



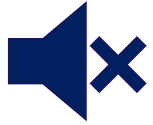
# MCST End of Programme Event

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February 2024



# House Keeping



- Please ensure your microphone is on mute and cameras off to support connection.



- There will be Q&A at the end of today's sessions so please add any questions into the chat function.



- The slide deck and recording will be shared after today's event.



- Enjoy!

# Agenda

- Welcome from Paul Farmer
- Programme Overview from Caitlin Stephenson
- MCST Delivery from Age UK Blackburn with Darwen
- VMCST Delivery from Age UK National Telephone Friendship Service
- MCST Delivery from Age UK Kent Rivers
- Evaluation findings from Research Works Limited
- Legacy of MCST from Dementia Service Development Advisor
- Question and Answer Session

# Welcome from Paul Farmer

CEO of Age UK



# MCST Programme Overview

Caitlin Stephenson: Project Manager



# What is MCST?

Maintenance Cognitive Stimulation Therapy (MCST) is a weekly one- to two-hour-long programme for people living with mild to moderate dementia. Group members take part in meaningful and stimulating activities, proven to help maintain memory and mental functioning. The groups provide a fun, supportive environment where people can build new friendships.



Cognitive Stimulation is the only non-drug treatment recommended to improve cognition, independence and well-being by the National Institute for Health and Care Excellence (NICE).

# Age UK MCST Funding



As a result of the Covid-19 pandemic, many older people living with dementia experienced a decline in their cognitive function, mental wellbeing, and physical health. At the same time, carers of people living with dementia faced unprecedented pressures, with many reporting that they were overwhelmed and struggled to cope.

With generous funding from the Association of British Insurers' (ABI) 'Covid-19 Support Fund', which launched in May 2020 to help those hit hardest by the Coronavirus pandemic, Age UK was delighted to be awarded £2.9 million to set up and deliver MCST across the Age UK network from January 2021 to December 2023. Crucially, this funding gave us the opportunity to pilot and deliver virtual MCST groups for the first time.

# The aim of the programme:

The Age UK MCST Programme would provide grant funding to network partners across the UK to set up local groups that aimed to:



1. Improve wellbeing and cognitive abilities for people living with mild to moderate dementia through greater access to MCST-based interventions.



2. Improve wellbeing for carers of people living with mild to moderate dementia through respite and peer support provided by greater access to MCST-based interventions.



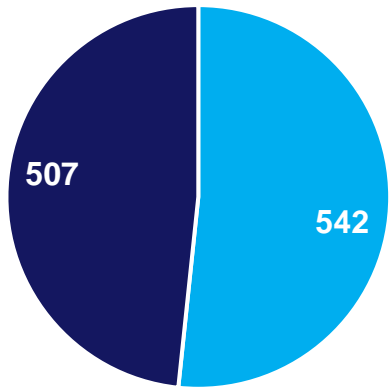
3. Improve knowledge, skills, and confidence in delivering MCST-based intervention/s for staff and volunteers.

