Age UK Kensington & Chelsea Covid-19 Emergency Response Report 2020









Contents

A Message from Jess Millwood, CEO	4
Our response in numbers	5
Introduction	6
Supporting with food and basic supplies	7
Volunteers	10
Socially connected	12
Check in and Chat	13
Dementia support	13
Health promotion	15
Information & advice	16
Shopping and DIY	16
Health & wellbeing	17
At Home services	17
My Care, My Way & Health & Social Care Assistants	17
Social prescribing - Age United	18
Key learning points	19
Our helpers & supporters	20

Age UK Kensington & Chelsea, 1 Thorpe Close, London W10 5XL 020 8969 9105 www.aukc.org.uk Registered charity number: 1082658

A Message from Jess Millwood, CEO



This report captures our response to Covid-19 during the National Lockdown from March – July 2020 and offers a chance to reflect on a period of huge challenge and upheaval. We have sought to identify lessons learnt from our Emergency

Response, as well as highlighting achievements and most importantly thanking all those who have supported us in this effort in so many ways. Whilst the National Lockdown has been lifted now, Covid-19 rates are again rising daily, and we continue to seek the best and most sustainable ways to provide support and to connect with older people.

Covid-19 is above all deeply personal. Everyone has been affected by it in one way or another. I wanted to share with you some notes I made during lockdown which are of a more personal nature. Of course, it's just one perspective, but I hope it helps illustrate the sort of challenge and pressure we were all under as we tried to respond in the best way we could.

I would like to end by saying a huge and utterly heartfelt 'Thank You' to the following groups of people who collectively made the Emergency Response happen:

Our **staff team** who stepped up immediately and threw themselves into the Emergency Response. In practice this meant a repurposing of roles, learning new skills overnight, understanding infection control, setting up and running a mass food distribution effort, unpacking deliveries at the crack of dawn, handling huge numbers of call and emails, moving services online and by phone, and responding on the ground in a pandemic. The strength and focus of the staff team and their flexibility, can-do attitude and levels of care was outstanding. It is clear that Our Emergency Repsonse saved lives as well as relieving anxiety, isolation and hunger. Our fantastic carers were out in the Borough throughout, providing care and support. But I would also like to acknowledge the toll that was taken. It was at times really difficult work, often isolating, sometimes frightening, frequently exhausting. Thank you to all of you, you're a fantastic bunch!

March 11th. News rolling in from overseas is grim. Covid-19 starts to dominate our thoughts.

March 12th. Realisation sets in that this will affect us all in ways we'd never imagined. The team talk late into the evening, sketching out the ways in which it will affect older people most and we can best offer support. We finally settle on three key strands: access to food, isolation, and health and wellbeing.

March 13th. I talk briefly about our plans to the Volunteer Centre CEO. He's immediately onboard and invites me to a meeting later that day with other Third Sector organisations. I lay out our plans and people are instantly supportive, stepping up to offer premises as distribution centres, join the cross-community effort and commit staffing. In just one day we have 6 new partners.

March 18th. Now all the news is Covid-19 and it dominates work too. We put a call out for donations of long-life food. We are plunging into the unknown but the feeling of focus and determination in the team is palpable.

March 23rd. The Manager leading on our Emergency Response has Covid-19 symptoms and sounds terrible. The Senior Team recalibrates itself to step in. Staff across the organisation are stepping up and stepping forwards. I'm so grateful for the team. Boris Johnson announces lockdown. It's happening. We need to start getting food out, fast.

March 25th. I leave the office just before 8 and as I'm walking through the streets, I'm confused at first by the sound of clapping. It's the first time, and it sounds alien in the dusk. I try to feel comforted but I just feel lonely, and scared.

March 26th. 30 care packs out so far containing food and basic essentials. Staff and volunteers are exhausted and we realise that the system we have is unsustainable and cannot scale. Referrals are pouring in. Staff report older people phoning in tearful and anxious, many with very little food left already. The team respond, reassuring and delivering urgent packs within hours.

March 28th. Weekend is spent completely reconfiguring the system. Several pieces of good news happen which together change everything. A local removals firm, Davis & Mac, steps in and takes all the delivery logistics off our hands. A robust system is built almost overnight, their drivers step in and our first significant donations arrive. We've barely had a moment to fundraise, but it's a huge relief to know that the support is there. March 30th. My time is now mostly spent trying to build and manage multiple supply chains to ensure we have enough food. It's incredibly challenging because panic buying means that shops have been stripped of the long-life items we need. I end up with 12 different supply chains, every one with inbuilt weaknesses ranging from staff sickness to lack of supplies. I learn to talk about ambient goods and how to hack supermarket phone systems to get through to the store managers. Some of them turn out to be incredibly kind, emailing me with stock at nearly midnight, and offering donated items and money off. They're working under incredible pressure, with many staff self-isolating and huge demands on stock. We're getting around 70 new referrals a day, but our new system is coping well and we're scaling.

April 2nd. Supplies still dominate my days and evenings. I can just about get enough in for the next day, only to start again, working my way round the suppliers.

