

Annual Report

2020-2021

Borders
Care
Voice



We work with people and providers to promote equality
and support change in health and social care

About Us

We work with people and providers to promote equality and change in health and social care. We do this by:

- bringing people and providers in health and social care together to identify common issues and form collective voices and actions
- supporting them to speak with that voice, or representing them where required
- keeping them informed and up to date
- supporting their learning and development through training
- identifying gaps and developing new ideas to address them
- supporting co-production at all stages in the design and delivery of health and social care in the Borders.

Chair's Report

Our previous annual report concluded with the start of the lockdown in March 2020 due to Covid-19. This latest report covers the period April 2020-March 21 – a year like no other – when we, like everyone else, had to make significant changes so that we could continue to work through the pandemic.

All our plans were rapidly thrown off course by the pandemic. However, we did manage to make the following achievements against our previously stated plans:

Staff had to maintain remote and home working throughout this year, as we are not classed as an essential service. We moved nearly all our activity online, including working groups, forums and training, albeit with smaller numbers in many cases.

We retrained all of our staff (and many of our volunteers) to work remotely and digitally. Three of our staff trained as Digital Champions and supported more than 30 people to get online, including the deployment of devices funded by Connecting Scotland. This ensured their continued involvement in decision making and engagement processes relating to health and social care.

We actively worked as members of the Borders Older People's Planning Partnership (BOPPP) to design and carry out a large scale survey of older people to assess their experiences and needs during the pandemic. The information gained from the survey will be used to inform the development of older people's services locally.

Mental health lived experience representatives adapted well to online involvement, including board and planning meetings, job interview panels, local and national involvement and learning events. Some of our members found it more difficult to engage in this way and we will ensure we return to working in ways that offer greater inclusion as restrictions allow.

We re-started work to improve third sector representation and communication, establishing an improved relationship with the Chief Officer for Integration and planning a range of third sector engagement events, alongside the Third Sector Interface, in 2021-2022.

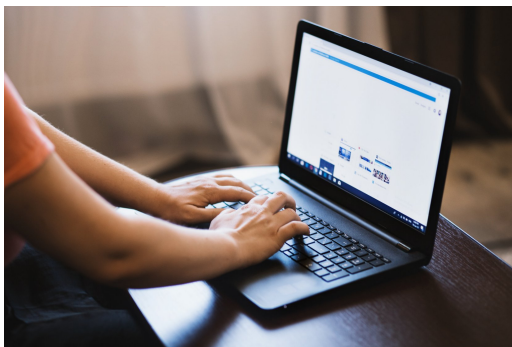
We recruited three new trustees from our membership at our AGM in 2020, representing both providers and people with lived experience. We ran an active campaign for young trustees up until lockdown, working with Borders College, and we will resume this in 2021-22.

We thank our funders, Scottish Borders Council and NHS Borders, for their continuing support. We also thank People's Health Trust (Active Communities) and The Robertson Trust for their funding of the Collective Advocacy Project (You See It All).

We are very appreciative of our volunteers, including those with lived experience, who ensure we meet our objectives. Thanks, too, to our trustees, members and partners for their ongoing contributions and support.

Finally, I would like to express my sincere thanks to our staff for their mobilisation, commitment and resilience during this difficult and challenging year.

Gordon Forsyth, Chair



Working Groups

User/Carer Working Group

The group began meeting online in August and decided to meet monthly during the pandemic, as meetings were online and generally shorter in length.

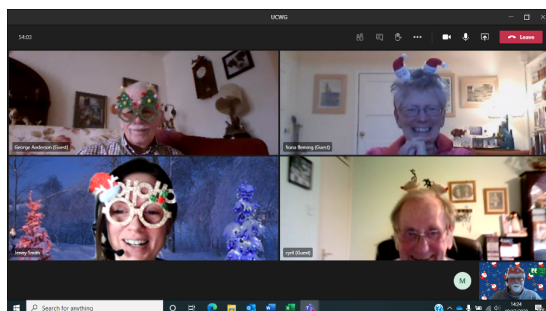
Some members required a high level of digital support to get online and become confident using Microsoft Teams. We contacted all members via email/post/call to see if they would like to join, but some group members chose not to, so attendance was lower than usual during the year.