# Key Stats:

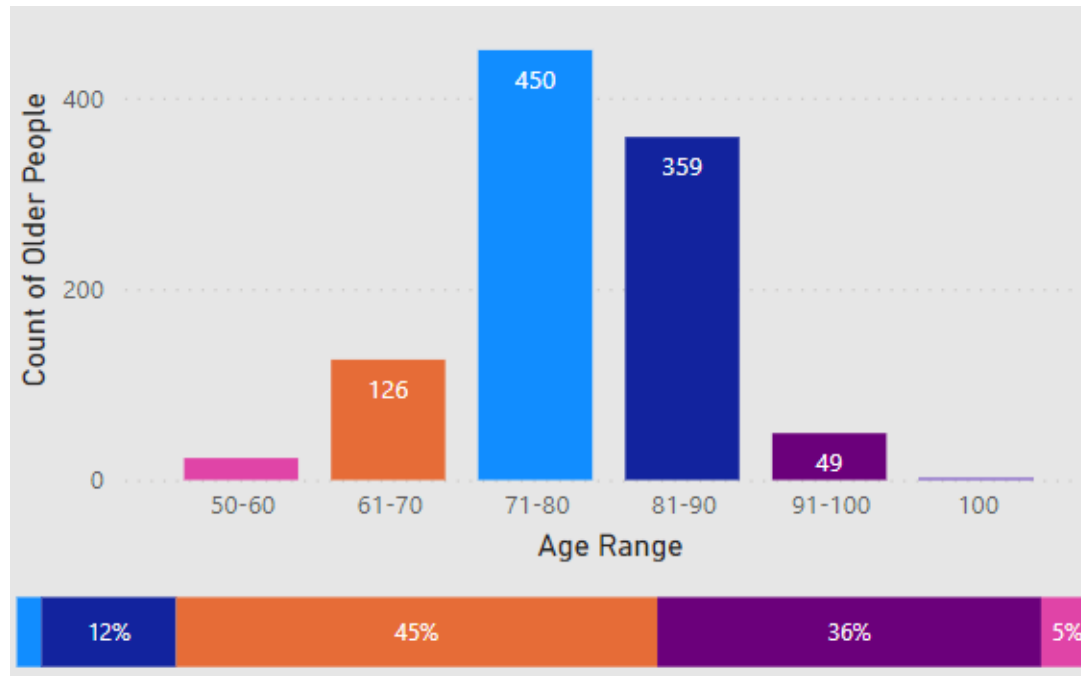
**63** Local Partners

**1** National Telephone Friendship Service

## Gender

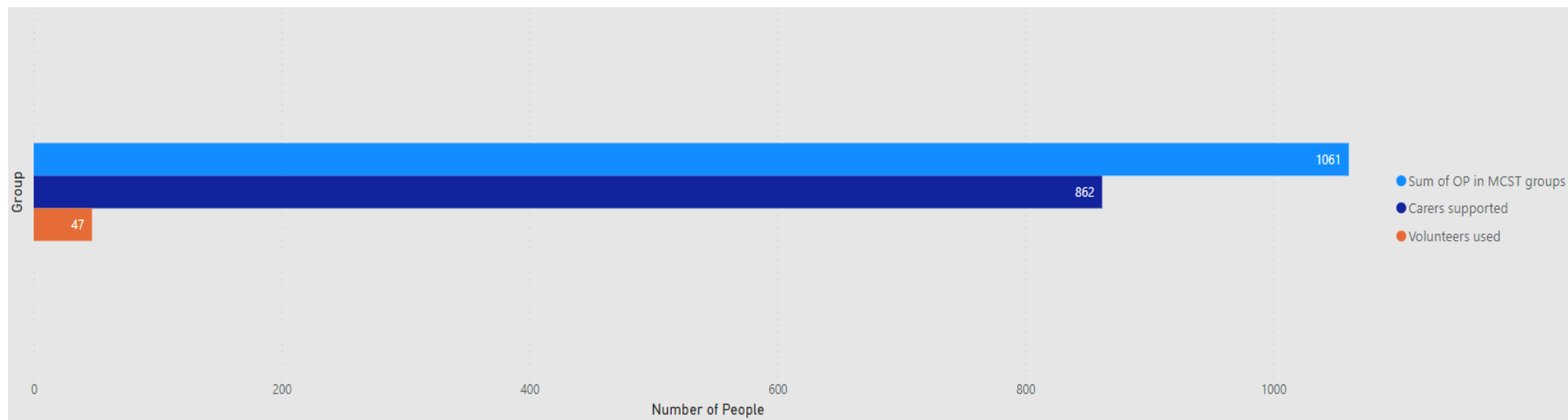
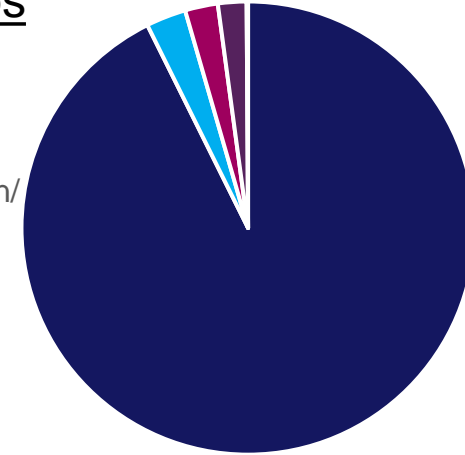


■ Female ■ Male



## Ethnicity Groups

- White
- Black/African/Caribbean/Black British
- Asian/Asian British
- Mixed/Multiple ethnic background



## Training:

**332**

Delivered by Professor Aimee Spector and colleagues at UCL, training specifically on the intervention of MCST was given to the network. In total we delivered 14 MCST sessions, training 332 staff members from the network in the intervention.

**145**

Utilising a 'train the trainer' approach, we worked with Consultant Buz Loveday who delivered a course called 'learning from Living with dementia' to network partners' staff and volunteers. In total we trained 145 staff members.

