International Centre for Integrated Care

Compassionate Communities Scotland Active Learning Programme

Report of Cohort 1 March 2020 – March 2021

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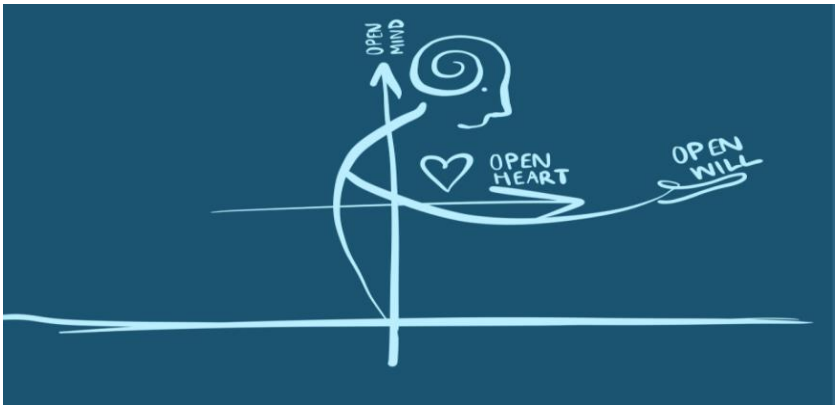
Scotland is a society which treats all our people with kindness, dignity and compassion, respects the rule of law, and acts in an open and transparent way

Compassionate Communities Scotland are all the people who are leading the movement, those who want to give of their time, those who respond to call outs and shout outs, those who are benefiting from and those who are giving the gift of their time and energy.



Foreword

The International Centre for Integrated Care (IC4IC), the home of the International Foundation for Integrated Care's hub in Scotland, is grateful to the Scottish Government and to our collaborating partners for their support in developing a Compassionate Communities Active Learning Programme. Our new programme was designed with practitioners, managers and volunteers who are making a real difference to the lives of others in their communities. This report describes how the twelve month programme supported active learning around a shared purpose of creating a stronger, fairer and more equal Scotland where people and communities live our values of kindness.

Many thanks to all participants and facilitators for generously sharing their valuable experience, passion and kindness in the first cohort of the programme. Special thanks to Linda Hunter for her series of graphic illustrations that help to capture the essence of our collective journey, and to Marie Curran for making the technology work smoothly and collating the Flash Reports and links to resources. We are also grateful to Helen Rainey, University of the West of Scotland, Sarah McGhee from the Scholl Academic Centre, and Madeleine O'Brien, OD Consultant for undertaking an independent formative evaluation of the Programme. This helped us to understand what worked well and what aspects we can improve for the next cohort.

It enabled a shared sense of purpose and hope for the future.
It helped us be part of something bigger than ourselves.
We need to value this way of working, which is wholly inclusive, compassionate and inspiring

It has been a pleasure and a privilege to walk alongside this inspiring group of Compassionate Communities Champions. We are truly heartened by the feedback and more than a little sad that this first cohort has come to an end! But we are inspired and energised by their words and actions and by the tremendous ripples we see from small acts of kindness in so many communities.

Please continue to keep the kindness and compassion flowing across Scotland.

Professor Anne Hendry, Director IFIC Scotland, International Centre for Integrated Care
Mandy Andrew, Associate Director, the Health and Social Care Alliance Scotland
Alison Bunce, Compassionate Inverclyde

1. Overview

In 2018, a team from the International Centre for Integrated Care undertook an Evaluation of Compassionate Inverclyde, a multi-award winning social movement and the first Compassionate Community in Scotland. Three reports, available at ArdgowanHospice.org.uk, describe the design principles, the many benefits for citizens, communities and organisations, and how Compassionate Communities contribute to realising the Outcomes in Scotland's National Performance Framework.

During 2019, the evaluation findings were shared widely within Scotland and through an International Special Interest Group on Compassionate Communities led by Alison Bunce (Compassionate Inverclyde) and Anne Mills (Compassionate Isle of Man).