Easter weekend. We're now sending out over 500 Care Packs a week. I'm still really worried about supplies. I spend Saturday in the basement and loading bay of a supermarket, hunting down crates of supplies with the store manager. He tells me he's been hiding loo rolls for us.

Easter Sunday, April 12th is spent in an East End wholesalers. We're looked after by the manager after explaining what we are doing, and while other customers are limited to three of each item, we are allowed to clear shelves and stack up our huge trolleys. We drive from East to West London where the Al Manaar team are waiting. Our van is packed full, but with so many helpers it quickly empties into the Mosque. There is so much kindness and community around.

April 13th. The team are emailing round quotes from calls and messages and it's clear that we are making a huge difference for people. An ex-firefighter tells us we saved his life. He was hungry, had no food in and was too frightened to go out.

April 29th. Emotional day, starting when a supporter writes with a substantial donation. It's a huge relief and secures the Emergency Response. Numbers continue to climb and we're at over 700 a week now. Criteria is that you have to be alone and without anyone in the community who could bring provisions. It's the bleakest of thoughts to think of so many people so cut off. The Response Manager - now thankfully recovered from Covid-19 - and I chat about it, both welling up. Later we get an email thanking us all: she writes, "I'll be clapping for you tonight". That evening, as I'm standing on my own doorstep clapping, I think of her out there alone and the tears come again.

Our wonderful **volunteer team** who supported the Emergency effort in numerous ways, day after day. They made calls, picked up medication, packed up boxes, went on gruelling delivery runs and helped keep everyone's spirits up. You were all superb!

Our **Board** for supporting us to lead with our hearts and guiding us through.

Our **Community Partners,** in particular Al Manaar who let us use the Mosque as a distribution centre, St Cuthberts and Bay 20 who cooked for us, the Volunteer Centre for being a whirlwind of support and action, RBKC and the NHS for your collaboration and support.

Our **Local Business Partners,** especially Davis & Mac whose logistics system and drivers meant we could reach 1000 people a week, 7 Saints who cooked hundreds of delicious fresh meals along with Chelsea Football Club, TFL and Net a Porter for supporting with vans and drivers and Bol for hundreds of soups!

Our **funders** who together helped us raise £300,000 in just a matter of weeks, and meant we could reach everyone who needed us – Julia and Hans Rausing Trust, Kensington and Chelsea Foundation, Westway Trust, RBKC, Calleva Trust, Rotary Club, Kusuma Trust, Big Local, Age UK, Waitrose, John Lewis and many individuals.

Thank you to you all – we couldn't have done it without you!

essi- Nilliand

Jess Millwood CEO of Age UK Kensington & Chelsea

Over **1,000** older people supported every week with food, social contact and health and wellbeing projects





OUR EMERGENCY RESPONSE IN NUMBERS.



750

Mini Care packs

248

older people were linked wit

60 volunteers for a weekly friendship telephone call

> **199** older people supported by our Information and Advice Team



335

receiving support

contacts with people living

carers to ensure they were

with Dementia and their

200 Dementia Activity Packs

11,662 fresh meals



250 older people were

supported to set up & access Zoom to enable them to access activities online 10 Diabetes

Support Sessions





Introduction

The rapid spread of Covid-19 in early 2020 faced all of us with an unprecedented challenge. We did not have a blueprint, and scientists and medics were racing to understand, limit and treat the virus.

Our major concerns for older people in the Royal Borough of Kensington and Chelsea focussed around three main strands:

- Access to food and basic supplies;
- Social isolation and
- Maintaining health and wellbeing.

Identifying these strands early on enabled us to communicate our plans clearly and simply, both internally and externally, and to keep our focus in a fast moving environment. We knew that as soon as lockdown happened we would need to be ready to carry out our Emergency Covid-19 Response, and time to plan was incredibly short. Fortunately community partners, including Al Manaar, the Volunteer Centre, Kensington and Chelsea Social Council and Bay 20, stepped up immediately to support the effort, and *RBKC* and the *NHS* responded by setting up almost overnight a Community Resilience Group, bringing together key players across public health, the NHS, the local authority and the voluntary sector. Throughout much of the lockdown this Group met daily, ensuring that the response was joined up, fully informed and responding to local needs effectively.

The essential question for us was how to respond, not whether to respond, despite not having any external funding attached to the project when we first began. We are incredibly grateful to the *Julia and Hans Rausing Trust* for supporting our project so early on and to our many other funders for enabling us to reach the most isolated older people across the Borough. Our food response stepped down at the end of July as lockdown restrictions lifted but we continue to support older people remotely, and face-to-face where we can.

Supporting with Food and Basic Supplies

We knew that many older people often do small and very regular shops, getting in the supplies they need for a day or two. This meant that many older people would not have additional supplies once the lockdown started. People who had access to the internet were finding that shopping slots were now booked up for months. We realised that issues of both food insecurity and food poverty needed to be addressed and so we planned an Emergency Food Distribution Service to start on Day One of lockdown, with the following eligibility:

People over 65 living alone or with a partner also over 65 who had no friends, family or other community support who could help provide food.