**2004**

Dementia E-learning was available to the whole Age UK network. This e-learning was provided by Alzheimer's Society and supported our vision of Age UK becoming even more dementia friendly. In total 1828 staff and volunteers at Age UK National and Local Brand partners completed this training.

# Filming and Stories



- Nothing is more powerful in conveying the impact of a programme than hearing from the beneficiaries themselves. We've been fortunate to have been able to translate these written stories into 6 films, all available on [YouTube](#). A massive thank you to all our partners that were involved in the films.
- We also had the privilege of reading some wonderful stories that our partners shared with us showing the true impact of MCST, which have been collated into a stories booklet.



# Challenges



- **Covid 19:** The timing of cohort 1 coincided with the height of the pandemic, which meant many partners were still providing vital support to their communities, whilst reviving other services that were put on hold.
- **Cost of Living Crisis:** Cohort 2 and 3 partners, set up and delivered the programme whilst facing increased costs of their own, and increased demand from older people, due to the Cost-of-Living Crisis.



*Thank you, to all partners, we are incredibly grateful for your dedication and perseverance throughout these challenges, and ultimately delivering excellent support to so many older people.*

## What's coming next...



- Launch of the Age UK MCST Toolkit.
- Findings from the MCST Programme, discussed by our external evaluator Research Works.
- Thank you to all partners!

**Thank you**

# Memory Makers

Age UK Blackburn with Darwen's Delivery of the  
MCST Programme April 2021 – October 2023



# Age UK Blackburn with Darwen

## Our Vision

For all older people in Blackburn with Darwen to have the opportunity to live the life they choose

## Our Mission

To listen to the diverse voices and views of local older people and use these to influence both our own and others priorities. To deliver quality, person centred services which meet local needs and maximise independence.



# OUR MOTIVATION

Developing and delivering programmes to support people with dementia a key priority for our organisation

Prevalence of dementia increasing in BwD

Ageing population in BwD

We are the only local organisation dedicated to working with older people in BwD

No provision of CST or MCST in the local area

Lack of support for people post diagnosis until they reach crisis point

# Dementia Provision in Blackburn with Darwen

*Very little provision in BwD for support in the early stages of dementia*

## *Community Interventions:*

Weekly Singing for the Brain sessions delivered by local volunteers and the Carers Service

## *Commissioned Services:*

Alzheimer's Society Post Diagnostic Support

## *Day Care Services:*

For those eligible for social care support (including Age UK BwD Day Care provision and BwD Council Specialist Dementia Service (advanced dementia only))

# Delivering MCST in Blackburn with Darwen

## Our Offer

- Providing a broader range of activities
- Additional support provided post diagnosis to people participating in the programme
- Sits within our Integrated Service, providing holistic support, referral into wider Health & Social Care services to prevent reaching crisis
- Sessions delivered in both Blackburn and Darwen



# Delivering MCST in Blackburn with Darwen

## Referral Pathways

- Self Referrals
- Family
- Integrated Neighbourhood Teams
- Social Prescribing Alliance members
- GPs and other Health Professionals
- Social Care Teams
- Internal Colleagues
- Wider VCFSE partners
- Memory Assessment Service
- Alzheimer's Society

## Challenges

- Cohort 1 - Took longer than expected to promote the programme and get referrals coming through
- Expectation that transport would be provided by some people
- Not all referrals suitable (dementia too advanced)

# Delivering MCST in Blackburn with Darwen

## Cohort 1:

April 2021 – May 2022

**Group 1** – newly built Housing with Care scheme in Blackburn

**Group 2** – Community venue in Darwen

## Cohort 3:

October 2022 – October 2023

**Group 1** - Community venue in East of Blackburn

**Group 2** - Community venue the heart of Darwen Town Centre

## MEMORY MAKERS

Specialised Activity Sessions for adults struggling with their memory

Our specialised sessions use an innovative approach to stimulate and maintain memory function in a safe and fun way



# Delivering MCST in Blackburn with Darwen

## Successes

- **47** Referrals received
- **45** people engaging in the programme
- Establishment and delivery of **4** groups
- **4** staff trained in Dementia Train the Trainer programme
- **4** staff trained in the delivery of the MCST programme
- **34** Age UK BwD staff completed Dementia E-Learning Training
- Continuation of programme since launch
- Supported by **4** Volunteers
- No increase in the cost of sessions to participants
- **36** staff from external organisations participating in Dementia Awareness Training
- Embedded within the wider Age UK BwD Integration Service