At the session held in September, we invited Susan Henderson and Gary Murdie from Scottish Borders Council to provide information on the charging policy for social care consultation, and the group submitted a response to council. The group also updated its plans in light of COVID.

We were joined at the November meeting by Ali Forster and Sarah Wood from Home First, NHS Borders (formerly Hospital to Home). This was a follow up visit from an initial visit in 2019 to update on progress. The project aims to provide quick homecare cover, focused on reablement.

The group had a Christmas "party" online in December, with Christmas gift boxes distributed to members. We were joined by Simone Doyle, SBC Equalities Officer, to discuss the forthcoming consultation on the Equalities Mainstreaming Strategy beginning in January 2021. The group dedicated a subsequent meeting to responding to the consultation.

Michael Curran, programme manager at SBC, attended the March meeting along to discuss the Physical Disability Strategy and Action Plan, which was delayed due to the pandemic, and work to provide respite options for dementia carers in crisis during Covid-19.



Working Groups



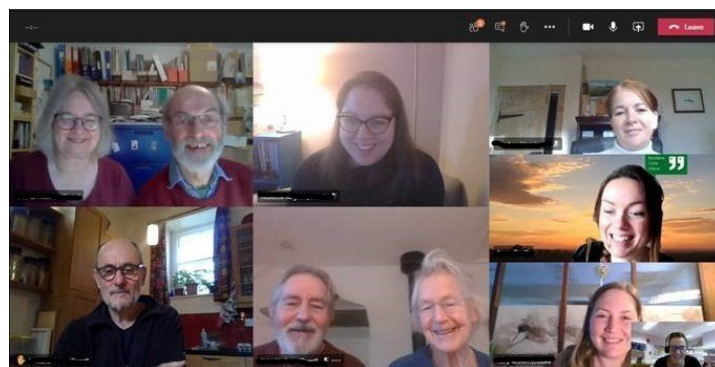
Borders Dementia Working Group

We submitted an application, with support of group members, to Life Changes Trust for a new Dementia Voices project. We were awarded £15,000 to support the engagement of group members and create videos telling their stories of living with dementia.

The group began to meet monthly online, with six regular members who were comfortable using virtual platforms. We continued to stay in touch with offline members.

The group began working on the Dementia Voices project, agreeing a job description for the worker and to form an interview panel. The group also revisited it's 'Vision for Good Life with Dementia' graphic created in 2020 – and agreed some steps to take these ideas forward.

Planning also began with Dynamite Arts on the life story videos (also funded by Life Changes Trust). Irene Thomson, from NHS Borders, visited the group to give a service update on the Mental Health for Older Adults Service and dementia services as they remobilised.



Working Groups

A safe space to
share your
experience of
mental health



Mental Health & Wellbeing Forum

The first informal get together of the Forum was held on Microsoft Teams in July, following a period of offering devices and/or support to its members to get online. The members were pleased to catch up with one another. It was decided that, as this format had been successful, that the Forum would meet monthly to continue to help support each other.

Attendance numbers were low, even though staff have supported them to get onto Microsoft Teams. However, the members that attend are appreciative of the monthly meeting and regular updates from the commissioner, Julie Waddell and the Mental Health Improvement and Suicide Prevention Team. Invited guests included Claire Veitch and Tracey Brown of the Local Area Co-ordinator Team and Gary Murdie, the Locality Team Leader – Benefits Lead at Scottish Borders Council.

The meetings also helped to ensure that information shared, especially about mental health services. Julie Waddell attended meetings to give an update and give members the opportunity to ask questions.

At the December meeting, all the member that attended received a Christmas box. The boxes went down exceptionally well and were very much appreciated.

