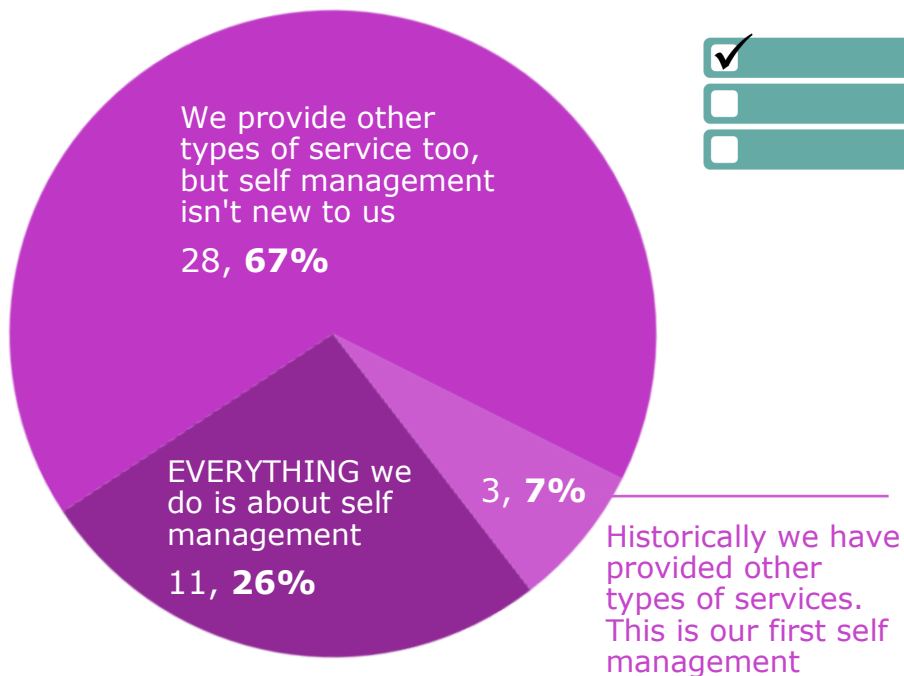
## Specific health conditions (22 projects) - detail...

mental health condition 7		
autism / Asperger's Syndrome 2	cancer 2	sensory loss 2
addictions 1	eczema 1	Parkinson's 1
chronic pain 1	haemophilia 1	rheumatoid arthritis 1
diabetes 1	MS 1	spina bifida and/or hydrocephalus 1

- 
- 
-



# Why Self Management?



Total responses: 44

3 respondents answered "other".

1 was easily reclassified as "Everything we do is about self management".

2 could not be reclassified and have been excluded.

**42 responses included in this chart.**

Projects were also asked to **describe** why they wanted to deliver a self management project. The following quotes are illustrative. All responses have been shared with The ALLIANCE.

**Key themes** include personalisation, independence, empowerment, prevention, reach and sustainability.

## Personalisation

Self management helps to centralise the voice of the person being supported. Supporting each person through the process of recognising and managing their feelings and experiences in a way that works for them, rather than prescribing what they 'must do' to feel better.

## Independence

To enable children and young people to have a sense of agency... in their own wellbeing, working out what they might want or hope to achieve and recognising their progress towards this.

## Empowerment

People can take control and build their resilience so they can lead fulfilling lives and make informed decisions around their support.

The person is an active participant in their recovery, rather than someone who simply follows recommendations and complies with the treatment plan developed by a health professional.

The feeling of vulnerability can be mitigated by having knowledge and resources and confidence to use them.

## Prevention

[People are] more able to identify when and how to seek the appropriate support from statutory and other bodies.

[It] doesn't mean they will never need more support, but it does mean that each person leaves with... knowledge, confidence or both.

To... prevent young people from reaching crisis.

Since many of these conditions are lifestyle related, the quality of self-management is important.

## Reach

Through demonstrating change is possible this offers hope and motivation to many others

## Sustainability

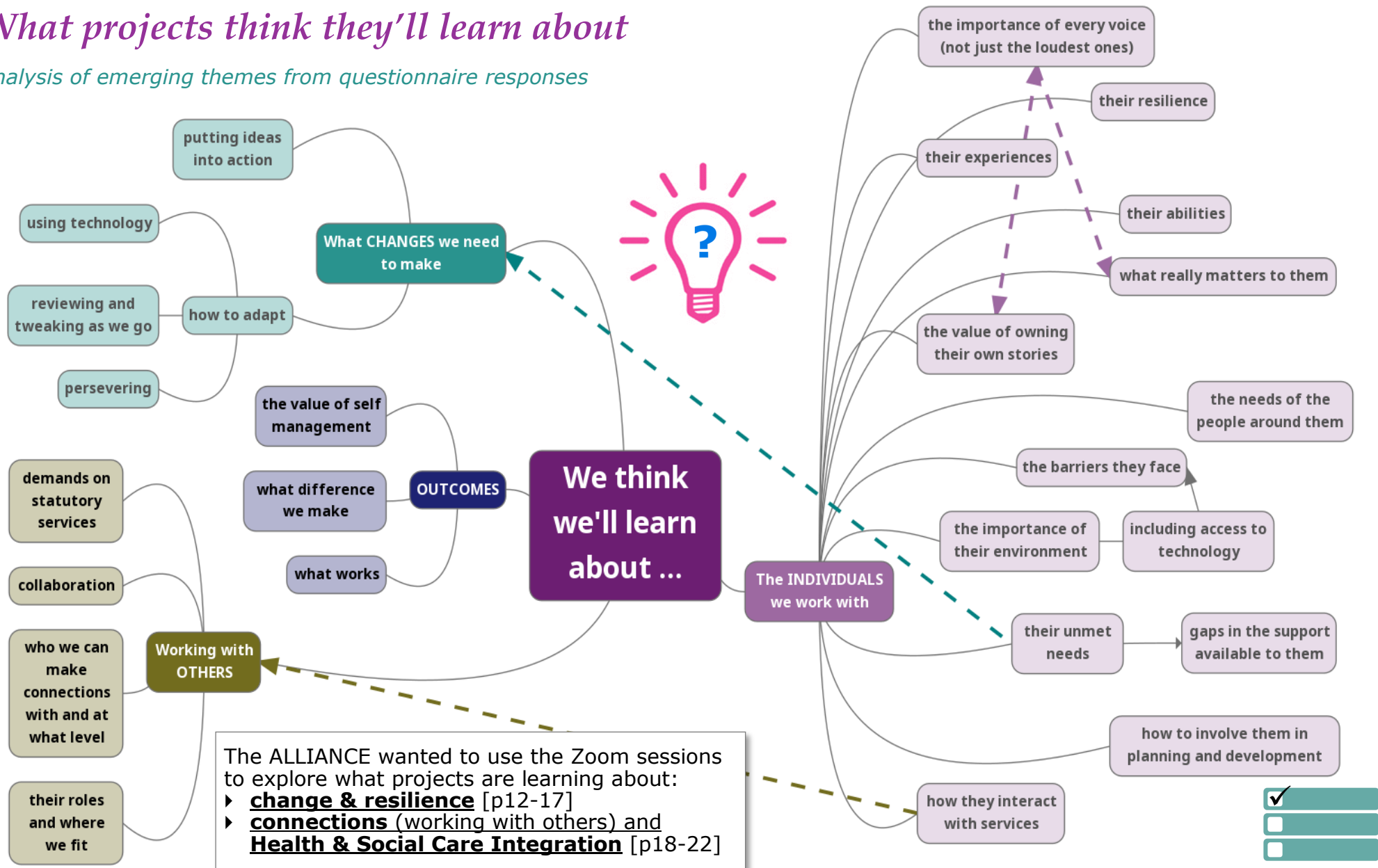
This results in a longer term more sustainable model of support.

Unless we change the way we do things now, more and more people... won't get the support they need.

# Learning

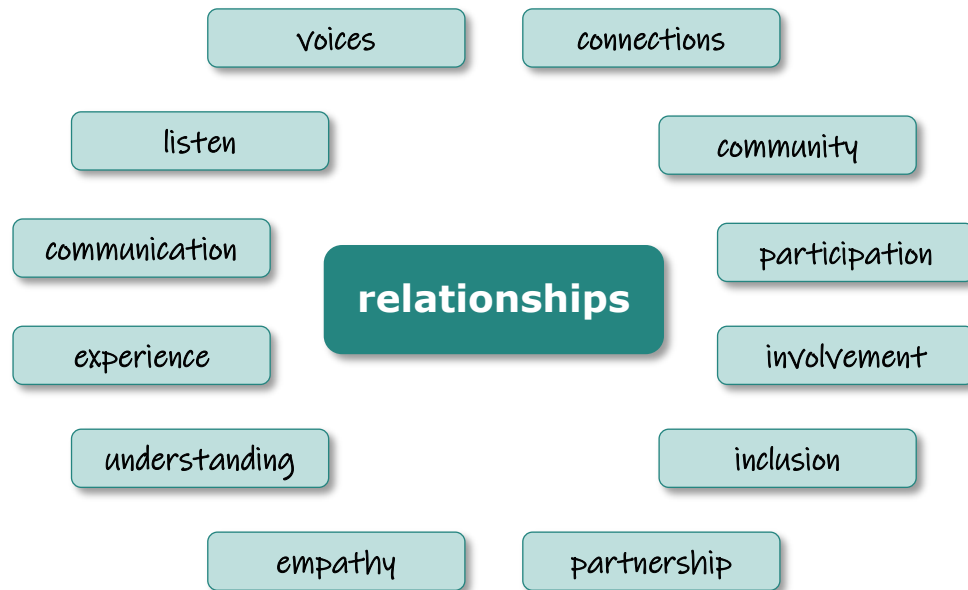
## What projects think they'll learn about

analysis of emerging themes from questionnaire responses



## Learning for The ALLIANCE

Projects were asked for 1 bit of learning they particularly wanted to share with The ALLIANCE. **All** responses have been forwarded. Two themes in particular stood out:



### Relationships

Individuals... have experienced reduced feelings of isolation and reduced stress... through making these new connections/relationships and learning how to cope.

We have found a network of local people that wish to volunteer with us and share and be part of our work, when at first we felt judged by the locals and not entirely welcome.

Often, younger volunteers from these groups can be a useful support mechanism that can help break down barriers and give older people the confidence to engage.

It became apparent that one or two... who chose to progress into this group did so as a means of maintaining the peer relationships that had become part of their structure and routine and not necessarily because they were ready for next steps in their recovery.

By inviting open, honest communication with those participating, we were able to successfully deliver a virtual programme.

Our participants created a phone tree for each other who they feel need additional connections out with what we are able to provide.