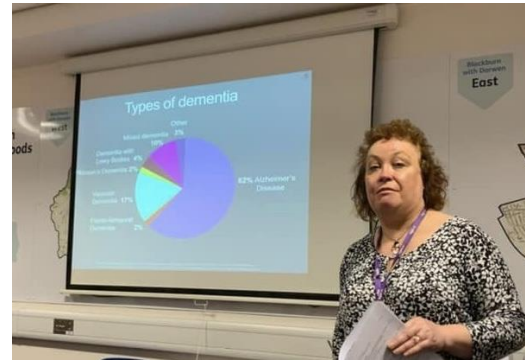
# Delivering MCST in Blackburn with Darwen

## Challenges

- Slow start of initial cohort
- Inappropriate Referrals
- Embedding the offer into the wider system took longer than expected
- Payment system
- Sporadic attendance at times due to ill health etc
- Venues
- Anxiety from families about 'leaving' loved ones
- Completing face to face assessments
- Impact of Covid
- Difficulty recruiting volunteers to support delivery

# Memory Makers.... The Future

- Continue to deliver 3 groups each week
- Establish a group targeted at the South Asian community
- Continue to deliver Dementia Awareness training to partners and local providers of care services, bringing in additional income into the charity
- Develop a programme of social events for families and loved ones to enjoy together



# And So What..... What Difference Is It Making

- Sometimes he is hesitant about coming to the sessions but once he gets there, he doesn't want to leave!
- We really have become like a little family
- I enjoy the sessions and am happy to have made new friends.
- I REALLY enjoyed that! Now THAT'S why they call it Memory Makers!
- We have noticed with mum a great difference with memory, interaction with others and the ability to hold and remember a conversation. She really looks forward to attending and if ever she can't attend due to an appointment, she tells me to make sure I ring to let them know she will be back again next week.
- When I first came to Memory Makers I was really afraid but now I'm so glad I did. Mark is so good at what he does and takes great care of us all.
- We always look forward to Thursday mornings. The people who attend the sessions really seem to enjoy being here and we love to hear the laughter and the singing. Many of them stop for a chat with us and are full of smiles.



**MEMORY MAKERS**  
Specialised Activity Sessions for adults  
struggling with their memory





**Blackburn  
with Darwen**

**ageUK**

**Thank you**

# vMCST & Telephone Friendship

Ruth Lowe  
Head of Loneliness Services – Age UK



# Agenda



Background, opportunity and ambition



Promotion and partnerships



Referrals and delivery



Challenges and highlights



Learning and outcome

# Background, opportunity and ambition



- Telephone Friendship Service and video calls
- Comparison of face to face and virtual MCST
- Trial as a large-scale national service
- Establish challenges and benefits
- Provide additional capacity to partners
- Provide choice and access to older people