To encourage and provide practical support for the adoption of the Compassionate Communities ethos in Scotland, IC4IC and partners established a new Active Learning Programme for volunteers and leaders of community groups, and practitioners and managers from health, social care and third sector organisations with an interest in Compassionate Communities. This innovative programme was supported by a small grant from the Scottish Government and by resource in kind from IC4IC partner organisations, listed in **Annex 1.**

Forty people joined a co-design workshop in March 2020, held shortly before the COVID-19 pandemic escalated. Participants shared an interest in developing or expanding Compassionate Communities in their local area or organisation. **Chapter 4** describes how the interactive workshop informed the design of an Active Learning Programme (ALP) to connect and support people engaged in compassionate communities across Scotland.

Programme Aim:

To support people in many communities to improve lives and opportunities by living our values of kindness, dignity and compassion.

Learning Outcomes: participants will…

- **explore the personal attributes and conditions to re-imagine place and create compassionate communities**
- **understand the key elements required to work with different communities and their assets**
- **explore and adapt tools that can be used to support engaging and influencing people and communities**
- **enhance their skills to value, empower, support and sustain volunteering, place making and compassionate communities.**

Due to the constraints of the pandemic, the programme was delivered virtually through monthly online sessions between May 2020 and March 2021. **Chapter 5** describes the approach and the themes addressed in each of the monthly sessions. Flash reports and recordings were available for those unable to participate in the live session. These materials can be accessed here.

An average of 12 participants engaged in each session. Overall, 78 people from 39 communities or organisations participated in some way in this first cohort of the ALP.

An end of programme formative evaluation was undertaken by our academic partners from the University of the West of Scotland and the Scholl Academic Centre. The evaluation considered:

- Achievement of **learning outcomes** by individual participants
- The **self-development** process, identifying self-reported changes
- The progress of the group as a **supportive learning community**
- The acceptability of the virtual **programme format**

A link to an online questionnaire was sent to all participants and facilitators, and a series of in-depth interviews was conducted with five participants. Appreciative inquiry methods were used to prompt feedback and ideas for improvement. **Chapters 6 and 7** present a summary of the responses with some important headline messages. The programme has been well received. A clear message is

Keep what has worked well and continue to provide the support and encouragement to enable participants to lead their compassionate communities

The learning and feedback from this first cohort of the ALP has helped us understand how we can increase its reach and maintain a spotlight on compassionate communities as we emerge from the pandemic. These ideas for improvement in the next phase are outlined in **Chapter 8.**

As public services move forward from the combined health and economic shocks of COVID-19, we must build on the new ways of working that have emerged in the last year. That means strengthening local relationships, nurturing the new alliances formed and sustaining the countless community led initiatives that have supported our most vulnerable citizens and helped to create resilience. Now more than ever, we need to empower, develop and support those who strive to nurture kindness, compassion and wellbeing in communities of people, of identity and of place.

The ALP makes a tangible contribution to our collective endeavour to build a fairer and more equal Scotland where people and communities live our values of kindness.

2. Kindness in the Time of Coronavirus

The COVID-19 pandemic has had a devastating impact on our health, economy and society in Scotland. It has exacerbated longstanding inequalities. Now urgent action is required to address the harms experienced by people at all life stages: loneliness and isolation, deconditioning, poor mental and physical health, increase in poverty and widening of the attainment gap.

However, the pandemic has also demonstrated what can be achieved by working together in a more agile way across organisations and with local communities: better collaboration and trust, greater ability to pivot and innovate and to make practice changes at unprecedented speed. Carnegie UK Trust's report of their work with North Ayrshire reflects on rapid changes in one of the five localities during the pandemic, driven by a common purpose and enabled by greater autonomy, flexibility and collaboration between multiple partners working together around a community hub. The question is how do we support and sustain these new alliances and build resilience by enabling people and communities to continue to take action together with empathy, kindness and creativity?

In a precursor to the Social Action Inquiry Scotland, research commissioned by a consortium including Carnegie UK Trust, Corra Foundation, the Royal Society of Edinburgh, Scottish Council for Voluntary Organisations, The National Lottery Community Fund, The Robertson Trust and Foundation Scotland, sought learning from people who took part in social action efforts to support their communities during the pandemic. One of the recommendations in this report is for investment in a programme of capacity building which supports citizens to engage in democratic and social participation. This will build social capital and creating the conditions for compassionate communities.