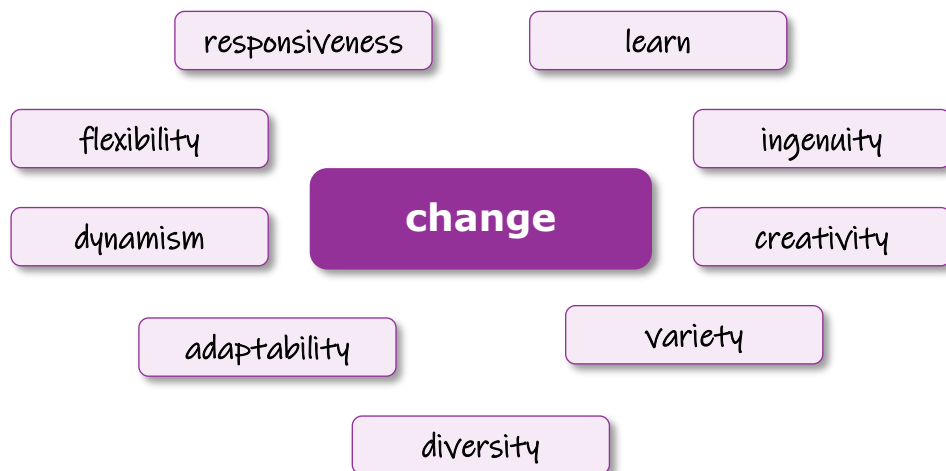
### Change

We knew we could not deliver the project that we were funded for. It was heartening that the Alliance understood this and were willing to continue funding a change in direction.

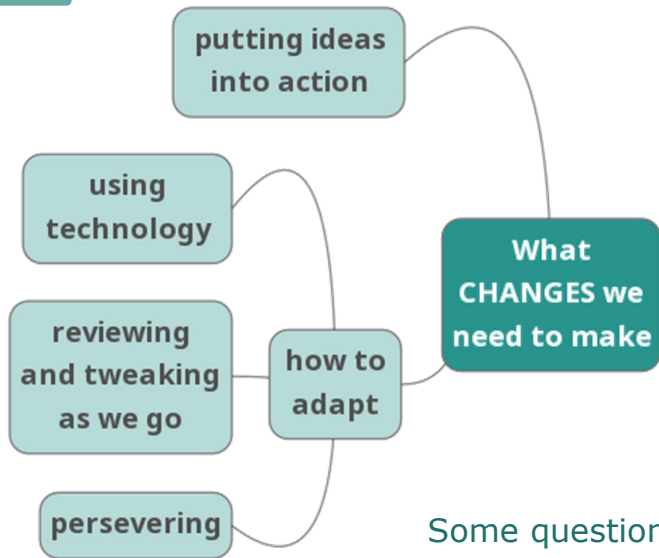
That there needs to be a range of supports for young people and services need to be flexible in their approach.

The uncertainty of circumstances this year has highlighted that fixed term funding (1 year) model does not deliver a resilient project that can adapt and grow with circumstances.

Dynamism, flexibility, communication and ingenuity attribute to the continuing success of the project.



# Change & Resilience

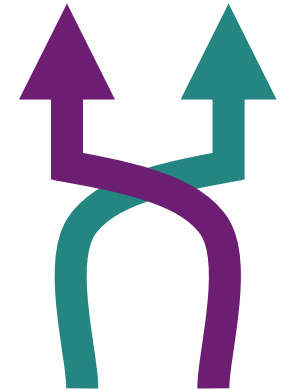


## Some questionnaire responses about **CHANGE**

How to *adapt quickly* in a crisis and continue to provide what support we can, in whatever way we can.

The importance of being *agile* in a complex world... with the *creativity* of staff and participants, and *support* from partners and funders.

*Things will change*: physical contact will be limited and we will need to embrace technology and provide support online or on the telephone.



## Some questionnaire responses about **RESILIENCE**

Due to the COVID-19 situation, I feel we're learning more about *carers' resilience to cope*. This was not an intended learning outcome!



Don't worry if you have to make *several attempts* until you achieve the desired goal.

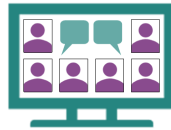
Through lockdown [the people we work with] have *taken ownership* of peer support. This has been very inspiring.

*Resilience of the community* in how they are currently coping with managing their condition.



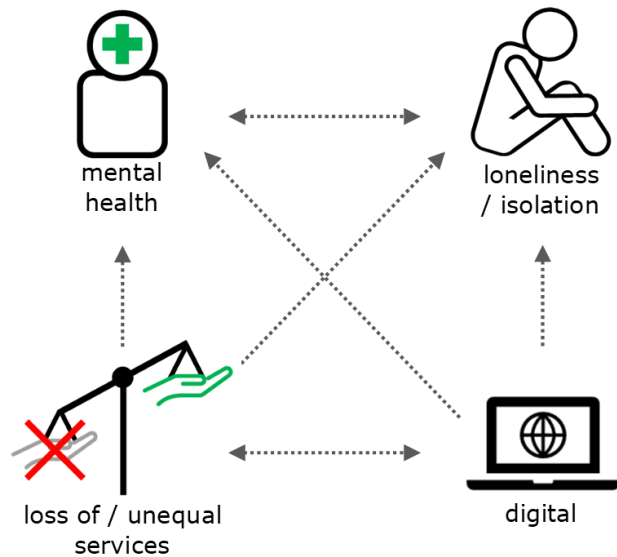
Participants were invited to use the video sessions to discuss what their projects have learned about **change** and **resilience**. They were given some prompt questions to consider, but were not expected to address them all:

- ◆ changes for the people they support
- ◆ emerging client groups
- ◆ changes for their projects
- ◆ changes in other services that support the same people
- ◆ their organisation's ability to adapt and/or its resilience
- ◆ community resilience (or its lack)



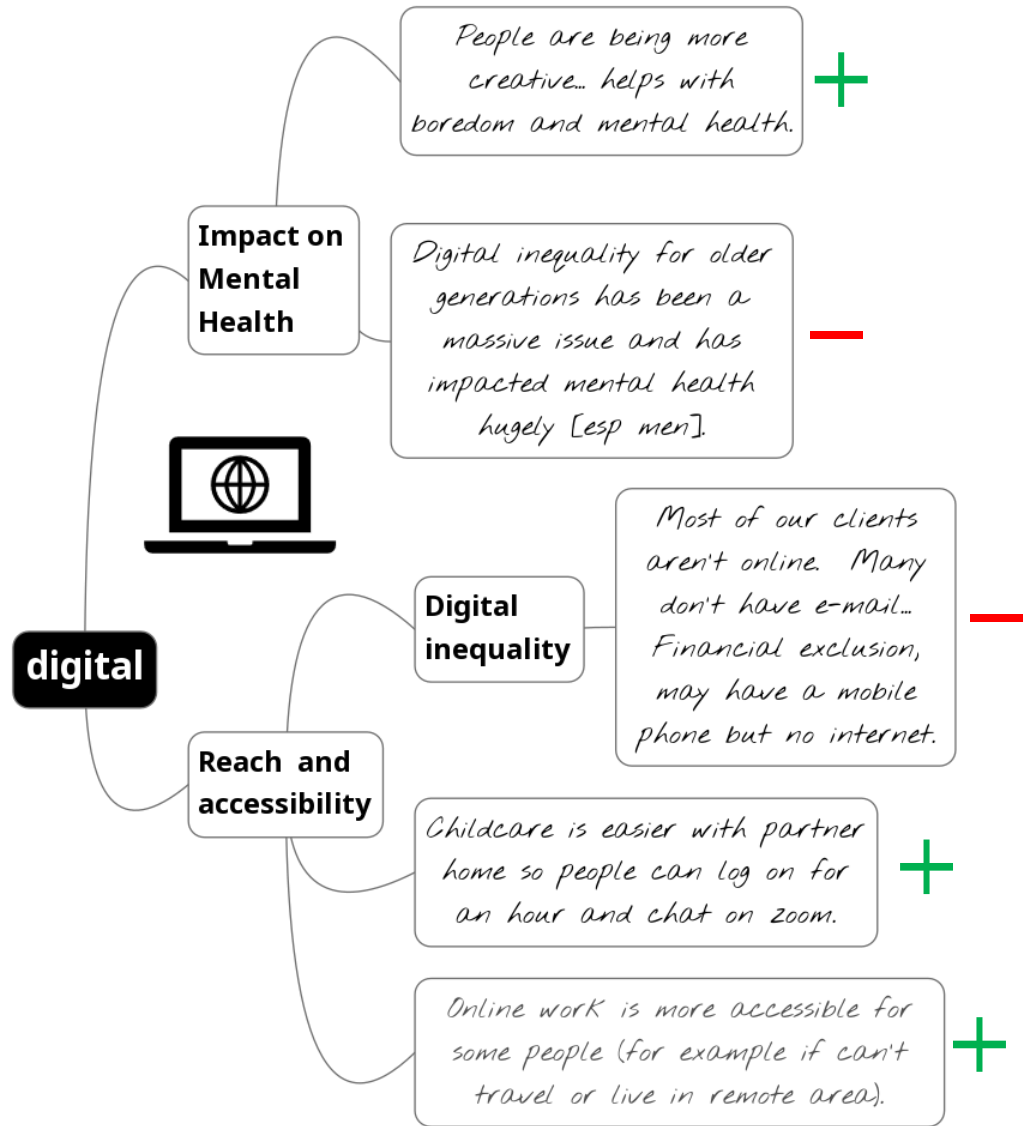
## Changes for the people projects support

4 interlinked themes emerged (most related to the pandemic):

