Welcome everyone to the open meeting. 59 attendees

Superb presentations this afternoon- some are about experiences during the COVID period – well into the second wave; Bradford came forward had utilised the website to develop a module for themselves and working with Mental Health.

Lesley Flatley - Manager at Davlyn House - Older People's Services

Lesley stated that is was a real honour and a privilege to be able to speak to today's meeting. At the beginning of the year Davlyn House had celebrated dignity in care and there were 100 people at the local church joining in the celebration. Since then things have changed and there has been a need to go above and beyond 'normal' ways for working, and change the environment to ensure social distancing. Initially they tried moving chairs around, but the residents moved them back, they didn't want to be socially distanced. Masks were also a massive concern, especially for those with cognitive impairment. Most residents have adapted and staff worked closely with those who needed support, they have been really imaginative in the ways they have helped residents adjust to the new normal. One example was of a resident whose first language was Italian and who communicated more and more in that language. Staff with the help of a friend of the resident set up an Italian word of the day scheme. Not only did this help the resident but also gave the friend a purpose. A closed Facebook page for residents' relatives, has been set up, to enable them to see that life was continuing and life was being made special, and this has been really successful for all concerned. The Home also wanted to stay part of the community, and they made rainbow posters for the local nightingale hospital, unfortunately these were not able to be accepted so they were fastened to the lampposts in the village, and it became a rainbow village. The village church has been an essential part of life, for the residents. This has continued through a weekly virtual church service, using digital technology, that is personalised to Davlyn House. Village choir also important and through digital media there is a recital weekly and this has kept everyone's spirits up. Residents also wanted to give something back, and decided to make canular covers, blankets, hats and jackets for the local premature baby unit. This was so successful that the unit had to say stop we have enough. The residents are now doing baby boxes for the local food bank. Special occasions have continued to be celebrated. Birthdays have been more important because family can't be in attendance, and staff have worked hard to make everyone a bit special. Cling film has been used on the cakes so that the candles can be blown out. For one resident who celebrated their 100th, there were garden visits to enable her family to wave and wish her well. There was a church service in the morning. One member of staff developed a poster for each year of the 100, highlighting significant events, and these were hung up to line the route from the bedroom to the lounge door. These were so popular and creates such interest that they were kept up for a month. Elvis visited in the afternoon and sang in the garden and the grand finale champagne in the evening, with a card from the Queen and cake. A fitting end to a really special day. Visiting has been a real challenge, but they have used the doorstep, the garden, Facetime, WhatsApp, and videos sent to families. They are also maintaining a book of photos charting the Home's progress through COVID. The Home is also proud of the fact that for those who have reached End of life they have been able to be with residents, and in one were able to facilitate a visit, and the individuals passing was made really special with a parade outside the home.

Jan Burns MBE thanked Lesley on behalf of everyone, present. She stated that those listening will have heard things that they too have done and some new ideas. Above Lesley had given a picture of deep-down person-centred care and really promoting dignity under such difficult circumstances.

Vanda Carter – then gave a presentation on behalf of the Royal Wolverhampton NHS Trust discussing how a dignity workshop was being developed. The project evolved from a general discussion and thinking about how they could promote dignity in what they were doing. Her presentation then took the meeting through the process that they have followed and how they had now reached the point of having a training module that could be used within the Trust. It was decided that the focus of the module would be on the pre-registrant population of staff. They drew on previous initiatives that had been utilised to promote Dignity within the organisation. One of those was use of a Digni-tree where staff, patients and visitors separately looked at what dignity meant to them and placed the leaves on the tree. Activities were developed around thinking and observing skills, looking at how people interact with each other. Videos were used as well, enabling the development of a suite of blended materials. They were hopeful that they would be able to transpose their work into a digital format. The next stage was to pilot the module within the student community - across the board, Nurses, Allied Health Professionals and student Doctors. At the end of the module people will commit to the Dignity Dos and sign up as a champion. Vanda completed her presentation with a short video "Wolves change rivers" which demonstrated how small changes can have a massive impact on the environment in which we live. Her final slide was of the Benjamin Franklin quote- "Tell me and I forget, teach me and I remember, involve me and I learn".

Jan Burns thanked Vanda on behalf of the meeting. She reminded everyone that it is important that we get the dignity message across at every age from young children to students to older members of the community. She also stated that as busy as everyone had been recently it was wonderful that they could still find time to make a difference and measure what they are doing, and stand up for Dignity. Jan Burns also mentioned that Bradford had kindly shared their training programme around Dignity. .

Alex Lewney from RMP Care spoke next. He said that his service provided service for people with learning disabilities based in small residential properties. When Lockdown had been introduced they had discovered that staying at home had not always been feasible for those with whom they worked. For his team it was important that they recognised that the dignity aspect hadn't changed, even though the parameters around them have. The framing of the question "what do you want to do", has needed to change to keep people safe. They received lots of feedback from individuals which wasn't necessarily about staying safe, and was mostly about wanting to carry on with their lives and stay in touch with people. Aspects of people's lives that give them purpose and help them achieve have always been important. Staff had therefore to be imaginative. Rearranging the greenhouse and using the outside space in gardens more effectively. The local day service maintained links through video calls and through providing plants and equipment. This enabled staff to tap into their knowledge and expertise and continue to provide activities that people found important. Also setting things up on Zoom and using media routes to enable things to carry on happening for people. But it was also wanting to be as creative as possible. This has meant that technology has become a massive part of life. We use this as best we can, and people have got used to doing things in ways that are new. We have also managed to maintain the involvement of the local community in celebrating our achievements.