This approach encompassed both the 'clinically vulnerable' and 'clinically extremely vulnerable' groups as categorised by the government. We worked in close partnership with *Al Manaar*, who allowed us to run our Emergency Food Distribution Service from their Mosque, and gave us huge support from their staff and volunteer team.



Our first donations arrive!

We devised a weekly standard Care Pack to include essentials such as milk, bread, tinned food, toilet roll, soap and nutritious packet meals. Each person would also get a 'Starter Pack' which included household essentials such as washing powder, cleaning spray, and washing up liquid.

We hit an early problem on 23rd March when the Project Manager supporting the Emergency Food project became unwell with symptoms of Covid-19. Other senior managers stepped in to carry on with the project as that evening there was an announcement from the government that we would be going into National Lockdown from 24th March.

The team started distributing to our first referrals with the help of many volunteers on Wednesday, 25th March. Five issues arose very quickly:

- Donations were not coming in fast enough to cover the potential demands on the service. Some of the donations were not suitable, and the nature of donations meant we could not standardise the Packs.
- Most major supermarket chains were running out of essentials due to people panic buying and mass hoarding of basic supplies such as tins, toilet rolls, pasta, etc.
- Care Packs were not nutritious enough.
- Some older people were not able to cook (i.e. living with dementia, significant frailty, major health conditions, lack of cooking skills, etc.) and needed more support than a Care Pack.
- The model of delivery to clients was not going to be sustainable with volunteers on foot due to the time it took to deliver each care package and the worry that volunteers would get extremely tired.

Within two days we had revised our plans and streamlined our approach, which enabled us to scale up as demand increased. *Waitrose* supported us with almost £1,000 of food and toiletries which we selected ourselves, and the CEO and team sourced funding to support the project in a much more sustainable way.

Kids on the Green linked us up with a local removals company, *Davis and Mac* who gave us fantastic support with logistics, drivers and vans to deliver Care Packages to clients with the support of volunteers. *Waitrose* gave us a dedicated driver free of charge from their *John Lewis* team to bring supplies from the Belgravia store, and *TfL* via Dial a Ride at Westway Community Trust and *Net a Porter* also supplied drivers and vans to support deliveries.

7 Saints restaurant started to make delicious fresh daily meals for older people unable to cook, and we introduced a Mini-care Pack to go alongside these which did not contain any tins. Over time, *Chelsea Football Club* also stepped up to supply fresh daily meals. Altogether we supplied almost 70 older people a week with daily fresh meals.

We quickly improved the nutritious content of the main Care Packs with fresh vegetables and fruit and a freshly cooked snack from our partners at *St Cuthbert's Centre*, as well as adding packs of rice, cereal, and bread. The Care Packs were designed to enable people to stay completely indoors, if that is what they had to do, covering all meals, drinks and snacks for the whole week and including a few treats as well to lift the spirits!

Delivery of the weekly Care Packs was an excellent vehicle for messaging around Covid-19, as well as mental health and accessing the NHS for other health issues. We also distributed our Newsletter to everyone in receipt of a Care Pack.

Once our systems were in place, we were able to scale up and meet the food needs of over 1,000 older people a week for over four months. We were able to adapt the system to provide food suitable for vegetarians, gluten-free and diabetic diets, dates over Ramadan and food tailored for different communities. We were also supported by our partners at **Bay 20** who stepped in to provide hot meals in emergency situations: on a number of occasions we provided a super-emergency response to older people completely without food within a couple of hours, in the evening and at weekends.

Our volunteers were absolutely amazing and generously gave so much of their time. Their dedication and passion for the work they were doing was incredible and we cannot thank them enough, particularly as the work could be hard going, carrying heavy bags up lots of stairs!

From a survey of older people who received our Care Packs, we found that:

- 48% were Digitally Excluded
- Of those who did have access to the internet, 37% were not confident using it
- 49% were from Black, Asian, Minority Ethnic Communities
- 27% reported that they were struggling emotionally as a result of the lockdown

(results from a survey of 296 older people)



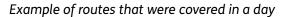
8 | Age UK Kensington & Chelsea







Each volunteer would go with a driver and deliver door-to-door food packaged to those clients in need. It was strenuous work and averaged around 5 – 6 hours per day; many areas were hard to reach or required walking up stairs in tower blocks where lifts were out of order. Volunteers often delivered food to the same people every week and could report any concerning changes which our Volunteer Manager followed up on. We heard how much older people valued not only the food, but the cheeriness of our drivers and volunteers, often the only people that the older person would see in a week.





"Thank you very much...very much appreciated...am having cancer treatment and feel more secure... grand job."

In total we ran nearly 14,500 deliveries across the borough, supporting many older people we had never had contact with before, from a very diverse range of backgrounds. And this is because we all worked together as one to support the community. Without each different part of the machine, this project would not have been the success it was. Age UK K&C are honoured to have been involved in a project like this and feel very privileged to have been able to work alongside everyone in the community during this time.

"speechless...most wonderful thing...totally unexpected...totally overwhelmed...you thought of everything...even razor blades...can't thank you enough...like Christmas."