Dr Tim Sporle was the guest speaker and gave an update on Psychological Services and answered questions. He expressed an interest in working more closely with the Forum.

Members of the Forum, as people with lived experience, were asked by statutory partners to become involved in recruitment to various roles.

Strategic Work

Integration Joint Board (IJB)

The IJB commissions health and social care services in the Scottish Borders. The Health and Social Care Partnership is tasked with delivering the services the IJB commissions, in line with the Strategic Plan for Health and Social Care.

We attend the IJB to represent the third sector. Unpaid carers and users of services are also represented.

The Integration Joint Board (IJB) held its first online meeting as a development session in June.

It focused on the Health and Social Care Partnership's Covid-19 response, recovery planning, and lessons to be learned for future delivery – including the increased use of technology.

In October, colleagues from Hogeweyk Dementia Village in Holland met the Board to initiate discussion with IJB members on a similar development for higher level needs with dementia in the Borders.

Strategic Planning Group

This group meets quarterly to advise the Integration Joint Board. It is responsible for devising and monitoring progress against the strategic plan for the Health and Social Care Partnership.

We represent users of social care on the Strategic Planning Group (SPG). The group did not meet in the initial stages of the pandemic but resumed quarterly from August 2020.

The service impact of Covid-19 had to be considered by the group and the impact on performance reporting was recognised.

The SPG responded to a request to the IJB for more measures capturing the efficacy and performance of social care.

It approved amendments to the Strategic Implementation Plan to create 10 workstreams, into which all new and existing initiatives led by the HSCP could fit.

The group also approved work to transform support and services for other priorities, such as unpaid carers, and the use of technology in health and social care.

Members supported changes to the governance structure for strategic planning.

The group consistently flags the importance of people with lived experience at the centre of designing and improving services. The HSCP, via NHS Borders public engagement, began work to improve in this area.

Dementia Planning & Implementation Group

This group met on a few occasions, most notably to discuss Scottish Borders Council proposals for a dementia 'care village'.

It was agreed that consultation and engagement from people with lived experience and other stakeholders had been insufficient.

The group had been hindered with no admin support and no chair. However, it secured a new chair in Brian Paris from SBC and it is hoped this will improve the profile of the group. It was agreed the group would undergo some work to improve clarity on role and remit.

Mental Health

We continue to be involved with the Men's Mental Health Stakeholders' Group, the Mental Health Improvement and Suicide Prevention Steering Group and the Mental Health Board.

Our role is to represent the health and social care third sector and/or people with lived experience.

Physical Disability Strategy Group

The group resumed meetings in October. There was a discussion about how disabled people felt they had been supported through the pandemic. It included matters and such as shielding and Self-directed Support.

It was felt that, while there was evidence of other client groups being supported to get online, there was no source of support for those with physical disabilities.

In February, Simone Doyle, Equalities Officer with Scottish Borders Council, gave an update on the council's mainstreaming equalities survey.

The group agreed to review the Physical Disability Strategy and Action Plan in 2021/2022.

Strategic Work



Borders Older People's Planning Partnership

Meetings focused on the Older People's Covid-19 survey and we were part of the delivery group set up to take this forward and help with the analysis..

Several of our staff were trained to undertake telephone interviews with people who did not want to complete it online.

On first analysis, developing social connections was identified as the key priority theme.

The information collected will be used to help shape the planning of support services going forward.

Digital Support

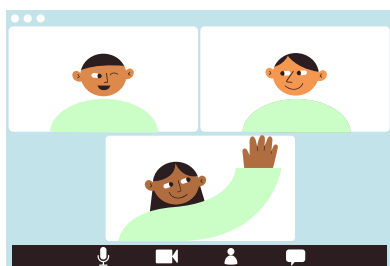
Staff undertook around 70 hours of professional development across the team to support their digital skills for remote working, online delivery and offering remote support.

Three staff members completed the Connecting Scotland Digital Champions training and one member of staff went on to complete the Digital Champions SCQF Level 6 course.