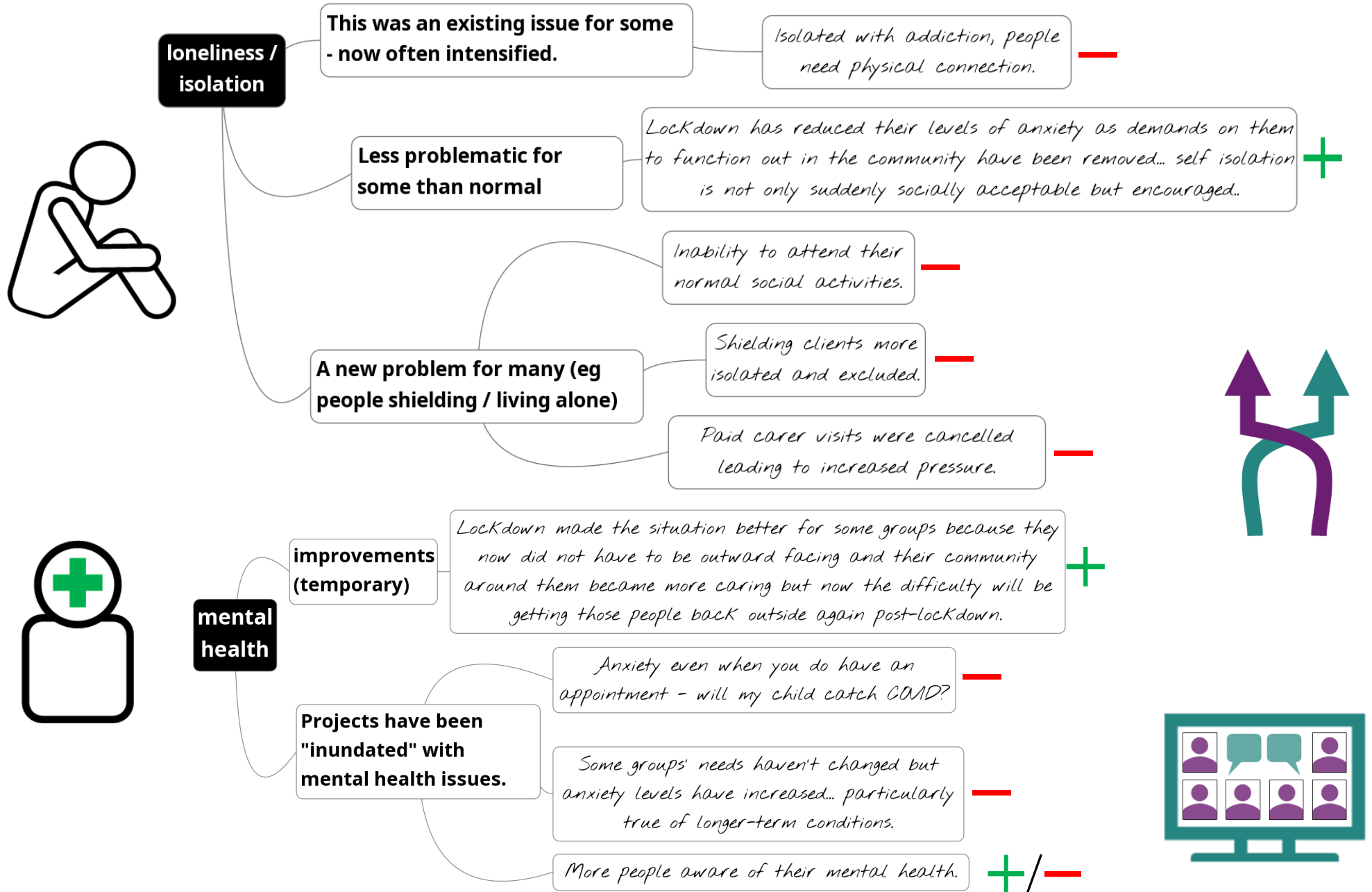


Each theme is expanded on the following pages, with examples of positive as well as negative changes.

## Changes for the people projects support (cont.)

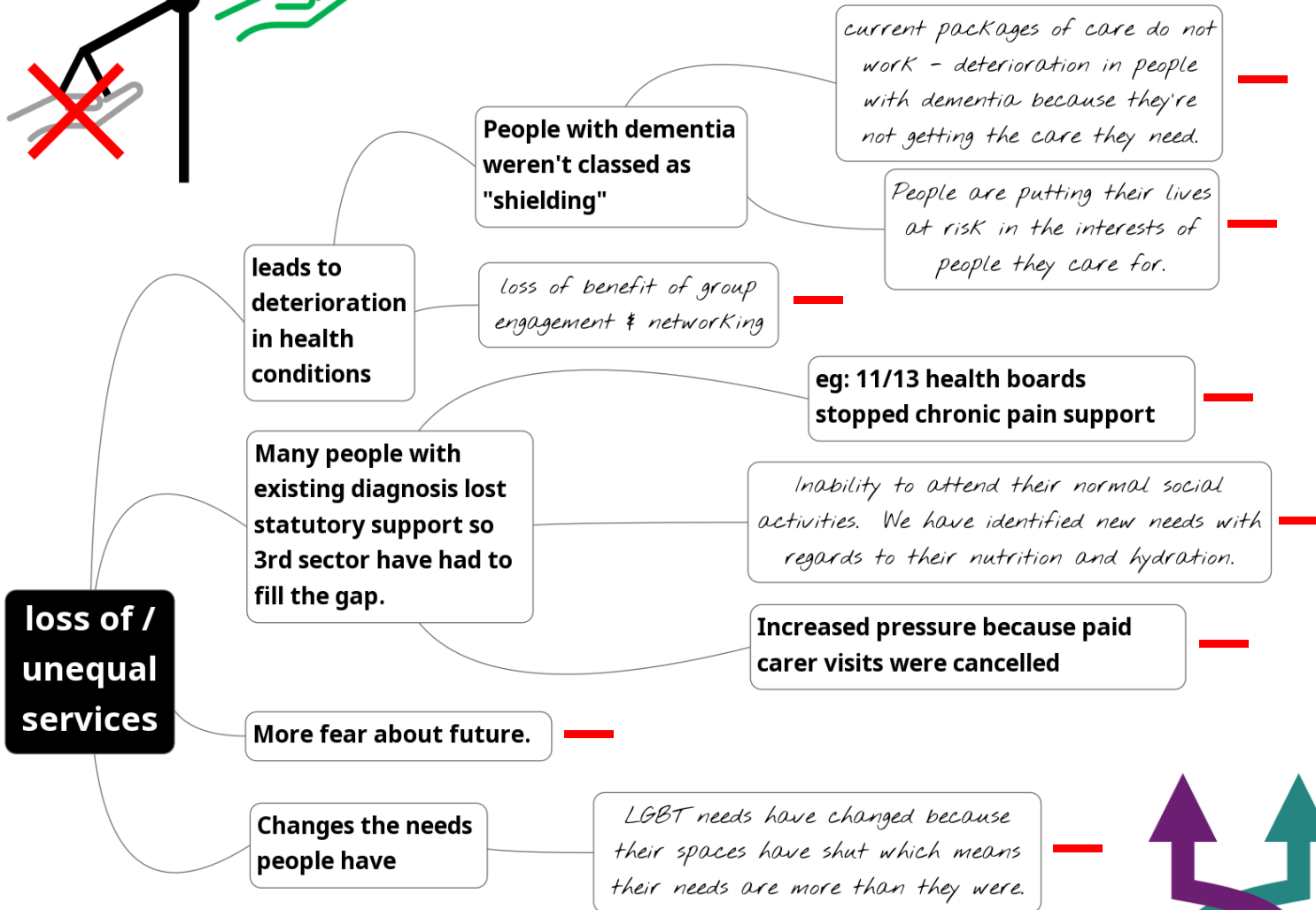
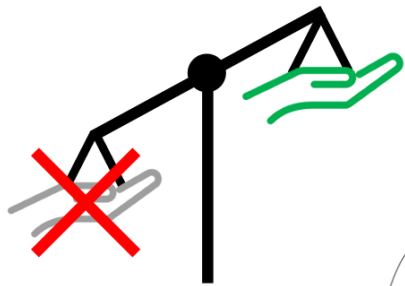


# Changes





## Changes for the people projects support (cont)



## Changes in other services

Diabolical - no access for sensory impairment, lack of accessible information. Assumptions that phonelines suit all.

Very stretched - redeployed (NHS) and/or furloughed and unobtainable (local authority).

Clients have reported less contact with their CPNs and social workers.

Have learned a lot about [this]... reduction in carer visits... sheltered housing managers working from home so no one on site to help with issues.





## Changes in demand and reach

Coming from different directions - not just the usual referrals.

### Referrals

**Increase** in referrals from statutory & 3rd sector - including for some people who were struggling to get a service before lockdown.

*Possibly due to everyone focussing on the implications of lockdown and having time to prioritise folk who had been slipping through the net?*

Stronger sense of **community** within 3rd sector & more broadly, eg: a referral via the local laundry. *We've had letters of kindness from young school kids and old folk are writing back. We're trying to create an infrastructure that works across the board.*

### Finding people

Doing more **online** makes some projects more visible resulting in greater engagement.

Reaching out through **community groups** that already have contact with people.

*We are stepping up where statutory services have shut down.*

Doing **different activities** (eg delivering food parcels) can reveal what the real need is - including for people without a diagnosis or who aren't already linked to any other services.

### Accessibility

**Online delivery** can reach some people who otherwise can't access services easily (and should be continued alongside other delivery methods).

*COVID shows us there are those who are getting left behind.*

Managed to reach people we wouldn't reach before.

## What helps and hinders change?



(funder) flexibility

willingness and creativity of staff and volunteers

knowing what's what and who's who in the local community

some people can't or won't access online services

lack of time to think and plan

## Has change been possible?

**Yes** In some ways [we have achieved] more than we thought possible.

*We have diversified and delivered a different service which basically delivered more or less what we intended.*

**No** All face-to-face work was paused.

**A bit** We have been able to deliver an alternative service achieving an element of our desired outcomes.

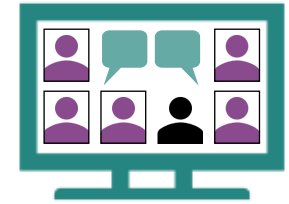
*We have tried to keep members connected through social media activities and discussions although, again this was only accessible to those who had digital access and capability.*



# Resilience

## In organisations

- ▶ Staff are also suffering from stress & isolation due to COVID. Their “safe spaces” at home are being invaded by having to work there.
- ▶ Zoom meetings can increase organisational connectedness.
- ▶ Very steep learning curve.
- ▶ Number of new volunteers coming forward can be overwhelming.



## Community

- ▶ Huge increase in volunteers.
- ▶ Learned how strong some peer support networks are
- ▶ Increased mental ill health can delay when people are ready to participate.
- ▶ People incredibly appreciative of smallest things done to support them - they can make the biggest difference.
- ▶ Smaller communities are excelling at meeting basic needs (eg supplies & support).
- ▶ Community resilience is down to connections with people - so those connections need to be built. Lots of volunteers came forward - can they help build connections?
- ▶ Few projects had much if any knowledge about local leadership for community resilience.

Language is important. Vulnerable, chaotic, at risk and difficult to engage with needs to be acknowledged then changed into resilient, resourceful, ingenious and charismatic.