# Promotion & partnerships



Paid social media



Age UK website



Printed leaflets



Other 3<sup>rd</sup> sector orgs



Health Care providers and trusts, Social Prescribers and IAPTs

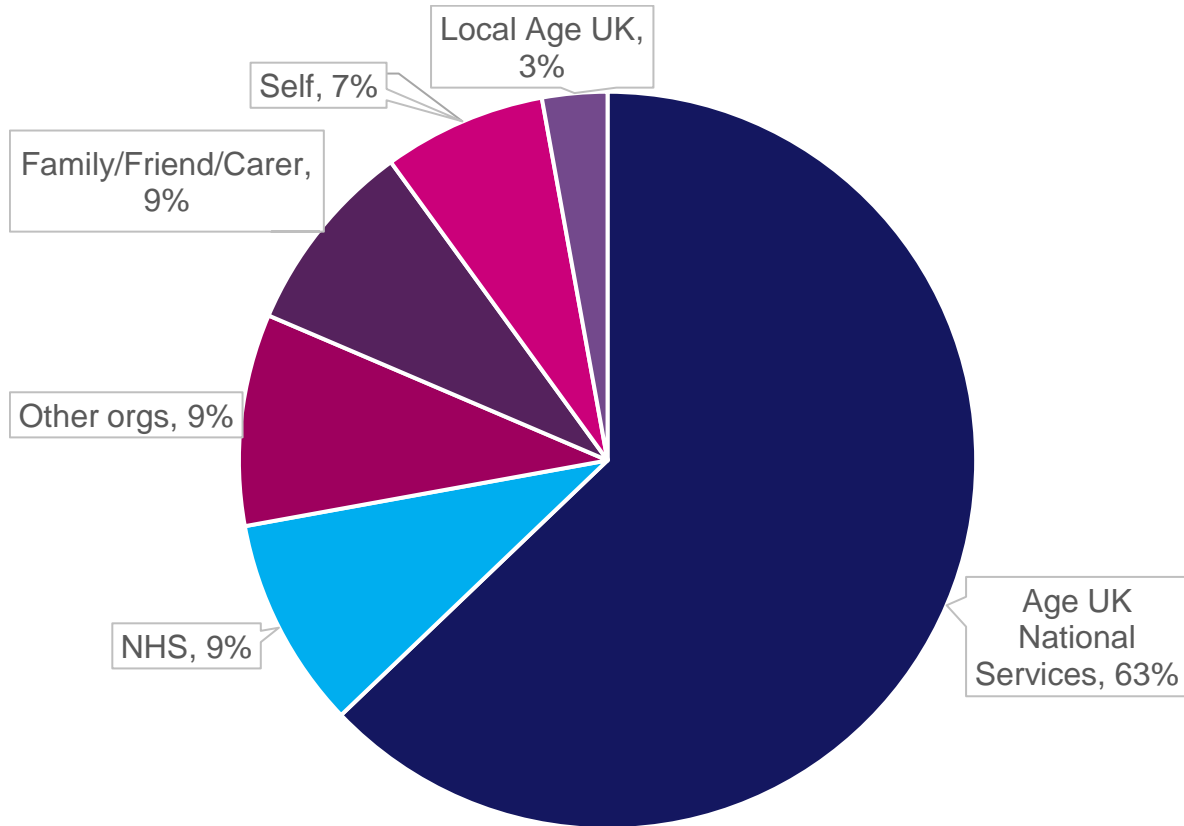


Local partners



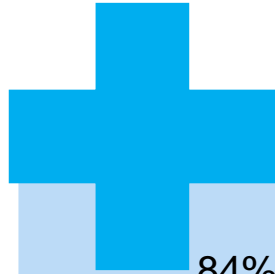
Existing referrers and members from the Telephone Friendship Service

# Referrals and Delivery



- Despite continued efforts, referrals were way below what we anticipated
- By far the largest source of referrals was the Telephone Friendship Service
- This impacted our ability to deliver the project
- Even with an extended deadline, we only received enough referrals to set up 10 out of the 16 planned groups

# Challenges & Highlights



84% attendance rate on groups

Facilitated nearly 300 sessions

Introduction of practice sessions

Adaptation of sessions and activity packs

Carers groups

Feedback from older people



Partnerships

Referrals – suitability and needs

Providing IT support remotely



## What older people told us...

*'Everyone is so kind and delightful. Gives me a lot of knowledge and an insight into different things'*

*'Uplifts my spirits. I'm motivated to be there on time for the call. I can't attend things due to mobility issues so nice to come along'*

*'I feel relieved to be able to discuss things with people. I spend a lot of time on my own so it's nice to hear someone else's views'*

*'It makes me feel better after I have joined, I always leave giggling to myself'*

## Learnings and outcomes



- Many of the staff skills from Telephone Friendship to vMCST were transferable
- Strong partnership links are essential both for referrals and for on the ground support
- Lack of awareness about MCST may have impacted on volume and quality of referrals
- We reached many older people who may not have otherwise accessed MCST
- Driving the number of referrals, we would need to deliver a national service would require targeted long-term work in specific areas
- We decided not to continue the service permanently, but took some great learning from the programme and may revisit delivering this nationally in future

**Thank you**



**10 Minute  
Break**



# MCST Delivery

Age UK Kent Rivers



# MCST – proactive approach to keeping mind active and living well with dementia and memory related cognitive issues

- Following up on the success of Age UK MSCT Program - in 2022 we opened a MCST Centre
- It is a self contained, separate suite on a side of our mainstream center in Gillingham
- We currently offer MCST Sessions three times a week – each session is attended by 8 to 9 participants
- We offer extended sessions from 10am to 3pm
- Our MCST Centre delivers a continuous, rolling program
- It is a contracted service; cancelations are charged in full
- MCST is part of Age UK Kent Rivers dementia pathway – we have Capstone Dementia Activity Day Centre, Dementia Drop-in Service, Dementia Outreach, and Dementia Cafe

# MCST Day Structure

We combine an intense Cognitive Stimulation Therapy with vibrant, engaging activities supporting needs and interests of our Clients

Morning 10am – 12.30pm	Afternoon 1pm – 3pm
Introduction and refreshments	Participant led presentations
Warm-up activity	Workshops with invited guests
MCST session	Group discussions
Wrap -up	Outings
Buffet style lunch	Refreshments