"Wonderful gift...absolutely fantastic...over the moon...very impressed...I clap for you as well on Thursdays...thank you for what you are doing...outstanding...thank you to the volunteers who are taking risks for us."

"Thank you so much to all the wonderful people at Age UK who are helping me...wonderful gift...eggs are wonderful...soups very handy...bowls delicious...thank you."

Volunteers

Volunteers became the backbone of our projects and without them the programme would not have been the success that it was. The Volunteer Manager contacted all volunteers to explain that usual services were stopping due to Covid but that there were emergency response projects that we needed help with.

Three strands were identified:

- Food package deliveries
- Medication collection from pharmacists
- Telephone Check in and Chat

Medication collections involved volunteers picking up & delivering prescriptions to people's homes. Volunteers responded immediately to requests and we were able to recruit and match volunteers locally to avoid using public transport.

Our volunteers quickly adapted to change. Our face-to-face befriending service went remote via phone calls, and we scaled up the service to reach hundreds more isolated older people with a weekly phone chat from a volunteer.

Our Volunteers were flexible, committed, kind, tolerant, caring and went the extra mile!



Jennifer - A volunteer's story

On an average day of deliveries, I visit 35-40 different homes. That is exposure to the lives of 35-40 different people I would most likely not have come into (social distance) contact with. One of the things that has surprised me most when I knock on these doors is how completely different and unique each person's experience of the lockdown is. Behind some doors are people who are genuinely terrified for their lives when it comes to the virus. Behind other doors they are counting the days until they are "released" and can go to the pub just like everyone else. I have learned to be extra sensitive and remind myself that just because I am not particularly frightened - it doesn't mean that other people aren't.

I have been amazed at the utter gratitude shown by 99% of those who are receiving the Age UK K&C care packages and fresh meals. Elderly people from all backgrounds and religions are constantly telling me "God bless you" and they genuinely seem to mean it. I have met people who have done fascinating things and led storied, wonderful lives. They don't want to be isolated any more than the rest of us. They don't want to feel old. But it will happen to all of us eventually - if we are lucky - we will all get old.

Volunteering during the lockdown has highlighted to me just how well we look after each other in the United Kingdom. I have lived in this country and the Borough of Kensington & Chelsea for 16 years



and have not really had much exposure to social and sheltered housing. While no country is perfect, the UK does an extraordinary job of helping house and shelter vulnerable people who might otherwise be unable to afford a place to live. That safety net in combination with assistance from a voluntary sector charity like Age UK K&C has made it possible for thousands to get through this crisis in a far better way than they otherwise would have.

I have been partnered with drivers and vans ranging from Net-a-Porter to TfL Westway to most recently the Mayor of Kensington and Chelsea's driver! I spent my career sitting down at a trading desk for almost 20 years and I was not used to the hard, physical work of carrying large bags of groceries up six flights of stairs while wearing a mask. Having said that, I certainly don't have to go to the gym (if they were open) after a day of dropping off food!

Age UK Kensington and Chelsea is one of the most organised charities I have ever had the pleasure of working with. Good organisation on the operational side makes all of the difference to the quality of volunteers you are able to attract. Teresa and Michael are constantly asking me and the other delivery volunteers for feedback on how to improve things. They know that we can offer insight from the "front line" that they might not see from where they are sitting. Volunteering for the Age UK K&C Covid Response has been enlightening to me in ways that are far too many to count.



"We would like to thank you and Age UK for the food Care Packages delivered every Monday which have been a "god send" for our survival as we do not have anybody, relative, friend, friendly neighbour near us who we know could have helped us. Your hard work during such dangerous and difficult times is extremely appreciated and we would like to thank Jennifer especially, your volunteer who, the majority of the times, delivered the food."

"I would like to thank you all for your extraordinary support and Care Packs during the most difficult moment of the lockdown. I have enjoyed your food deliveries for two months, together with the exceptional kindness of your charming volunteers. It was so wonderful to talk to them, however briefly, every Thursday."

"I want to thank everyone at Age UK, but especially the volunteers who must have been very tired from delivering all day long to some flats which were not an easy option. Mine, for instance, is up two flights of stairs and there is no lift. This is no mean feat when the food parcel is so heavy! Thanks to all who climbed those stairs on a Friday so that I might stay inside and shield. I am most grateful."

Socially Connected

Age UK Kensington and Chelsea were committed to ensuring that our older adult population remained socially connected during the Covid-19 lockdown. As our in-person services stopped due to our office closing and our group spaces no longer in use, we had to be creative in our approach. The team set up various programmes to ensure that the older adult population was socially supported through:

- Online group activities;
- Check in and chat;
- Dementia support;
- Health promotion activities;
- Information and Advice;
- Health welfare calls.
- Activities and Events

As face-to-face group activity had stopped, we trialled different video conferencing software packages to see which would best suit regular activities, including chair exercises, yoga and Zumba, lessons in English, French, Italian, German and Spanish, cooking lessons, art & music, and games sessions. We saw this as an opportunity to explore new ways to run the service and work closely with other community organisations delivering new activities and events.