## What could The ALLIANCE do to HELP with change and/or resilience?

*Be understanding that some projects have had to be put on hold due to the current situation and also that staff are dealing with unprecedented demands on their time so would appreciate not feeling more pressure from another source.*

*The opportunity to apply for project extension is ideal because it would help to see us through the lockdown exit phases and it would enable us to get back on our feet whilst the overall funding picture needs to settle down again.*

*Be flexible with project end dates due to the impact of covid-19.*

*It will take time for us to re-establish connections and it's helpful to know that there has already been an offer of extension of time to regroup in whatever the new normal turns out to be.*

*Learn from Covid-19 experience that people with dementia should not be excluded from national guidelines regarding shielding and isolating. Carers lives matter.*

The ALLIANCE has offered all projects the opportunity of a 6 month extension with the option of up to an additional £5,000 funding in response to the pandemic.



# Connections & Integration

## Some questionnaire responses about **CONNECTIONS**

We have not been able to link anyone into the community groups as they have paused their activities.

More local organisations are providing support and signposting [due to COVID].

[Local groups and] business are all keen to support the elderly in the community.

Some areas of Scotland are more willing to engage... than others. Possibly geographical as our quarterly meetings are held in Lanarkshire – health boards nearer to there are more willing.

30 projects chose “**more connected**” as one of their outcome themes (3<sup>rd</sup> most popular theme - see p35)



## Some questionnaire responses about **INTEGRATION**

In some areas there are too few OTs and CPNs to engage with us.

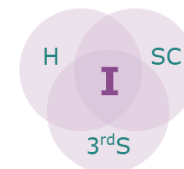
We are receiving referrals from other organisations that our partners work closely with eg Social Work, Addiction Services.

Integration appears to be working well in the statutory service... but there is still a reticence to see third sector providers as equal partners.

They [IJBs] are internally focused and have little time or capacity to engage with external organisations.

Our Project Manager has been asked to be involved in... the Pan Ayrshire Action Plan for Sensory Impairment.

Many of the ATPs we were working alongside were pulled from their specialist area... it has been difficult to maintain some of these relationships.



# Emerging themes about connections

## Who projects connect with

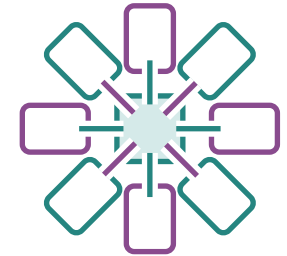


## Things that support connections



### In general

- ▶ culture (willing to reach out)
- ▶ person-centred ways of working on all sides
- ▶ link practitioners
- ▶ trust
- ▶ fit between services
- ▶ perception of need for service
- ▶ time (to build relationships)
- ▶ perseverance
- ▶ flexibility
- ▶ dedicated resources (staff time)



### Highlighted by the pandemic (can these be maintained?)

- ▶ direct access to potential service users (need for referrals suspended)
- ▶ appreciation of 3rd sector strengths (agile crisis response)
- ▶ video meetings (break down geographical silos)
- ▶ active local community (due to paused statutory services)

## Things that get in the way of connections

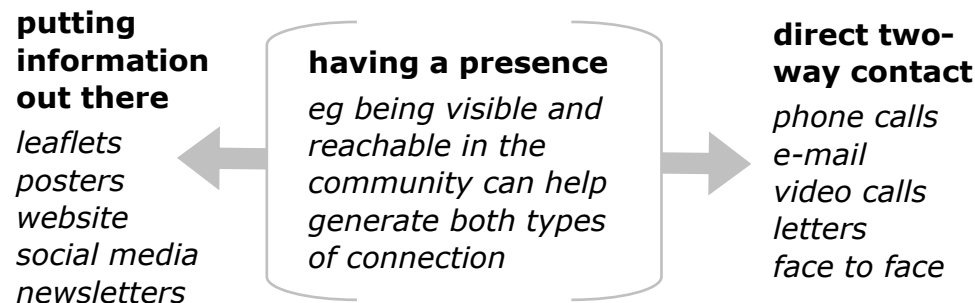
### In general

- ▶ inconsistency
- ▶ 3rd sector not being seen as an equal partner
- ▶ unequal access to services (eg remote rural communities)

### Highlighted by the pandemic

- ▶ no face-to-face engagement
- ▶ no access to work telephones
- ▶ potential service users not being ready for the service / more isolated from other services too
- ▶ reduced staff (furlough, redeployment...)
- ▶ staff vulnerability
- ▶ focus on internal adjustment
- ▶ no access to community venues

## Types of connections



## Feelings of connectedness

Very well connected.

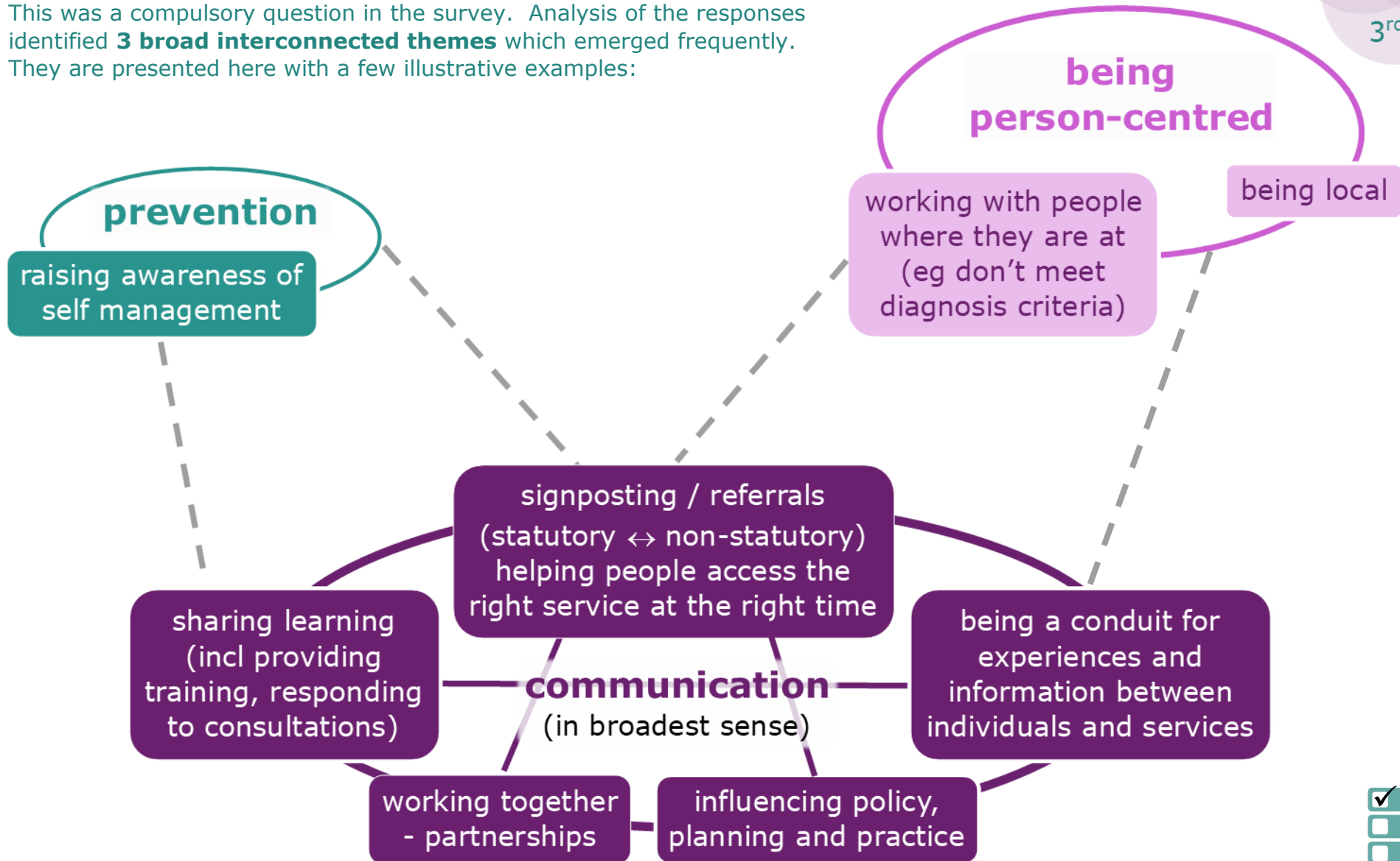
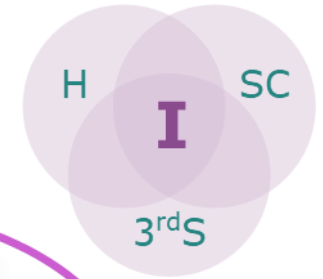
It moves - sometimes feel quite connected but then can't get answers.

Not. Feeling negative.

# Anticipated support for Health & Social Care Integration

All applicants to the Self Management Fund had to explain how their project would support Health & Social Care Integration.

This was a compulsory question in the survey. Analysis of the responses identified **3 broad interconnected themes** which emerged frequently. They are presented here with a few illustrative examples:





## How is work to support Health & Social Care Integration going?

These are example survey responses. **All** answers will be shared with The ALLIANCE.

**25** mentioned **COVID-19** is having an impact on this aspect of their work. These included 2 which could see some **potential benefits** emerging. Both of these related to reaching more people who might benefit from the planned project in the future.

Community health champions not yet recruited as communities, health partners and others are dealing with Covid situation. However, more local organisations are providing support and signposting and recruitment likely to be easier as a result.