We recorded remote support to individuals to help them get online and connected, providing more than 100 hours of support.

We also helped three trainers with digital skills and rehearsals for the move to online delivery of Learning Network courses,

Although we don't normally work with people who use learning disability services, we helped the Learning Disability Service to get some members of the Locality Citizens Panels online so that they could resume meeting.



We worked in partnership with Berwickshire Housing Association to set up their Digital Lending Library, with a view to our members (and potential members) accessing equipment and support.



We applied to the Connecting Scotland programme and secured three Chromebooks for distribution to members who met certain criteria.

They were distributed to members who met certain criteria.

We also assigned "digital champions" to members from within the staff team to support them regularly.

From April-June 2020, we offered weekly check in chats/e-mails to all 86 individual and working group members.

They were also offered assistance to access any help they might need. We referred six members directly to their local resilience groups and/or Community Assistance Hubs as they became available.

Other members also used these services but sourced support independently. All members received our regular information updates.

We saw requests for information and support reduce after the end of the first lockdown.

Some members requested ongoing emotional support / social check in, where appropriate (generally members who have lived experience of mental health).

We continued to offer this to a small number throughout 2020-2021. We checked back in sporadically with some members, and demand gradually reduced over time.

During the second lockdown, we contacted a number of those who were most vulnerable again to check in, and repeated the offers of assistance and a regular call.

The demand in the second lockdown was reduced, but those individuals who did ask for support had a more acute need.

Additional Support

You See It All

As well as the usual routes through providers and statutory partners, we promoted the collective advocacy project via leaflet drop in the target areas in Eyemouth and Hawick.

Despite all of our efforts, it proved difficult to establish something new in such uncertain times.

With disappointment, we agreed with the funders - People's Health Trust (Active Communities) and The Robertson Trust - that we would return unused funds and end the project in April 2021.

Speedy communication during the pandemic

Communications became an immediate priority when lockdown began. Our organisational members, and ourselves, were making changes to how they would deliver their services and we needed to help get this information out.

We introduced more regular e-newsletters to ensure all members and partners were kept up to date with local service changes, as well as relevant guidance coming from Scottish Government and SBC/NHS Borders for health and social care.

We worked in partnership with a local social enterprise, which created a central source of information about Covid developments in the third sector in the Borders. We provided updates about our own situation and the changes in our member organisations.

We also supported and signposted members and other third sector partners in relation to guidance around Covid-19.

Third Sector Engagement

Third Sector Interface

As our planned Third Sector Forum events could not go ahead, we met online with Berwickshire Association for Voluntary Service (Bavs), Volunteer Centre Borders and Youth Borders . We agreed a survey for the Health and Social Care Alliance Scotland to distribute.

We were invited by the Third Sector Interface (TSI) to participate in a virtual action learning set with other local third sector leaders to discuss local issues in more depth – supporting and growing relationships in the process.

We attended a session run by the TSI to report on their local third sector survey. This was a useful session for a dialogue on how best to support the sector and to build partnerships with the TSI going forward.



Mental Health Providers Forum

The Forum began meeting again in July and has continued to meet bi-monthly since. Providers share good practice and common issues, which are regularly reported back to the Mental Health Board .

Common issues reported included staff and service user morale after the challenging Christmas and winter periods, with improvements reported as vaccinations ramped up.

Providers were also checking in on the commissioning intention of the Health and Social Care Partnership about contracts up for renewal in 2021. Providers also noted the lack of a commissioning manager for joint mental health services.