# Who is it for? Our target group

## MILD DEMENTIA OR MEMORY PROBLEMS

- For those who are proactive about stopping the progress of their dementia. For those who want to be there! (not a respite setting)
- For people who are interested in a modern therapy setting, who want to be involved, who are open-minded and value independence and want to maintain it for as long as possible
- For those who are not interested in a 'day care centre' setting
- For those who are ready and willing to commit and to contribute to the group
- No care provision, open door policy

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**‘I like coming to MCST, I find it calm, and your opinion is taken, and everyone has the opportunity to voice their opinions. It is also very therapeutic.’**

‘I like that we use our brains here and gets us thinking and it's got a nice communal feel. I feel that I can truly be myself here’

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“ I look forward coming to my club as I get to use my brain and get too social with my friends I have made”

“If I didn’t come to MCST I would feel very lonely and isolated”.

# Did you forget your keys again?



Our qualified facilitators can help you with specialised memory maintenance therapy at our new MCST centre.

Call us on 01634 406058 or email us at [enquiries@ageukmedway.org.uk](mailto:enquiries@ageukmedway.org.uk) for an informal chat.

Maintenance Cognitive Stimulation Therapy at 

Moving away from the stigma – we have decided not to use the word ‘dementia’ in our marketing materials

# Maintenance Cognitive Stimulation Therapy



## BOOK YOUR FREE SESSION

Our qualified facilitators can help you with specialised memory maintenance therapy at our new MCST centre.

Call us on 01634 406058 or email us at [enquiries@ageukmedway.org.uk](mailto:enquiries@ageukmedway.org.uk) for an informal chat.

Maintenance Cognitive Stimulation Therapy at 





**Thank you**



# MCST Programme Evaluation

Key findings and learnings from the evaluation of the Age UK's Maintenance Cognitive Stimulation Therapy Programme



# Agenda

- Evaluation approach
- Key findings
- Key learnings

# Evaluation approach

Evaluation objectives and methodology



# The evaluation needed to meet the following objectives:

- **Understand to what extent the MCST Programme achieved its intended outcomes:**
  1. Improve wellbeing and cognitive abilities for people living with mild to moderate dementia (with or without a formal diagnosis) through greater access to MCST-based interventions.
  2. Improve wellbeing for carers of people living with mild to moderate dementia through respite and peer support provided by greater access to MCST-based interventions.
  3. Improve knowledge, skills, and confidence in delivering MCST-based intervention/s for staff and volunteers.
- **Compare the effectiveness of face-to-face and online MCST;**
- **Understand how the delivery of Age UK's MCST programme differs from existing provision of support for older people living with dementia.**

# The evaluation involved mixed methodology as follows:

<b>Quantitative research: analysing assessment data</b>	<b>Qualitative research interviews &amp; group discussions</b>	<b>Desk research &amp; expert interviews</b>
<p><b><u>MCST programme clients</u></b> SMMSE and QOL-AD assessments completed <b>at start of programme</b> and <b>after the 24<sup>th</sup> session</b>.</p> <p><b><u>Carers</u></b> QOL-AD and C-DEMQOL questionnaire completed by carer <b>at start of programme</b> and <b>after the 24<sup>th</sup> session</b>.</p>	<p><b><u>Clients &amp; Carers</u></b> 56 x pair depth and 13 x single interviews with <b>clients and their carers</b> (where appropriate) to explore their views on the sessions and the impact they have. 46 follow-up individual interviews with clients and their carers</p> <p><b><u>Age UK staff</u></b> 19 x pair or individual depth interviews. 13 x focus group discussions.</p>	<p><b><u>Assessment measures review</u></b> Review of measures used to assess cognitive capacity and quality of life in older people living with dementia</p> <p><b><u>Dementia support review</u></b> Review of how MCST fits in the broader landscape of dementia support 6 x expert interviews</p> <p><b><u>Partner information and data</u></b> Analysis of information provided by partners on monitoring forms to unpick challenges and successes.</p>

# Key findings

MCST Programme outcomes



*Image credit - Age UK Berkshire's MCST group*

# The Programme achieved its first intended outcome:

**The Programme was found to have improved wellbeing of people living with mild to moderate dementia**

- Mean total QOL-AD score increased by 0.77 following the programme, suggesting improved quality of life
- Key benefits included social re-integration, improved mood; learning how to cope with dementia; improved self-esteem, motivation, independence, and orientation.