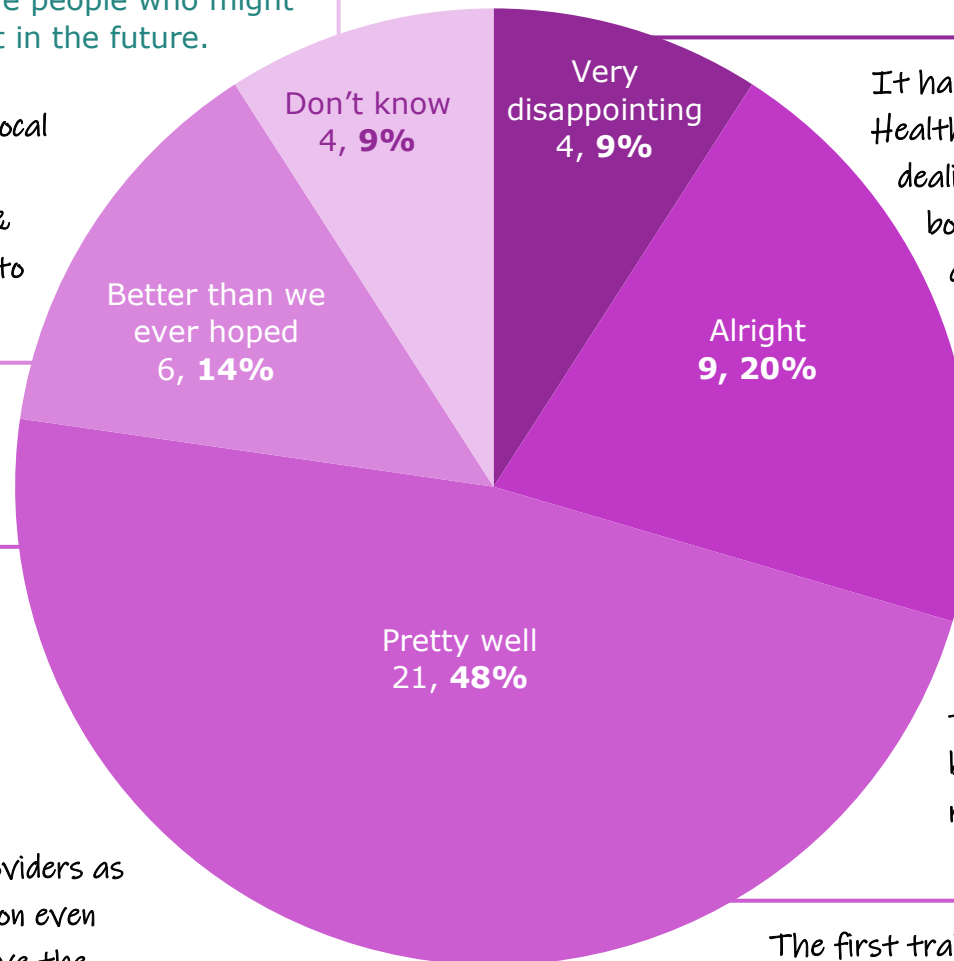
Working in partnership with the local Patient Participant Group, third sector organisations and Health & Social Care, our project continues to influence the redesign of services.

It has been very difficult to engage with Health and Social Care professionals – We are dealing with two IJB's across one health boards who are at different stages of development. They are internally focused and have little time or capacity to engage with external organisations.

In some areas there are too few Occupational Therapists and CPNs to engage with us, and now of course the Covid-19 lockdown has meant that those that normally are able to support us are being stretched to the limit or redeployed.

Integration appears to be working well in the statutory service with Health and Social work teams having systems in place to allow safe sharing of information but there is still a reticence to see third sector providers as equal partners in service provision even though in many cases [they] have the most contact hours with the client.

The first training session was well attended with both family carers and AHPs working together.



## How could The ALLIANCE help with connections & Health and Social Care Integration?

Email out the key contacts in each Health & Social Care Partnership area.

Maybe host some kind of networking event?

Be flexible - it is going to continue to change.

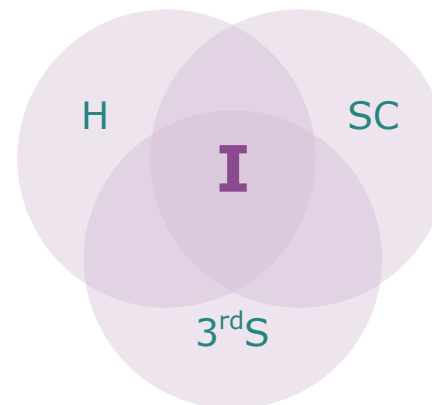
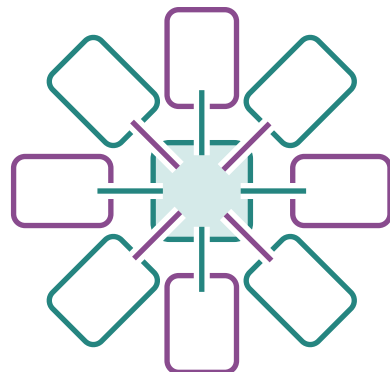
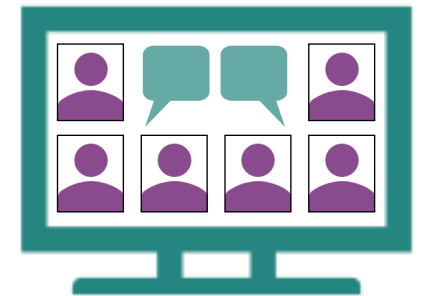
Support - financially and otherwise.

Support - if they can put us in contact with other organisations who it might be mutually beneficial to work with.

Continue to fund these projects and to bridge the gap between third sector and statutory services.

Facilitating collaboration.

Educate the statutory services on the important role the third sector play in the provision of activities and services and get them to engage with local community leaders.





# What's bubbling up?

All responses have been shared with The ALLIANCE. The following pages contain some illustrative examples. Some themes occur repeatedly - in particular the importance of making **connections** and the change to **digital service provision** in response to lockdown.

## What...



The simple things of *community, connectedness, kindness, conversation and a cuppa* are really all that we need.  
That adolescents with *eczema* have a greater feeling of connection with others with the condition.



That those we're supporting with this project will feel genuine and sustained benefit to their ability to cope after participating.  
that we will one day be able to hold up the pockets of work we are doing as good practice and that other forensic mental health services will follow.  
That the work we're doing in *COVID-19* to pivot our work will have a real impact on people



Find ways to adapt our original plans to the new challenges of incorporating trauma informed practice into our recovery work given the levels of anxiety and bereavement in the community.  
To recognise gaps in services and help to come up with creative, sustainable and useful solutions.  
That the positive community energy that has emerged from *COVID* is captured and developed.



That we are able to secure funding once the funding period from The Alliance ends.  
That we can find a way to mainstream our service.



## What...

...is  
worrying  
you?

COVID:  
reach

that the individuals with dementia and long term conditions and their carers will be too frightened to come back to a social gathering.  
We had difficulty in engaging young people from particular groups of young people who might have access issues with a digital product  
I suspect some of the cause of the lower-than-anticipated uptake is related to COVID-19 as people concentrate on pressing issues.

COVID:  
changes

Not having the opportunity of proving our worth and achieving our vision.  
The challenge is developing strategies that allow for flexibility and still maintain quality.  
Our initial plan was to develop an e learning programme, this has been undermined by covid and inability to meet with relevant stakeholders contributing to learning.

COVID:  
impact

The increase in isolation and loneliness experienced by many carers and the impact on their emotional and physical well-being.  
We are already seeing a trend of a number of young people who have not left the house since lockdown started and we know the transition out of lockdown is going to be more complicated for autistic people.

funding /  
capacity

Future funding of the service – how will we ensure that the work we have already done does not get lost. No further funding where the project requires ending, denying peoples recovery and opportunities, not supporting those many inequalities requiring being addressed. It feels extremely vulnerable  
That people are just waiting for us to do this and we really don't have the limitless staff hours to dedicate to it.

What's  
bubbling  
up for you?



# What...

...is surprising you?

lack of awareness

Doesn't really come as a surprise as the barriers which are being presented to us are the same barriers as 5/6 years ago.  
How little awareness secondary school staff appear to have about eczema.

resilience

The resilience of carers. They are a force to be reckoned with!  
How so many organisations have been able to pivot and innovate so brilliantly to respond.  
How volunteers can easily adapt to new challenges and how a community can come together and offer their support and kindness  
How positive our staff have remained during this time.  
The willingness of individuals and partner organisations to engage in developing this work and work together to find solutions in the face of the current pandemic.

COVID: changes

Having more clients referred to the project since lockdown.  
How many vulnerable children, people and families who were suffocated by services are thriving with light touch, community based support.  
Part of the project has developed organically in response to Covid. In other words some of it has happened in the wrong order but in true community development fashion.  
The level that the community services have withdrawn during lockdown.  
Many IJBs are not meeting... and most meaningful carer engagement seems to have been suspended.  
Covid-19 has provided the opportunity to engage more volunteers.

digital issues

So few carers use\d any form of digital technology  
How we have been able to adapt to the changes quickly and still bring our reference group together online and hold positive and engaging meetings.  
How calming and powerful it can be to access our local greenspaces through a virtual platform..  
Doing group work online is a major challenge.  
Virtual delivery hasn't posed as many barriers as we thought it could.



- 
- 
-

# What...

*...is  
working  
brilliantly?*

outcomes

We've been able to adapt our project so that the outcomes of the project can still be achieved whilst adhering to the "new normal" in this COVID-19 age. People can still participate in the project from home.

community

We are working with a courier company who are local to Govan and use bicycles to deliver the packages. They have been telling us that they have a chat to our participants as they drop off the packages at a distance which is absolutely what the community is about and it has a positive social impact on the Members themselves.  
People from communities stepping forward to help and getting to know people in their areas that they never connected with before. People prioritising the simple things. People showing kindness and understanding to the most vulnerable.  
The staff team are/were enjoying working in communities and developing local connections .

technology

Adapting to using technology, especially family carers who we thought were complete technophobes :)  
Adolescents are keen to take part in online catch ups.  
Our self-management SLACK group which is keeping people connected and helping promote our services  
Our virtual support that we are offering our service users and their parents/carers  
The virtual Out & About sessions through zoom  
There is one group in particular that I thought would never want a virtual version of their coffee and chat. How delighted are we to be proved wrong!  
Weekly video meetings have created stronger cohesion throughout the delivery network and in spite of our challenging geography we feel more connected as a result.



- 
- 
-



What...

...is  
interesting  
you?

adapting

New ways of working which previously were not embraced by patients but now are. There is a real challenge in finding new ways of working and delivering training. While there are new stressors and demands, some of the new ways of working have worked well and need to be carried forward in the future. The question is identifying the strategies that we should carry forward in the future. We are getting to know our participants and staff teams in ways that we would never have had the opportunity to before.

What's  
bubbling  
up for you?

new ideas

'Tour guide' films, made by staff on daily exercise and shared with participants so we can 'accompany' them on their walks.  
What other activities we can provide locally for elderly people to socialise and eat well. Could meals on wheels services be reinstated... Could we provide a "come dine with me" event for small groups to meet and share a meal?  
we are interested in finding ways to communicate complex ideas with metaphors and stories. The physiotherapists have fed back that this is something that has been most helpful to them for working with their patient groups.  
Have a regular activity for older people in the schools to encourage building an intergenerational age friendly community.  
Prescribe a pal for people... Its what people want and would allow us to widen our reach beyond alcohol.

structures

How people connect with a venue and a place and how this helps them connect with outside world and their country and city and their home.  
How relationship based delivery models can blend with virtual platforms to share resource without geographic limitations.  
The HSCPs are keen for key messages and support to come from the top down.

this way of  
reporting

Hearing about how other projects are progressing.  
We have really benefited from the learning days and have tried to make sure that all of our small staff team are given the opportunity to experience at least one of them. It is interesting to see the innovative approaches that other organizations use in their service delivery  
The style and way the report is presented – it's very visual and engaging.



## What...

...have you improved?

reach

We managed to further extend our Sensory Stations to more rural locations such as Cowlton, Mossblown and Maybole.