We settled on using Zoom, which suited the needs of staff, volunteers and older people alike. At first it was hard to connect older people online because they did not necessarily feel confident using video conferencing and some were lacking motivation after being isolated. The team provided 1:1 support to train clients in using Zoom. After trying it out and growing in confidence, they started inviting their friends and neighbours along too, so we now have more than 250 people connecting via Zoom!

Because they were not able to get out and have a proper walk, many people had started experiencing pain. So we increased the number of physical activities on offer, working with new partners. These classes helped get people moving and helped reduce any discomfort they may have been feeling. We created a virtual community where we supported each other every day.

We have received some very positive feedback from existing and new members.

In 2019, we had held our very first Age UK K&C Carnival Celebration for our North Kensington residents. It was hugely successful, so this year we decided to uplift older residents' spirits by moving the event via Zoom online.. With no experience of organising such an event virtually, it was quite a challenge, but a student intern helped us make this event a success again, cooperating with a number of different organisations. We had over 150 people connecting via Zoom on Sunday, 30th and Monday, 31st August! The range of activities for participants included a Caribbean cooking lesson; live music and dancing including Steelpan, Calypso and Soca; a Carnival History Session; Carnival Art Appreciation; Carnival Music Appreciation; Carnival Costume and Dance sessions.

We delivered over 350 online sessions supporting over 250 shielded older persons

"I just want to send you a few lines, stating my gratitude and best wishes, to all the volunteers. You had made it happen through Zoom; to keep us, lonely old people occupied, entertained and happy with exercises and learning languages. My favourite teacher is Matthieu the French teacher! I had never learned French before, but now, just after 2 lessons, I understand a bit and I enjoy his lessons tremendously" "Thank you so much for organising the classes. They were absolutely brilliant. I always feel very positive after them and the exercise ones make me feel much taller and fitter. It's just what I needed."

"I just wanted to thank you and Ximena for all the work you're doing to organise a programme for us during this extraordinary time. It is greatly appreciated."

Check in and Chat

Because of the Pandemic our escorting and face-to-face befriending services had to be discontinued. We asked our existing volunteers to contact the older people they had been supporting with face-to-face befriending by phoning regularly instead.

We also approached new volunteers to participate in a temporary telephone befriending project called Check in and Chat. We were aware that many of our members who would usually be socially connected through activities, going out to meet friends or having family visits, were now under instruction not to leave home or have visitors.

The initial list of clients was over 500 so we took off those that were in contact with our other services. From there we matched volunteers to older people who had asked for a regular call.

Alongside more general chat the volunteers checked to ensure clients were able to access food and prescriptions and had no other problems

which we could help them resolve. Volunteers were asked to report back to the programme leader each week if there were any issues.

"You're wonderful, you're amazing, you all pulled together at a time like this" SMS received from person who is hard of hearing and over 80

"I am cut off from the world- I have no TV, Radio or laptop/ internet thank you for making contact with me, God Bless you"

The list grew to over 250 members getting a weekly call from one of around 60 volunteers. We were able to support the food delivery team in helping identify delivery failures, those still in need of food, those with special dietary requirements and those who had managed to source food elsewhere. The volunteers also worked to encourage and support members on the food list to find alternatives before the project ended to ensure a smooth transition.

We were repeatedly able to pick up on client's health issues and were able to find them support. We managed to find language-matched volunteers for a number of older people for whom English was not their first language.

The object of CIAC was to reduce isolation during lockdown and we feel it very much achieved this aim. We have had lovely feedback from both older people and volunteers on the benefits they have felt from being involved.

Our Check in and Chat service helped over 250 clients with the help of 60 volunteers

Dementia Support and Dementia Advisory Service

Our Dementia support team had to stop all home visits, outings, Memory Cafés and Exercise for the Mind classes, and staff had to start working from home. Our goals were to maintain contact with clients, reach out to new clients, enable clients to remain independent during the pandemic, to monitor safety, health and wellbeing and liaise with other health and social care professionals. We contacted all our clients and where appropriate, family carers to inform them of this change.

In place of 1:1 home visits and memory assessments the team made telephone calls to our existing clients, the My Memories Café clients, Memory Service referrals and responded to new referrals at least once a week. We also checked in on clients who had recently moved to care homes and who were experiencing a further change in the routine of their lives. At the beginning of lockdown we called the majority of our clients more than once a week as they faced major changes to their routine. For some clients who have access to social media we have been able to contact them over WhatsApp/Skype etc.

We needed to find something to replace the activities and participation associated with the Memory Cafés and Exercise for the Mind sessions so we produced a Memory Café At Home Magazine and Activity Packs.

Right from its inception we recognised that the Memory Café at Home Magazine had to have content written by our clients. In the two issues so far, we have included interviews with clients on their experience of lockdown, recipes, favourite things that get you through difficult times, and poems. The Magazine includes crosswords, wordsearches, colouring in as well as a listings section.

Activity Packs were offered to people on our caseloads and also to anyone newly referred through Social Services, My Care My Way, the Community Mental Health Team, Age UK K&C internal teams, Admiral Nursing or the Memory Service.