Similarly, a report by the New Local Government Network describes the many Mutual Aid groups that have emerged across the UK as illustrative of the power and potential of community-led social movements. The report calls for proactive support and capacity building that is hyper-local and sensitive to the community context, particularly for communities that face significant disadvantage.

Social action, strong social capital and solidarity will be central to Public Health Scotland's priorities on creating good relationships and mental wellbeing, and eliminating discrimination and stigma; and improving health and wellbeing in communities that experience the worst outcomes;

The report of the Scottish Government's Social Renewal Advisory Board is clear that social renewal will not be realised unless communities of people, of identity and of place have more say, power and influence. It is not difficult to see the relevance of Compassionate Communities to the report's Calls to Action on **Communities and Collective Endeavour**:

- Further shift the balance of power so individuals and communities have more control over decisions that affect their lives
- Improve service delivery and design by empowering frontline teams and the people and communities they serve
- Build on new ways of working, based on what has worked well during the pandemic, and develop new arrangements for local governance
- Focus everyone and all activities on building more resilient, fairer, healthier and stronger communities and places

Our National Framework for Volunteering acknowledges that there is a wide range of ways in which people help out, get involved, volunteer and participate in communities of interest and communities of place. At one end of the continuum are formal roles with public sector bodies and community councils, and at the other are individual acts of kindness and neighbourliness.

"Volunteering is the ultimate exercise in democracy… when you volunteer you vote every day about the kind of community you want to live in"

"It is this generosity of spirit, this selfless giving of one's self, that is transforming our communities."

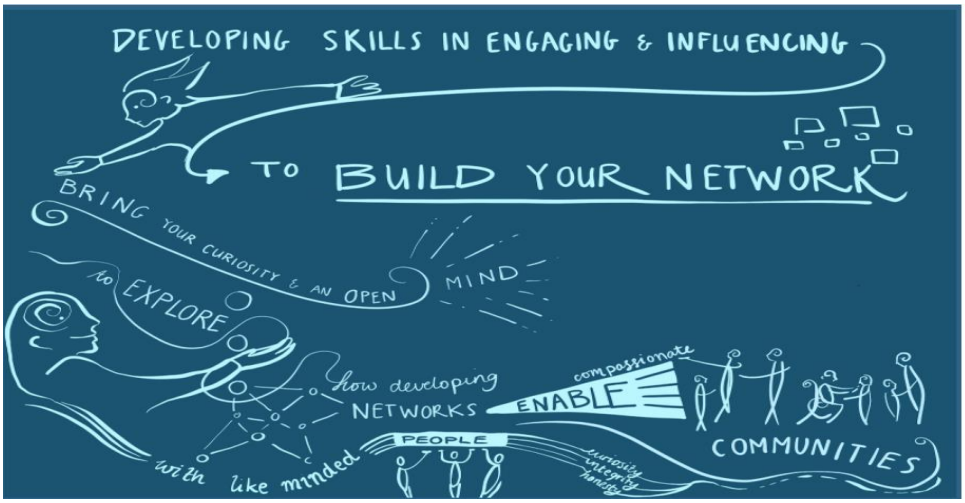
Compassionate communities act as a bridge between different forms of volunteering, enabling people to get involved with a wide range of activities that support people in the community activity to show empathy and kindness. In this sense they function like a community anchor.

In their Programme for Government 2020-21, the Scottish Government makes a commitment to using the Empowering Communities Programme to support wider adoption and strengthening of the community anchor model. In Compassionate Communities, the community anchor function is generally nurtured by authentic and empathic community leaders who understand how to engage and support people of all ages and backgrounds to volunteer their talents and experience and offer kindness to their fellow citizens. The purpose of the Compassionate Communities ALP is to connect, network and support community leaders and volunteers as they create multiple ripples of kindness and compassion across Scotland.

Annex 3 shares some of their stories.

The Compassionate Communities ALP gave me the courage and belief in self – that what I do makes a difference. And the courage and belief to take it forward and speak to the Health and Wellbeing Partnership. If I had not done the programme we would not be developing Compassionate Wigtownshire.