**The Programme was found to have improved, or slowed the decline, of cognitive abilities of people living with mild to moderate dementia**

- Mean total SMMSE scores remained stable over the programme, suggesting slowing down of cognitive decline
- Cognitive improvements were observed, e.g. being more alert, less confused, more communicative, having more confidence to do things independently

*“You feel out of it most of the time and if they can lead you into a discussion, get your brain going as it were, you feel a lot better after and you go away satisfied and ready to start the next day.” [Client]*

*“It has stimulated brain to the extent that is making him think about things and talk about things that he wouldn’t otherwise.” [Carer]*

# The Programme had mixed results regarding its second outcome

**Qualitative research with carers found they felt they benefitted from the Programme**

- Carers felt the programme gave them respite and made them feel better knowing their loved ones were supported.
  - In a few cases where additional carer support was provided, carers felt they benefitted from better understanding of dementia and services, as well as emotional support.

**However, quantitative C-DEMQOL data suggested carers' overall quality of life deteriorated slightly**

- Mean total C-DEMQOL score dropped by 2 points by the end of the programme, mainly due to lower scores for carer-client relationship and how carers felt they coped.
  - MCST could be more consistently combined with carer support to help access services and provide emotional support.

*“It’s good because when he’s at the class, I can do anything I want. I’m in the garden or go for a walk. I’ve got time for myself.” [Carer]*

*“It makes you feel that you are not alone and sharing something with others who are also devastated by this.” [Carer]*

# The Programme achieved its third outcome

**The evaluation found that the Programme improved staff knowledge, skills and confidence to deliver MCST interventions.**

Key areas where staff felt their skills and knowledge improved included:

- Understanding of dementia and people living with dementia
- Ways of working with people living with dementia
- Providing ideas for materials and activities for people living with dementia;
- Skills needed for facilitating group sessions.

Staff also thought the training could be further improved by making it more interactive and providing guidance on how to adapt MCST to diverse clients and for online delivery.

*“It gave us the tools and confidence to be able to run the group.” [Staff]*

*“It gave insight into people and their minds, the way everyone’s dementia is different. How to work with people with dementia, and particularly about finding that path of how much support to give while also giving them some independence.” [Staff]*

## Key learnings

What makes MCST successful and how this compares in face-to-face and online delivery



*Image credit - Age UK Berkshire's MCST group*

## The evaluation identified key factors contributing to the Programme effectiveness and making it different from other dementia support:

- Therapeutic aims and focus of MCST
- An evidence-based approach for what works to improve quality of life and slow down cognitive decline for people living with dementia
- Standardised training and manual supporting staff
- Varied activities of suitable difficulty
- Structured but flexible and tailored approach
- Regularity and continuity of sessions
- Small groups that foster social relationships and sharing of experiences
- Independence, as people living with dementia participate on their own
- Targeting people living with mild to moderate dementia, which staff and experts highlighted as a major gap in dementia support provision that is being addressed through MCST

*“MCST is slightly different because it covers lots of different topics; because it’s slightly smaller everybody can participate; there’s more brain work involved.” [Carer]*

*“I suppose the really big one is that it is evidence based. There’s loads of research, it’s global, it shows that it leads to significant benefits so that’s really important.” [Expert interview]*

## Face-to-face and online MCST achieved similar outcomes but there were also some differences

**Both face-to-face and online MCST clients enjoyed the programme and felt they benefited cognitively and in terms of their mood, wellbeing and quality of life.**

*“While virtual groups are well attended and enjoyed, we found that things like building friendships and that real connection are stronger in face-to-face groups.” [Staff]*

**However, face-to-face MCST was felt to provide better social interaction and relationships than online MCST, whereas the latter gave the added benefit of improved digital skills to some clients.**

*“I find online much easier because you’re not face to face. I prefer it. You can say more things when you’re not in a room with other people. You don’t feel embarrassed.” [Client]*

The evaluation highlighted the need for face-to-face MCST to be complemented by online MCST to reach a wider range of people living with dementia, most notably, those who are house-bound, have other barriers to accessing face-to-face sessions, or live in areas where CST and MCST are not provided.

## The evaluation also provided a range of practical feedback on what works well with MCST



*Image credit - Age UK Berkshire's MCST group*

This would be helpful to share across the Age UK network to support future MCST delivery.

Practical suggestions from the evaluation have been incorporated in the Age UK MCST toolkit which is now available from The Loop.