The aim of the Activity Pack is to provide bespoke person-centred activities for each client. We do this by asking the client and/or family carer what activities interest them and consider the stage of dementia the person has reached. We developed a checklist as an aide to open up discussion. This was particularly useful for newly referred clients whom we had not met in person.

Both the Activity Packs and Memory Café at Home Magazine have been well received by older people living with dementia and their family members. A typical response is that people can tell that the packs have been personalised for them, that we have listened to them and know what interests them. With the Activity Packs we engaged far more people living with dementia than usual as a lot of people with advanced dementia do not tend to access community groups or day centres.

Between 1st April to 1st September the team made 1,335 contacts with older people living with dementia, equating to 457 hours.

We maintained contact with Heath and Social Care professionals through emails to raise our clients' concerns about changes to health. This has meant that clients with concerns about cancer, for example, have been referred to hospital outpatients for tests at a time when cancer referrals have been falling across the country.

We have continued making referrals and signposted on to other agencies for information and advice on welfare benefits, taxi cards, housing repairs, benefit tribunals, etc.

We made up 200 individual Activity packs for older people living with Dementia

Examples of what is in an Activity Pack:

- Booklets on exercise programmes, local history booklet, poetry booklet and reminiscence
- Short stories, interesting articles, news, history, and articles of specific interests to a client
- Dementia, Stage Specific Jigsaws & Dementia, Stage Specific mind games
- Memory boxes
- Animal bingo/albums /cards
- Wordsearch/crossword/sudoku large print books
- Painting and art equipment, (Dementia Stage Specific) mindfulness colouring sheets, scrap books, clay, craft equipment to make jewellery boxes, cards, masks. Rug making kits, pompom kits, Cross stich.
- Sensory items for people with later stages of Dementia. Lifelike breathing dogs and cats, squeeze balls, smells, textiles, lotions, fidget tool kits and blankets. Large A3 colour art pictures.

'Mrs W absolutely loved it (cuddle dog), was so happy to see it and her face brightened when holding it. She used to have a little dog she loved in the past and the puppy brought memories.' (Mrs W is nearly 100 years old and mostly bedbound) 'I have just spoken to Mrs E who was very moved to the point of tears with the Activity Pack we sent her. We "hit the nail on the head" and it meant so much that we thought about her and sent her the pack. Mrs E wanted to pass on her thanks to the people who put the pack together.'



Health Promotion

As all of our group spaces were closed our Health Promotion Coordinator facilitated support groups for older residents living with long term conditions and delivered and/or arranged health talks online. We were able to provide peer support through Zoom chats, and individual telephone calls to those who didn't have access to Zoom or who are uncomfortable using it.

The Coordinator delivered two chair exercise sessions a week on Zoom, one for our Activities and Events team and one for Lancaster West residents association (osteoarthritis support group). The Health Promotion Coordinator also facilitated a weekly call with members of the Macular Support group and a weekly "Coffee and Chat" group on Zoom for informal carers. The Coordinator also led a 10-week on-line Diabetes Support group in collaboration with the Nottingdale Community Champions and the West London CCG.

We delivered 10 Diabetes support sessions in collaboration with Nottingdale community Champions & clinicians & specialists from West London CCG supporting 21 older people



"I found the sessions with Dr St John and Razia Amin very helpful and informative, the info was clear and easily understood, the question and answer parts were interesting and the two ladies gave clear answers and were patient and considerate with the inquirers."

Feedback from support worker:

"I just wanted to thank you for my client's participation in your ongoing online Diabetes support group. Since I have started to work with X I have seen the effort she puts in managing her health in general but especially her diabetes. She lives alone and a lot of her routine and time goes in her attempts to maintain a healthy diet, monitor medication, cooking from scratch, etc. For a good while X was reporting feeling upset, not able to control her insulin depended diabetes no matter what she did. Just prior to the group I could see how this situation was getting very frustrating and difficult for her."

"Even after X attended a few sessions as the group is ongoing I have observed a big change in her feeling happier and more empowered with her ability to manage her condition. X reported - "Its great!! After I joined the course my diabetes is much more stable and I am now able to exercise again" (which she keeps up every day).

"X said that she liked the fact that she could ask many questions which she had written down in a list and found particularly helpful the oneto-one support call you arranged with specialist Dementia Nurse Razia Amin. Razia picked up an important change in X's insulin medication which was passed on to her GP.

"Finally X's family were also thankful for referring to your group, as they were very concerned about X's diabetes not being under control. Thank you for all your valuable work and the difference it makes to our member's lives."

Information and Advice

When Covid-19 hit, many Information and Advice cases needed progressing whilst also chasing up new referrals not yet contacted. Where home visits and office appointments had been arranged pre-Covid, post-Covid clients were assisted via telephone and post. We posted to clients data protection and consent to audit forms, and client authorisations; these were then signed and posted back by them/their family. Letters could then be written on a client's behalf with the signed authority. Application forms were completed by telephone and then posted for signature and return, so documents could be scanned and saved to the computer before sending off.

A new volunteer (formerly a lawyer) joined the team during the Covid-19 pandemic and was trained via Zoom. His work, and the fact that we are not carrying out home visits so the backlog can be dealt with faster, has enabled the several month-long waiting list for the Age UK K&C referrals to be eradicated and we are now up to date.