We have increased the client base we are reaching. A number of individuals we are supporting have never used the service before.

Streamlined referral process

[We've improved] our support and access for service users to participate in activities with us.

connections

Focus more on communication and stay in touch with volunteers and participants more often

Communication is vitally important at the moment and not only do we chat we are also checking carers have adequate supplies of food, medicine, PPE etc.

Some of the carers we contact don't have family or external support and calls from us may be the only other voice they hear outside the home.

Communication and connections with other groups in the town. Relationships with new elderly vulnerable people. Relationships with health and social care staff.

communications and connections in local communities, with local groups and community health and social care teams

Breaking down silos, bringing in the right skills at the right time

learning & adapting

Less anxious about having to adapt.

our virtual delivery which we had very little experience of before this.

We have quickly improved my ability to use and interact using Zoom. We have also mastered the art of the online whiteboard which has proved to be very useful.

We have improved how we learn quickly from different projects in Scotland and the UK and adapt to the needs of the situation.

We have diversified the range of support we are able to offer. Our staff are now very familiar in how to deliver online communication which will mean we will have more ways to engage young people.

Re-configuring our project (and indeed all programmes across the organisation) due to the pandemic, has been challenging and fascinating to watch and participate in. The inventiveness and flexibility of staff and communities has come to the fore in recent months.

What's bubbling up for you?



## What...

*...do you wish you'd known before?*

COVID

Hindsight's a blessing, but if we knew we were about to enter into lockdown/ social distancing, we would've gone for an online-only format from the beginning.

That there was going to be a pandemic!

Crisis management as a third sector organisation .

Technology

How dependent we would become on IT virtual solutions for holding groups, events and generally communicating with the carers we support.

Some carers have embraced virtual groups – others would prefer to wait.

How to use zoom – may have built it in as an option even without a pandemic.

That it would be so hard to connect virtually with the carers in a group.

That online events are very popular and for many adolescents preferable to face to face events / workshops.

Simply knowing how soon digital/virtual adaptation of our service would be required. We, like most, are in a position of developing and piloting approaches to engagement... through necessity.

How appreciated and effective it is to send people activities through the post and create an online community for people to join.

systemic issues

How difficult it is for people to navigate statutory systems.

Don't make things complicated to suit someone else's agenda.

How difficult it would be to engage people face to face.

How to communicate and reach people in local communities; how to do this well.

I wish I had known that many of the older people from target groups take a long holiday in Pakistan extending from November to March!

The amount of elderly people who are living alone and who are very lonely and isolated. How a small act of kindness can make such a difference to their lives.

The size limitations of the rooms in the venues

What's bubbling up for you?



## What...

...advice  
would you  
give a new  
project?

clear focus

Be clear about your outcomes.

Be true to your reason for being. Fight to provide the service your clients tell you they need whilst opening them up to new innovative approaches.

Have a clear vision of what it is you want to do... Have a good project plan...

Believe in your project and Carpe Diem-seize the moment. Have a sense of humour.

Do not get too concerned about outcomes as they will take care of themselves if the project is meeting the needs.

flexibility

A plan is just that - a plan! Things happen that are out with your control and you need to adapt and be creative. These opportunities create learning and opportunity and although they can be stressful, they are also so key in developing new ways of working.

Expect the unexpected! And be prepared to adapt, be flexible, to innovate. And be willing to make your project work for those you are supporting - whatever it takes.

Ask people how they would like to engage... Be flexible and use as many different methods as you can.

Be prepared to be dynamic and modify the project as you learn and go along. You can't plan for everything (e.g. global pandemic) but you can come up with solutions and adapt accordingly.

Don't be prescriptive - give them choice.

Don't worry if you have to make several attempts until you achieve what you aim for.

teamwork

Listen to your participants and give them the opportunity to lead... we have a very active community champion... who is really important in helping us engage certain members.

The wealth of knowledge that a team can bring to the project is a great asset.

Get the team right and united and everything else will follow.

Hard work, get connected to like minded people.

Engage with the right people who will support your project.

If you are applying as a partnership, think about some of the details as if you already had the funds. As partners, there were some different ideas of how some aspects of the project would work.

Link in with local community groups and also other [similar] organisations... to increase learning.

Reflect... on the role and input of partners to ensure that they are clear on the expectations of them.

What's  
bubbling  
up for you?



What...

...issues and themes are emerging?

digital inequality

increased need

Not everyone has (or wants, or due to conditions can use) internet access. Where they do want it we are joining up with and referring people to other projects who provide devices or broadband.

Issues around access to online services and IT literacy.

Virtual meeting can become successful, sharing experiences by keeping participants active and focused during the meeting, However, this take a great deal of planning (it takes three times more time for planning than for being on the meeting) for before, during and after to engage participants as well as maintain a sense of momentum.

How the older generation are missing out on so much advice and information because of the generational digital divide, and the reliance of so many services on on-line information only

Changing needs... as the pandemic leaves people isolated, anxious and concerned about the future  
How COVID and shielding is affecting peoples physical health.

The loneliness and isolation being experienced by carers who are caring single-handedly in very difficult situations.

Loneliness, poor mental health, heath deterioration due to lack of daily structure

Many IJBs aren't meeting, or are only meeting in a limited way....

What is the impact of Covid-19 on how these meetings are going to be carried out in the future?

Over the last four months, there has been a significant level of ambient anxiety as our communities deal with the challenges of Covid and lockdowns. The self management of bereavement, anxiety and trauma are important to explore in the future. We are also looking at the intersection of mental health and alcohol use with the changing patterns of alcohol use amongst the community as our community starts to move into the Covid recovery phases.

The impact of long-term isolation and reduced support.

People need practical support as much as information about supporting their mental health and wellbeing during this time.

The tide of grief and despair that is increasing for some carers due to this situation.

there is a pain of loss emerging throughout the COVID period- whether grieving for a loved one, the inability to visit loved ones, or just the loss of life as it was before.

Self-management skills for carers have never been more important.

What's bubbling up for you?



## What...

*...would you use a magic wand to do?*

circumvent COVID

change structures

Create a space to run groups and course structure that would meet the needs of clients during lockdown and beyond

Find a way to safely also deliver in-person workshops so that more people can participate in the project.

Increase funding to enable face to face support – when safe to do so. the community groups being able to operate as linking participants with them by the end of the project/their journey, is a key aspect to the project methodology and aims.

To be able to open up the workshops... and bring everyone back together.

End the restrictions and bring back the face to face lively groups.

To create a culture where Third Sector providers are included as equal partners in care planning and provision with referrers actively seeking consent from clients to include the service provider in their whole recovery plan and review process.

To remove the barriers between Health Boards, H&SCB's and third sector – so we can provide a cohesive service together.

Arrange some desperately needed respite for carers; send hugs to carers who has recently suffered a bereavement but cannot get comfort or support in the way they normally would; provide the opportunity for carers directly affected by current circumstances to get professional support to help them get through the next few months.

Redesign the private home care services to a person-centred social model as opposed to a task centred money making approach, with more than 15 minutes to interact with the elderly person

I would like it to become law that carers/families supporting those within forensic mental health services and all mental health services have a legal right to advocacy.

Provide long-term sustainable funding :)

Ensure that there are more statutory services available in the community to alleviate isolation and improve mental and physical wellbeing.

To influence organisational information governance in a way that would enable decisions to be made and actions to be taken more quickly.

To introduce a Follow Up Service in the Audiology Depts.

We would wish for an adult spina bifida clinic.

What's bubbling up for you?



## What...

*...would you use a magic wand to do?  
(cont.)*

expand

Get a wider range of young people involved.  
Get more funding so that we can expand this project to offer more days for more people to get involved and to access different locations.  
Get us a wee pool of drivers and a fleet of cars to simply provide transport for people.  
That every secondary school in Scotland (and in fact the UK) is aware of and accessing the resources we are creating so that they are better equipped to support adolescents with eczema throughout their time at secondary school.

What's bubbling up for you?

the impossible

I would transport each person into the woods for an hour every day.  
To take away the need in the first place.  
We'd wave the wand so that people in Edinburgh live in a supportive and resilient community where mental health is understood and people lead fulfilling lives.  
To have a mirror ball show the end of the project letting us know we're getting it right :)

*...else do you want to tell us?*

thank you

We've found the opportunities and learning we've been provided with from the Alliance and Evaluation Support Scotland throughout the funding term to be invaluable and hope that these will continue once the current health restrictions are eased.  
Thanks for the opportunity to reflect on our project's progress.