Third Sector Engagement

Our Members

Alzheimer Scotland
Bavs
Berwick & District Friends of Dementia
Borders Carers Centre
Borders Citizens Advice Consortium
Borders Independent Advocacy Service (BIAS)
Borders Samaritans
Borders Talking Newspapers
British Red Cross
Brothers of Charity Services (Scotland)
Carr Gomm Borders
Central Borders Citizens Advice Bureau
Cheviot Youth
Eildon Housing
Encompass
Garvald West Linton
Headway Borders
Health in Mind
Interest Link Borders
Nature Unlimited
Outside the Box Development Support
Peer 2 Peer Mindfulness Ltd CiC
Penumbra
PND Borders
QME Care
Royal Voluntary Service
Serendipity Recovery Cafe Network
Scottish Borders LGBT Equality
Streets Ahead
Survivors Unite
The Bridge
The Physiotherapy Trust
Trust Housing Association
Victim Support
Youth Wellbeing Coaching CIC

Corporate Members - 31
Unincorporated Members - 5
individual Members - 43

The sector and the HSCP

Following concerns about the relationship and engagement of the Health and Social Care Partnership with the third sector, we and the Borders Carers Centre agreed to draft a letter and seek wider approval before sending to HSCP and IJB.

It flagged concerns on the quality of co-productive processes and engagement for both the third sector and people with lived experience. We received the support of a majority of provider members.



Strategic Needs Assessment

We were asked via our role on the Public Protection Committee to look at the voice of service users in relation to the Joint Strategic Needs Assessment of Adult Protection.

We wrote to third sector providers to ask what information they currently gather,



Training



Learning Network

We had to cancel all training from April-June 2020 due to Covid-19 restrictions. We were able, from June, to move some of our training online with remote delivery via Zoom or Microsoft Teams.

We ran a 'summer school' over July and August - when training usually winds down - to test out the online model and to try to gain some ground lost at the start of the pandemic. This was relatively successful.

We were not able to offer as wide a range of courses or to put on as many sessions as a usual in the programme. But our trainers worked hard to convert existing courses to online delivery, generally having to condense them into two-hour sessions to make them more conducive to learning.

In September, we agreed that essential training only (Moving & Handling and First Aid) - which require face to face delivery - could go ahead at Triest House, with all the guidance in place. This involved extensive risk assessment and alteration of our space and procedures, including providing PPE, extra sanitising and physical distancing measures. It also meant numbers were reduced to meet the Covid-19 restrictions.

Some courses could not be delivered online at the instruction of the awarding body - Scottish Mental Health First Aid, ASIST and Safe Talk.



"Enjoyed seeing how the course could be delivered online, and how co-training could work using that medium. Good mix of info and interactive questionnaires."

"As the need to work from home eases, this training will help me to prepare a COVID-19 Risk Assessment for the office. This has helped me to think about what measures we can put in place to minimise this risk and protect staff and other people entering the space."

Training

We co-designed and began delivering representatives' training with people with lived experience in March 2021.

Learning Network

In November, we created a survey for service providers, asking how their staff had found the shift in delivery, what barriers they faced to remote training, and what other courses they would be interested in.

We were able to fulfil some requests and we continue to look at the survey results to see how we can help to address some of those barriers and what new training would help to meet needs.

We made a number of recommendations on course delivery – exploring e-learning and team training approaches, and course content/offers. Much of the adjustment is to support staff and service users during and post COVID. We also moved to planning a quarterly programme (rather than six monthly in response to feedback from providers).



Very useful, split into bite sized sections, making it easy to learn, process and retain.

"I now feel I have a deeper understanding of mental health. It was good to be able to ask questions, it was easy to understand and interesting."

"An interesting insight into why people with dementia might act and react to different behaviours around them."

Our Trustees

Gordon Forsyth – Chair
(reappointed 9 December 2020)

Kathryn Peden – Vice Chair
(reappointed 9 December 2020)

Pippa Dickson – Treasurer
(reappointed 9 December 2020)

Jane Douglas
(reappointed 9 December 2020)

Kelly Brown
(appointed 9 December 2020)

Martin Green
(appointed 9 December 2020)

Corrina Beighton
(appointed 9 December 2020)

Our staff

Shirley Barrett
Mental Health Development Worker

Nicola Glendinning
Office and Finance Administrator

Ellen de Groot
Training Administrator

Sharon Riding
Collective Advocacy Worker

Jenny Smith
Chief Officer

Kathleen Travers
Depute Chief Officer



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