We were able to adapt the service to telephone. Some of the appointments can take up to two hours and where clients are comfortable, it is carried out in one sitting, or as it would be if it were face-to-face; if the client is getting tired, another appointment is arranged. Where clients are unable to provide the information needed over the telephone, either due to memory or language problems, with their consent we enlist the assistance of the GP surgery, Adult Social Care, friend and family, to help to meet the goal.

With regards to benefit applications, as an alternative office for the DWP, our I&A team can agree that the start date to any benefit payments is the date we receive the referral and so clients were not penalised by the additional time taken with posting documents back and forth. When dealing with housing queries for clients, or grant applications, utility company or benefit queries, transport applications, all these could be progressed by telephone and post.



We were able to respond to 199 referrals and close 212 cases during this time

Shopping & DIY services

In light of the pandemic we had to close both the shopping trips and DIY Services; however some external and urgent DIY tasks were undertaken for health and safety reasons.

Our Shopping and DIY Coordinator at the start of the pandemic delivered urgent Care Packages to clients five days a week including bank holidays. This service ran alongside the Emergency Food Distribution Service and was more finely tailored.

The main reasons for urgent deliveries were:

- New to the service and had no food
- Hospital discharges

Clients could contact a member of the team before three o'clock and within 2 hours food was delivered to their front door; nobody was left without food. If they called after this time a delivery was made the following morning. During the first two months our Shopping Coordinator delivered approximately 15 urgent deliveries a day all over the borough. This dropped in the following months as fewer new clients joined the service.

With the support of RBKC and the Kensington and Chelsea Social Council, we set up a home shopping service for older people who are digitally excluded. This service offered more choice and control for people than the food boxes and people could call and give their shopping list to us over the phone. A group of volunteers and the Shopping Coordinator would do the shopping and deliver it to the person's front door. The service was popular as there was no need to use the internet or try and get a delivery slot from a supermarket. We would always ensure time to talk as well as dropping off the shopping as for many of them this was the only face-to-face contact that they had with somebody during the week.

Health and Wellbeing

At Home Services and Basic Foot care

Our At Home and Basic Footcare Services would normally provide personalised care, home care and basic podiatry in people's homes. As lockdown commenced, we shifted our focus to essential services only. This meant that Basic Footcare and home care were paused as we focused on personal care for those most in need.

After contacting all of our service providers and clients we agreed what services could be provided during the height of the pandemic whilst undertaking very thorough risk assessments. We had the support of the Local Authority quality assurance team which meant that we operated safely with appropriate PPE to ensure that whole service provision worked smoothly.

We made weekly calls to those of our service users who did not want a visit: this supported independence whilst also enabling clients to talk through any concerns and helped with increased isolation.

At the beginning of lockdown, we had clients who needed increases in their care packages; however as most services were working remotely, it took quite a while to get permission for funding for the increase in those packages. This risk could have

My Care My Way; Health and Social Care Assistants

My Care My Way has continued to operate during Covid-19 with some slight amendments. Previously, the Health & Social Care Assistants (HSCAs) typically were visiting patients in their homes and at the GP practices to conduct health and social care assessments in order to ensure that all their needs were met holistically. Since the start of Covid-19, many of these face-to-face appointments have been paused; the majority of GP practices stopped inviting patients in for appointments and moved these to e/telephone consultations - this included My Care My Way (MCMW) appointments. Accordingly HSCAs also had to conduct their assessments over the phone and use a new e-consultation tool.

Remote working initially faced a couple of barriers: ensuring patients were still receiving all round MCMW intervention whilst supporting staff with the flexibility of remote working. To overcome this, it was agreed that although home face-toface visits were and still are significantly reduced, HSCAs will visit patients at home – wearing the had a detrimental effect on client care; however as the lockdown progressed more efficient systems were put in place and better partnership working ensued.

Just after the lockdown we reached agreement with the bi-borough (RBKC and Westminster) that our Basic Footcare Service was an essential service that should not be closed down. We had very high demand for the service from regular service users and potential service users, so we had to establish new risk assessment processes to ensure it was safe for our staff to go into clients' homes.

We worked in partnership with the NHS and Social Care professionals to get the correct service for a person living with dementia who was at risk at home.

We provided 24-hour care for a service user to enable her to live safely at home until a live-in carer could be sourced for her.

From a Social Worker in RBKC:

"Age UK have been super stars, and I mean that. I'm personally so delighted at the great work Age UK are doing for the older vulnerable people during this challenging time. Brilliant."

correct PPE - if the client is unable to engage via telephone / e-consult, e.g. patients living with dementia, hearing impairments, social concerns. Each patient is assessed on a needs basis, working very closely alongside case managers to ensure those that need face-to-face intervention are being supported, whilst also ensuring minimal risk of transmission to clients and staff and reducing anxieties amongst patients and staff.

The HSCAs' role was slightly adapted to ensure patients have been supported throughout the pandemic with all of their health and social needs, particularly food provision and social connection. Welfare assessments for all patients known to MCMW early in the pandemic have ensured they had accessible support. Anxiety is one big area where support is needed: not only surrounding the disease itself but also the confidence to reintegrate into a new society.