# Self-evaluation

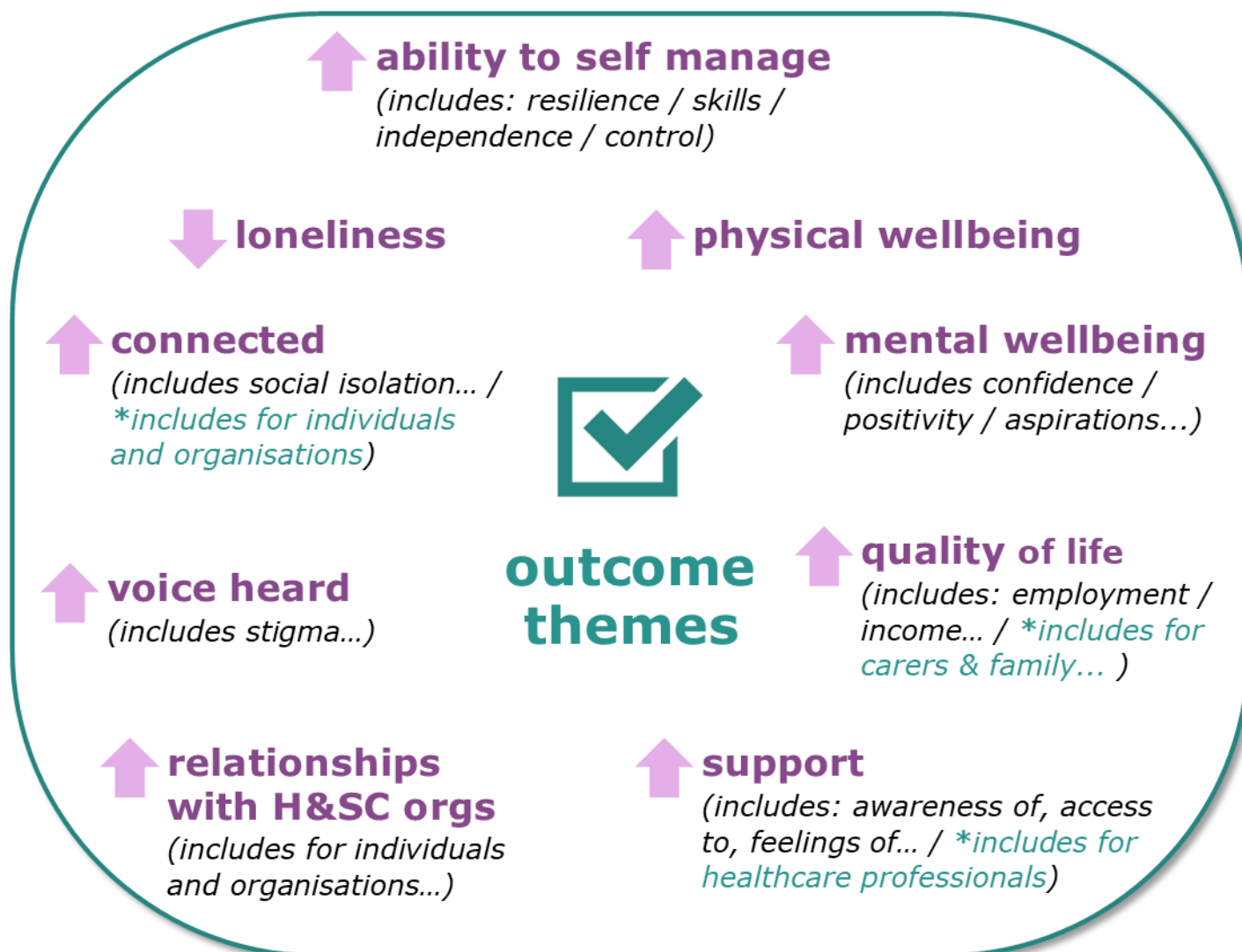
## Outcome themes

**ALL 44 projects** that completed the questionnaire said they could see where their **outcomes** fit within the 9 themes identified in the 1st report:



There were 11 suggestions for extra outcomes. 1 was a comment rather than a suggestion. The remaining 10 could be mapped to the existing themes - 3 descriptions were expanded to make this clearer.

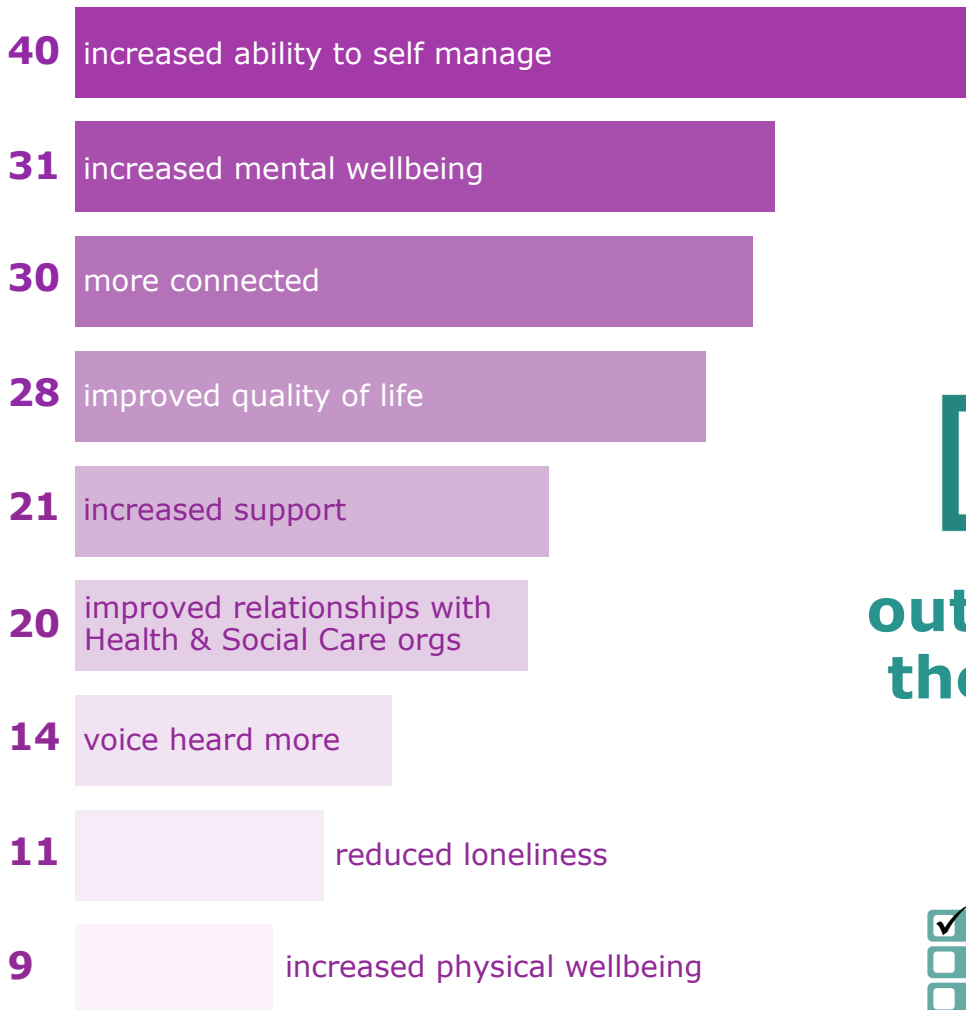
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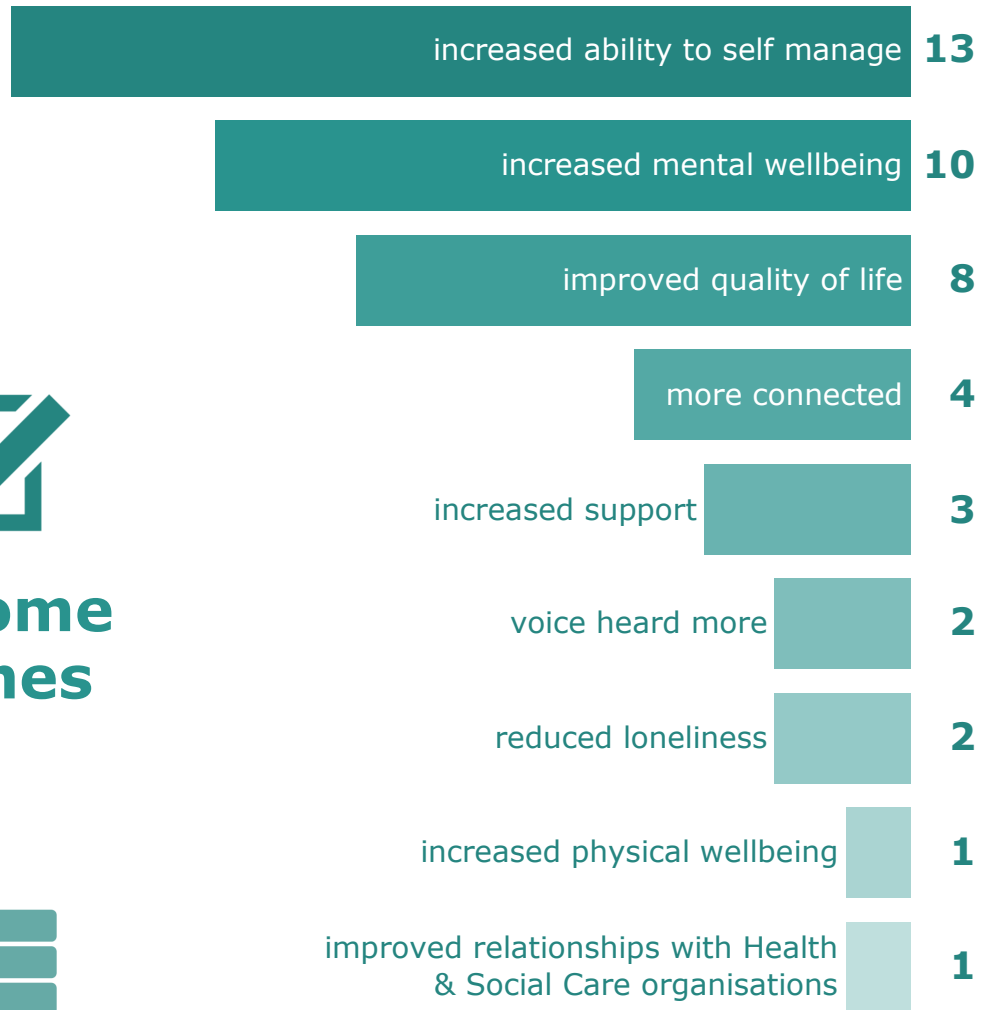
## Most relevant outcome themes

Projects were asked to indicate which outcome themes are **most relevant** for them (max 5):

- ▶ 35 projects selected **5 outcome themes**
- ▶ 6 projects selected **4 outcome themes**
- ▶ 1 projects selected **3 outcome themes**
- ▶ 2 projects selected **1 outcome theme**



Respondents were then asked to identify which **1 outcome theme** is the **most relevant for their project**:



## outcome themes



## How do you feel about your *self-evaluation*?

frightened

1



COVID-19... impacts our ability to recruit people to the online communities. We need the numbers to help us assess the value.

nervous

16



We are trying different approaches but I'm not sure the evaluation will be as rich as it would be if we weren't online.

happy

1



Feeling equipped through the super helpful workshops the Alliance hosted with ESS.

excited

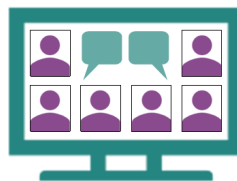
12



It is rewarding to see the difference the project has made. It is also so important to address the parts of the service that have not gone as we had hoped. This creates change and opportunity which is exciting as we get to be creative and innovative!

During the 4 video sessions we asked participants to indicate which part of **self evaluation** they were **least confident** about:

- ▶ knowing what difference you make (outcomes)
- ▶ knowing what to measure (indicators)
- ▶ knowing how to measure your indicators (methods)
- ▶ gathering in your evidence (collecting)
- ▶ making sense of your evidence (analysis)



There was **no strong consensus** but **collecting** came first, followed by **methods** and then **analysis**. We shared tips for remote evaluation and signposted to free resources on [www.evaluationsupportscotland.org.uk](http://www.evaluationsupportscotland.org.uk).