Jan Burns thanked Alex, especially as he had never presented before. He has shown that it is important that you are innovative and creative.

Rhondda May from Cirencester Community Hospital stated that they had been on a very emotional rollercoaster ride during COVID. There were lots of new staff who started work and needed support alongside the difficult task of supporting patients who were very ill. They had used iPads to help maintain contact with families. Because they were working with very ill patients there had been quite lot of deaths to deal with. This has meant the need for lots of support to keep staff going. Staff needing counselling, and they had team debrief every day, which did help. The team supported one another. As might be expected what happened had a major impact on the team, and they are now much closer as a team. Now at the start of the second wave there are again lots of new staff starting currently, and the team is working to ensure they are properly prepared. Rhonda stated that her team was most proud of the fact that patient care was great, and that dignity was maintained despite the restrictions and constraints. There is still sadness that some of the normal things weren't able to happen, like families being with their loved one when they passed. However having said that there is a strong feeling that there is nothing they did that could have been improved on.

Jan Burns thanks Rhondda for bringing in the staff perspective and giving an insight into what was clearly a very emotional time for everyone.

Dr Nandita Divekar is a Consultant in anaesthesia and intensive care at Medway Hospital Kent. Nandita gave an insight into her experience of planning for and working through the first wave of COVID. In February as they started hearing about everything that was happening in China, Spain and Italy they definitely knew their lives would change. Nandita said that they knew they needed to do capacity planning. The trainee rota and consultant rota was changed, with staff doing long shiftseveryone had to plan. From Mid-March the hospital started receiving a large number of COVID-19 patients and the surge in Critical Care patients began, capacity on the ICU surged into theatres, and converted more beds to intensive care. It was really busy and they were dealing with ventilated patients with COVID as well as being one of the few hospitals that ran Non COVID intensive care separately. The hospital received adequate supplies of PPE, no staff within Critical care contracted COVID-19 which supports the PPE received. They were very lucky in that they got good PPE supplies and none of the critical care consultants went off sick. Unfortunately, staff were unable to hear well as the PPE muffled sound which was both frustrating and difficult in such a stressful environment and they had to talk loudly to ensure that they could be heard. All this understandably had an impact on the individuals. The team's effort was really important and working together was what made it bearable. Our nursing staff, physios, and all other support staff were fantastic. Staff held patients hands as they passed away needed to hold patients' hands when they were dying; they had to be their families and were experiencing intense emotions as a result. Nandita did chanting sessions to aid meditating. Critical care staff also set up a link between families through Skype, once again outside support assisted patients and families to stay in touch through the world of virtual meetings. Two staff became Skype angels alongside nursing staff and used iPads to help patients link with their families, and to follow up with families after people had passed. There was recognition of people's efforts from the Trust through the Hospital Hero's awards. Staff couldn't stop the feelings of blame when they lost anyone, despite the fact that they had tried everything. The critical care department has set up virtual bereavement meetings with families, nursing staff and a Consultant which has been a comfort for families as a number of similar themes were able to be discussed through these meetings. as the team felt that families needed support. Staying in touch

was vital and although they tried short wave radios that didn't always work. The hospital and staff within the Critical Care unit have recognised that the personal feelings of people scared for themselves and their loved ones. PTSD will be an issue, and will pose new challenges. Some patients are reluctant to come into hospital because of the fear of catching COVID. No one knows what the second wave will mean. But the team do know that they will overcome this together if they work as a team, fighting a common cause. We must never forget those who have sacrificed themselves for the greater good in whatever walk of life.

Jan Burns on behalf of the meeting thanked Nandita stating that she really had shown, kindness respect and compassion. She also stated that Nandita had also shown the importance of connectivity, collaboration and working as a team.

Jan Burns thanked all the presenters and the meeting echoed her comments about the powerfulness of their input.

Jan Burns brought the meeting to a close with two short comments.

Firstly; there is a need to make sure that the NDC is active and if anyone would like to join us as a Trustee please get in touch. Although the NDC drive this campaign she stated that we rely on our champions to put things into practice. On behalf of everyone we cannot thank you enough, and she stated that she was sure that families and others who can't be here would also like to say thanks.

Secondly Jan Burns introduced a new resources from the Council. The importance of checking how well organisations are doing in respect of delivering with dignity cannot be underestimated. To that end we have launched two postcards. One which sets out what people might expect in relation to Dignity from a support service or provider and the second a way of getting feedback on how the service had achieved their aims. Sue Howard, CQC dignity lead, has already seen the cards and feels that CQC inspectors could ask to see the results if they were used by organisations to survey those they support. They will be checking for the service user /patient voice. There can be advantage in using them. They are for use in hospital and care and support settings. The idea is that you give a person a postcard to let them know what to expect, and a second card that is a chance to say if something has been good. Dancing for Dignity has been used to raise funds to enable us to give free postcards to services. We do need feedback and they can easily be turned into an audit.

Finally Jan Burns said that NDC was looking to hold future meetings on a quarterly basis that would follow a similar pattern if people were in agreement – it appeared from those present that this was a favoured proposal..

On behalf of everyone Clare Copleston and Rekha Elaswarapu thanked everyone and stated that they had enjoyed all the presentations, great opportunity to have feedback on the work that has gone on. Alan Clark MBE finally gave thanks to Jan Burns for all the work she does in holding the campaign together