# Thank you

For further information please contact [dementiamcst@ageuk.org.uk](mailto:dementiamcst@ageuk.org.uk)

# MCST Legacy: Toolkit for developing and delivering a sustainable service.

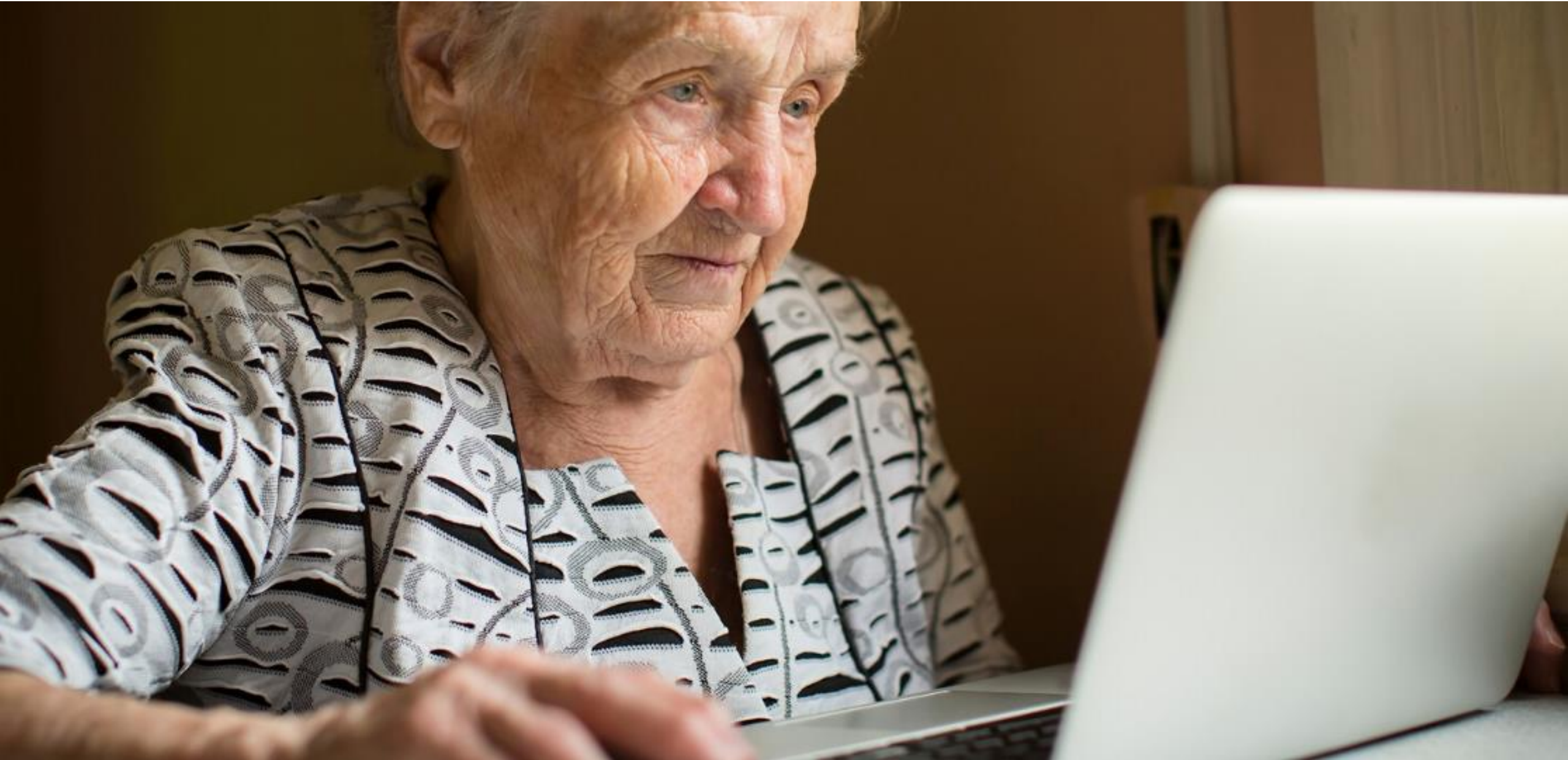
Barry, Dementia Service Development Advisor



## The toolkit was divided up into 5 sections:



1. How the service works
2. How to run the MCST service
3. How to find group members
4. Assessing participants for your MCST service
5. Managing the budget for your MCST service



# Training Update

- We are developing an online Dementia Awareness Training to be launched on Moodle in the spring.
- There is also a new MCST training module being piloted in York at the end of February.



**Thank you**

## Age UK MCST on Film...



# Questions and Answers



**Thank you**