Keeping the MCMW services operating has provided a crucial service to the older population in K&C with all of their health and social needs. Through the welfare assessments conducted by the HSCAs, patients who needed access to a range of support were identified even more quickly than usual. This had a really positive impact not only for patients, but to support primary care demands at a challenging time. The HSCAs were able to identify quickly those that needed food deliveries, medication collection, befriending, welfare checks and general reassurance. Not only were they able to identify and implement support but the HSCAs continued direct support by acting as a main point of contact, providing much needed reassurance.

From a Duty Social Worker

"Age UK in K&C have been amazing in this crisis, and you've been amazing from day 1..."



Delivering an online exercise class

Social Prescribing – Age United

Age UK Kensington and Chelsea delivers a new Social Prescribing Link Worker (SPLW) service for people aged18-65 via our trading arm, Age United. The new service was rolled out in March 2020, just as the Covid-19 lockdown started! So there is no base structure with which to compare the SPLWs' work in response to Covid-19. When the SPLWs joined the service, they were quickly embedded into the Primary Care Networks and practices within the North West London CCG area, but instead of carrying out typical SPLW duties, they supported GPs by conducting Covid-19 welfare assessments to ensure all those clients 18-65 had access to a range of support: food provision, medication collection, welfare calls, befriending and general reassurance. The SPLWs were contacting around 10 clients a day for lengthy welfare assessments and ensuring the clients' needs were still met within the "what matters to me" model of care.

To support the vulnerable client group the SPLWs forged close links with the many voluntary, community and social enterprise services, regular updating Kensington and Chelsea Social Council and the GPs to ensure each client was being supported both from a clinical and a non-clinical perspective. They quickly adapted to a new role in a new environment within a very challenging time. The SPLWs were invaluable during the Covid-19 response, not only as a huge source of support for clients but also to relieve primary care pressures. One of the main needs that emerged throughout this time were the levels of anxiety amongst 18-65 year-olds; not only in regards to the disease but also reintegrating into a new society and what that may look like.

There were many learning outcomes in regards to shaping the SPLW service moving forward but in regards to SPLW impact for clients during a pandemic the following were discovered: Need for further SPLWs; feedback from GPs and primary care is that the SPLWs have been invaluable during this time; not only for client support but also in relieving pressures within primary care. This is a great achievement for a new role during a pandemic and highlights the need for more Link Workers across K&C moving forward.

Anxiety/isolation; two large areas of support required that were discovered during SPLW Covid-19 input surrounded the amplified anxiety and isolation of the whole population group. The SPLWs worked alongside clients to tackle the anxiety and isolation by referring on to Check in and Chat services and were often a main point of call for the client. Moving forward, the SPLWs are slowly supporting clients to reintegrate into society by social distancing walks and supporting to build confidence back up. There is a heavy emphasis on support for isolation and low level mental health interventions currently; this was a high need before Covid-19 but even more so now.

Key Learning Points

Ahead of the start of lockdown, Age UK Kensington and Chelsea had a plan of action to support those who were socially isolated, needed food and required support with their health and social care needs. However, models soon had to change as the crisis unfolded; as an organisation all our services had to be proactive and not just reactive to situations that were appearing, often on a daily and sometimes hourly basis.

- Adaptability and flexibility were key. We built things very quickly and had to be open to failing fast and quickly recovering. This mind-set enabled us to adapt and improve our model as we went along, 'building the aeroplane whilst flying'!
- Our food support system was designed as a universal system, and shopping support for people who could afford to pay emerged later on. Ideally we would have had the two systems running in parallel from the start, both to better support funded and nonfunded options, but also to enable more choice and control for people.
- Working in partnership was absolutely fundamental to the success of the project. One of the major achievements has been the sense of teamwork and camaraderie both within the organisation and working with partners. The whole operation would not have been possible without that sudden and selfless partnership.
- Our organisation and many older people have embraced technology in a way that had never been explored before with use of Zoom, Microsoft Teams, Skype and Komp.

- Although technology was great in providing groups, and empowering for some of our users, it does not replace physical group interaction. There are many isolated people in the borough who do not have access to technology, or understand how to use it, and also many who do not wish to use it. As a result of organisations not being able to run physical group spaces, there are people who are becoming more isolated and cut off from society. Digital Exclusion is now a key priority area for us.
- The pandemic and associated isolation are having a major impact on people's mental health; as a result we need to better understand how to support people when they are struggling, whilst also supporting our staff and volunteers.
- Volunteers have been a crucial part of the Crisis response. Many told us that being part of the effort helped to support their own mental health.
- We have connected with a large number of older people who were not known to Age UK K&C previously and have also been able to reach out to more isolated men as a result.
- At a time when so many of our members felt isolated, we constantly got the feedback that it was nice to know we were thinking about them. The message we sent out to over 8,000 older people right at the start of the pandemic was 'We are here for you'. Many people told us how important and reassuring that message was in such unsettling and uncertain times.





20 | Age UK Kensington & Chelsea