

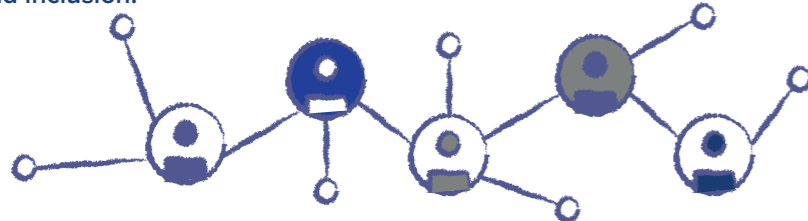
Partnership: Emerging Insights

What are we learning about the impact of COVID-19 on partnership in social care?



1 Range and variations of partnership

Partnership has looked very different in different areas of Scotland and for different parts of the health and social care sector. Covid-19 has highlighted everyone's role as a partner from people supported and families to national bodies and government agencies. Partnership has been experienced and understood differently by these different groups, however there have been key determinants of partnership that have emerged consistently such as trust, respect, communication and inclusion.



3 Challenges of partnership

There were a number of practical challenges relating to partnership in terms of access to information, support and resources leading to inconsistencies, confusion and an overwhelming volume of reporting when faced with constant change. Responses from relatives acknowledged the significant difficulties of partnership working when many health-related partners operated a restricted service or had limited access. Perceived politicisation of the pandemic and the social care sector has contributed to barriers to meaningful partnership with the sector, which has implications for longer term health and social care integration. The pandemic has highlighted for both care homes and care at home services a lack of understanding of these contexts and practices at strategic levels which has exacerbated a sense of being undervalued and underappreciated.

'The council will come in in a very much negative oriented way – looking for what you've done wrong rather than what we've done well and what we could do well together, it's quite a marked difference I think [...] it's deeper than that as well though, it's judgements about we're 'only in it for the money' [...] it's just surprising that in this day and age there is just not the realism and the understanding that actually to do this type of work you must share the same value base'

- Care at Home Perspective

'Care homes & Care at home services had to remain open & commit to caring under very difficult circumstances, while other partners operated a restricted service. This in turn made partnership working almost impossible at times. This has shown that care homes & care at home services need to be more valued & supported by NHS, primary care & AHP services'

- Relative Perspective

2 Experiences of partnership

Partnership was most positively experienced by the sector when accessing community-based services and support, and there was also new and strengthened collaboration with local groups, businesses and families. In these forms of partnership there were clear examples of sharing information, resources and experiences throughout the pandemic journey, which has contributed to creating a sense of community connectedness for care homes. For services that are predominantly health led partnership was more challenging particularly in relation to communication and lack of access to services and support. In some HSCP areas, partnership was positively experienced in terms of coordination of practical pandemic response such as access to PPE and testing. However, interpretation and communication of guidance locally remained an issue.

4 Enablers of partnership

Where partnership has worked well throughout the pandemic this has largely grown from existing relationships based on trust and mutual respect. In a number of instances these relationships have been strengthened further by the pandemic experience creating opportunities for more regular and open communication. Many responses highlighted the value of sharing experiences where connection with others across the sector was facilitated to provide mutual support. Partners commented on the benefits of working more closely with the sector, particularly in relation to sharing knowledge and learning in the context of dementia and end of life care.

'We found great comfort in working with Scottish Care, who facilitated regular contact with other providers via a twice weekly webinar and now a once weekly one. This, along with the online forum has led to many providers around the country getting in touch through social media to discuss what's been going on and offering some advice where appropriate.'

- Care Home Perspective

'I think because everybody [care service and partnership with council] has just been so keen to help each other out, you know we've helped them they've helped us [...] there's a lot of trust there, and also because everybody is working from home we've actually got more of an insight into each other's sort of personal lives as well and it makes these people at the end of the phone seem more human and I think they feel the same about us ... I think everybody realised how stressed everybody is and you know we've just been trying to support each other to do the best we can for everybody'

- Care at Home Perspective

'We hope partnership working has made CH know that hospices understand they are experts in caring for frail older people and their families, especially at end of life. We face similar challenges and can learn from each other especially with advanced dementia and EOLC.'

- Partner Perspective

5 Opportunities for future partnership

There is a willingness to develop partnership working going forward, building on where this has been successful during the pandemic and addressing where there has been a perceived disconnect between health and social care support. It was widely acknowledged that this requires mutual respect and an appreciation of the distinct contribution of social care which if recognised at national and strategic level can lead to positive change at a local level. By having a shared sense of purpose and direction, the experience of partnership in action can create value for everyone involved through enabling support, trust, recognition, respect, effective communication and inclusion.

'The families have travelled with us throughout this journey, showing understanding, trust and support that has been humbling. Had this not been the case I think I would have crumbled. We are, however, pushing this to the limit now. Families are finding it harder to distinguish between Government imposed guidance and Care home imposed separation'

- Care Home Perspective



'It seems to me they slipped very quickly into the sort of blame culture rather than supporting improvement'

- Care at Home Perspective

'Would like the NHS to recognise that care homes are resident's homes and not clinical environments. Also would like care home managers / leads / care inspectorate to be able to support with hospitals inspections on care delivery. Care home workers are professionals in our own right with experience, knowledge and passion for care and should not be seen as the poor relations of care.'

- Care Home Perspective



'The biggest risk would be that as people migrate back to their old job plans etc, that the innovative ways of working can't be maintained [...] I think it is more the fact that perceived benefits from more traditional ways of working will supersede this innovative way and it will just have been seen as something that we do during Covid. It won't be that people don't think it's important, it's just more the fact that other things will start to become important again, the more traditional ways of meeting and making decisions and feeding up through more hierarchical spheres so that for me is the biggest risk. You can't just have an innovation unless it is actually embedded.'

- Partner Perspective