## Evidence gathering



### Projects are gathering evidence

#### from

... clients, referrers, staff, volunteers, other service providers

#### via

... phone calls, e-mail, post, video, social media, web statistics

#### when

... it turns up, they first start working with someone, at regular intervals, at the end of working with them, after their service has finished

#### using

... interviews, questionnaires, discussion groups, individuals' records, registers, goal-setting, poems, images, observation sheets, scales, capturing casual moments sheets

### Remote evaluation top tips

Keep evaluation **simple**

Find **successes** to celebrate to keep positive in tough times

Capture **evidence** now for reporting later

Record **learning** now to use later

Find quick and easy ways to **record**:

- ▶ What you do
- ▶ Who with or for
- ▶ The difference you are making
- ▶ What you're learning

**es** Evaluation  
Support  
Scotland

#IsolationEvaluation



# Reflections on the first learning report

## Are you likely to use (parts of) it in any way in the near future?

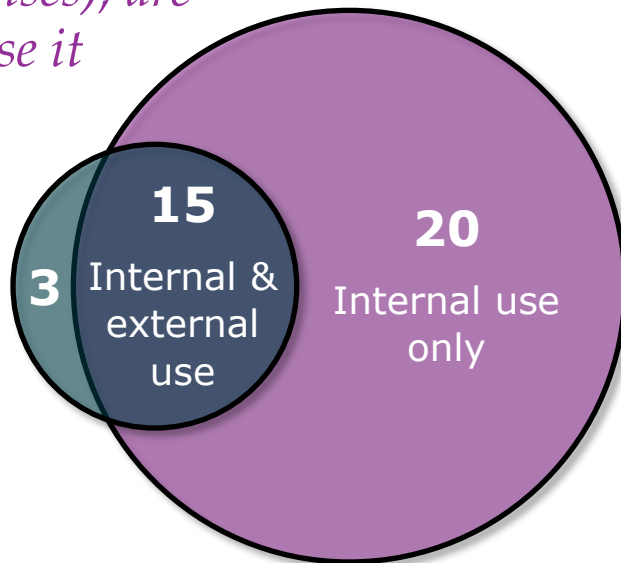
(Projects know there is no obligation to use it, we just want to know if it is useful.)

Of the 6 projects which said they weren't likely to use it in the near future, comments from 2 indicated they **are** using it internally. 3 said it was due to COVID. 1 said it was currently unlikely to impact service delivery.

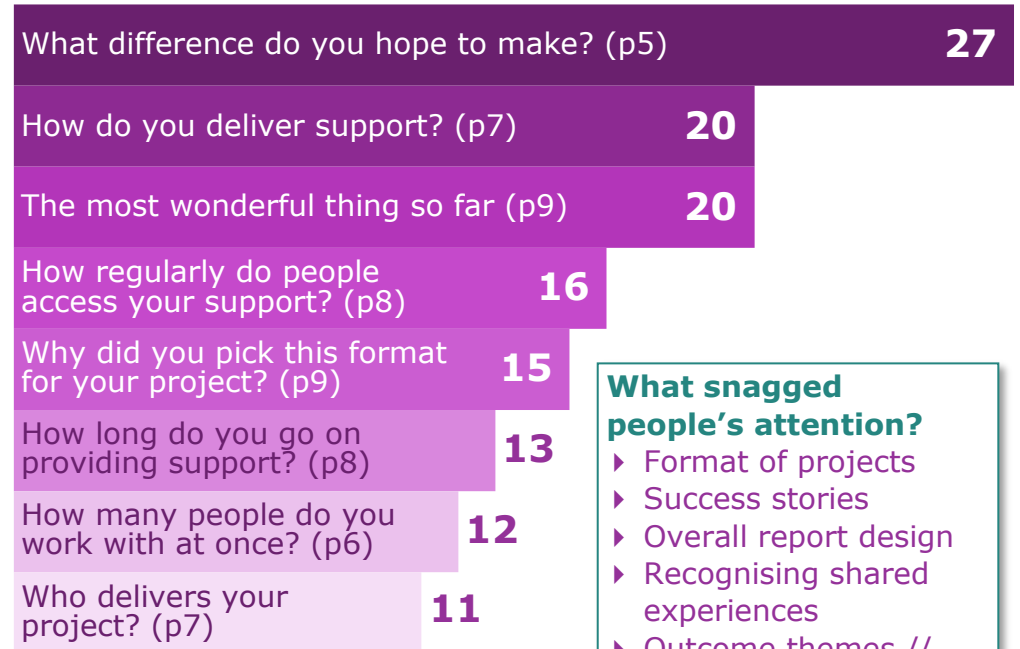


If so (38 responses), are you likely to use it externally or internally?

External use only



## Which section/s are you likely to use in the near future?



### What snagged people's attention?

- ▶ Format of projects
- ▶ Success stories
- ▶ Overall report design
- ▶ Recognising shared experiences
- ▶ Outcome themes // the images

There were **8 sections** of the first report that we thought projects might find useful. Of the 38 (/44) projects that said they were likely to use part/s of the report in the near future:

- ◆ 11 projects chose 1 section
- ◆ 6 projects chose 2 sections
- ◆ 6 projects chose 3 sections
- ◆ 2 projects chose 4 sections
- ◆ 5 projects chose 5 sections
- ◆ 2 projects chose 6 sections
- ◆ 6 projects chose all 8 sections



## *How do you think you will use it?*

### *To inform evaluation...*

To assess and report on the contribution our Project has made to the overall difference the self-management projects had set out to make. I would share this with my manager and board, with our Funders and future potential funders.

With our staff team as a reflection piece on different aspects of our organisations work.

the term "emerging outcome themes" caught my eye and will be something I use to monitor projects, with regards how, when and why, outcomes might change or develop over the lifetime of a project,

As a partnership... the report could help us rethink how we will evaluate the project.

We are continuously evaluating our projects and it would be especially useful to set themes for intended and emerging outcomes in a very simple and illustrative way.

to inspire new ways of presenting information in our funding reports, annual report and for Board meetings

### *To inform service development...*

Inspiration can come from reading about a wide variety of different projects.

We might use the outcome themes as areas to explore in service user focus groups that will inform ongoing development of the programme

It could be helpful when looking at designing future projects to see what combinations of things would work (e.g. face-to-face + online, 1:1 or groups, open-ended or fixed-term) and we know the methods have been tried and tested.

we think we are more likely to use the report in comparison with a later version, to understand how other organisations have adapted. This could help inform our own thinking in the mid-longer term.

Internally with the project Steering Group so they get a flavour of what the SMF Community is that we are part of, and to help our organisation understand how we fit into the bigger picture, because our organisation delivers a diverse range of other projects too. Externally in e.g. Funding applications to help us explore and develop where we might be able to increase our delivery.

In mapping services to identify areas of development, partnership working or gaps in service provision.

We would use the reports to generate ideas, to look for good practice we might be able take learning from, and to understand what is working well for other organisations.

### *To spread the word...*

To demonstrate impact of self management with our local contacts at HSCP and wider 3rd sector.

for promoting what we do with volunteers, service users and the H&SCP. It shows what a fabulous and varied third sector we have here in Scotland.

I will be sharing the report with internal colleagues to help promote self management culture and ways of working. This helps to demonstrate what can be achieved in a challenging area.

The board... found it really positive and interesting.

We could use this information at our upcoming AGM & Public Information Day to demonstrate how the Health & Social Care Third Sector is operating and how it relates to our work.

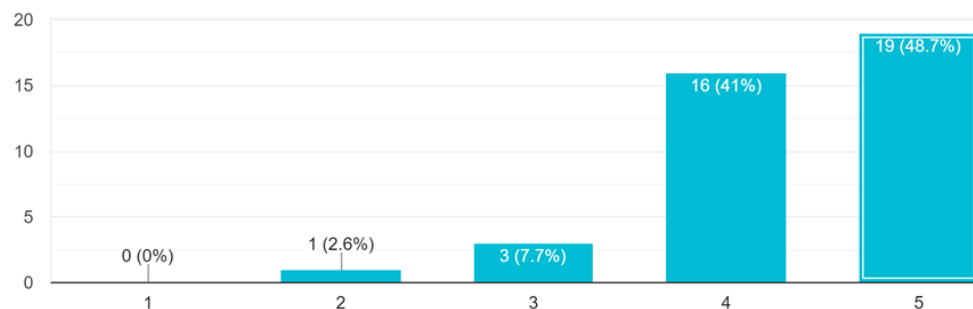
We often share reports and findings more widely at our AGM, and with permission will link it on our website, especially if it is something quite visually appealing, not just a long written report.

## Feedback on the video sessions

39 participants completed the online feedback form. **ALL** responses have been shared with The ALLIANCE with some illustrative comments below.

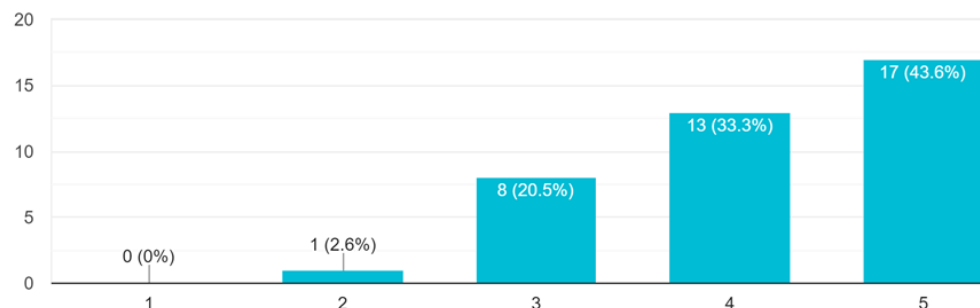
How RELEVANT was the discussion about CHANGE and RESILIENCE for you and your project?

39 responses



How RELEVANT was the discussion about CONNECTIONS and HEALTH AND SOCIAL CARE INTEGRATION for you and your project?

39 responses



Scale: 1 = not at all, 5 = very

### What didn't work well? / Any suggestions:

90 mins would be perfect length. **BUT** This could be an all day session!

More options to meet online with sessions like today

Too little time spent on the evaluation process - which is more tricky than usual at the moment.

Was as good as Zoom goes - never the same as face to face - question prompts quite long and convoluted.

### What did you enjoy about the session?

37/39 responses mentioned having **time to talk to other projects, eg:**

Having the chance to engage with other charities and hear how they are doing and what their experiences have been. That it's okay if you're not on track and we all really are in this together.

It was great to connect with other organisations and discuss our experiences. Surprisingly similar (the groups I found myself in)... felt a little unprepared at first but have gone away feeling quite positive.

As always the community of experience and learning is very much appreciated.

It was great to hear others' experiences of trying to connect with communities in different ways, and frustrations with working online.

Sharing successes and concerns... good format and well delivered.

Lovely to meet all the other projects and connect, I agree It is heartening to be able to chat to other funded projects rather than just creating a report in isolation.

Like this format of providing feedback on the project.

2 comments mentioned making contact with **funders:**

I also think it is good to connect with funders. It is an important relationship especially now when we all have to be more agile.

Feeling the positivity from alliance to be flexible

Other types of comment:

Definitely, one of the more enjoyable zoom sessions.

I hadn't expected to get as much from a virtual session

Always love a ESS refresher and tips on evaluation as well!