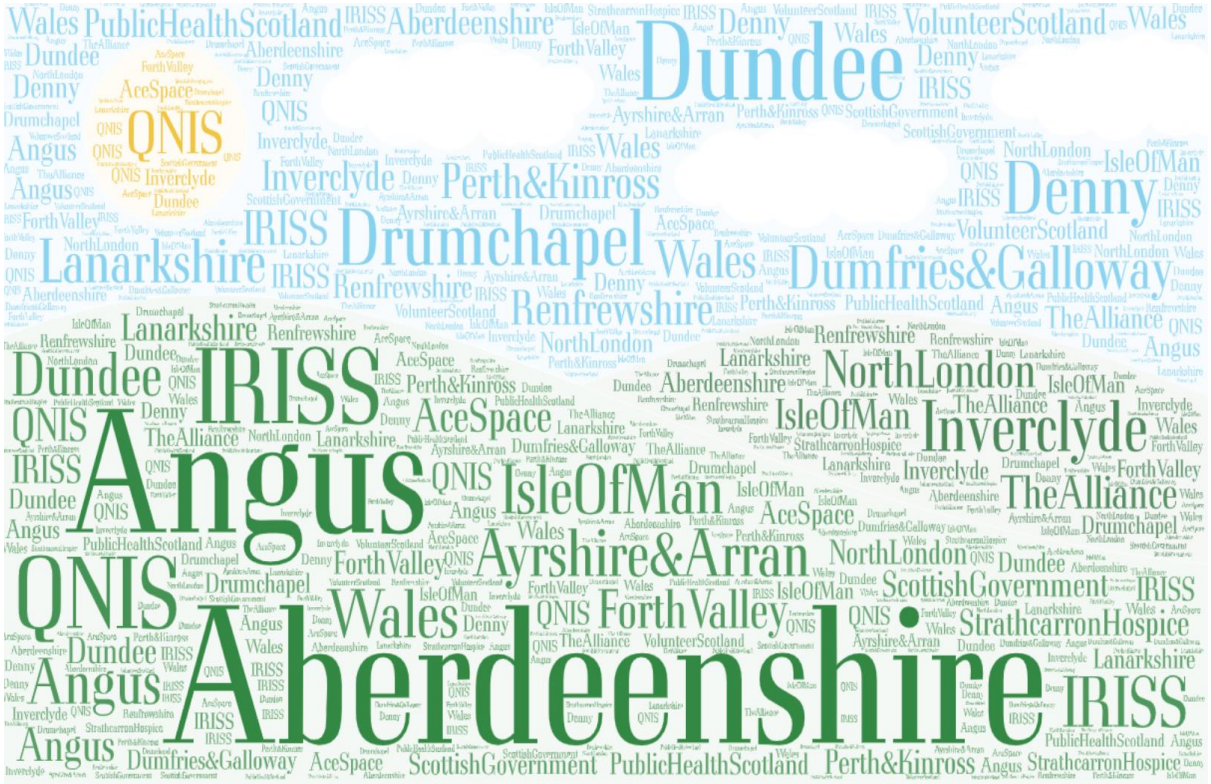
The ALP has given me a depth of understanding and tremendous confidence. Networking with the participants was great, we have made friends not colleagues – it is a safe space with kindred spirits.



3. A Co-Production Approach

The programme was offered to volunteer leaders, practitioners or managers from any sector or community organisation with an interest in Compassionate Communities. The aim was to support participants to understand how to create the conditions to improve lives and opportunities by living our values of kindness, dignity and compassion. Expressions of interest were sought through our links with Health and Social Care Scotland and Third Sector networks across Scotland. The invitation was extended to colleagues from Isle of Man and Wales through the international special interest group.

Participants came forward from both rural and urban communities, including some areas with high levels of socio-economic deprivation. They were joined by representatives from several national organisations with an interest in promoting place based approaches. Overall, 78 people from 39 communities or organisations participated in some way in this first cohort.



Learning Outcomes were designed with participants around the four cycles of active learning:

- **Dialogue with self**: Explore the personal attributes and conditions that help to re-imagine place and create compassionate communities.
- **Dialogue with others**: Understand the key elements required to work with different communities and their assets.
- **Observation**: Enhance skills to value, empower, support and sustain volunteering, place making and compassionate communities.
- **Doing:** Explore and adapt tools that can be used for engaging and influencing people and communities.

4. Co-design Workshop

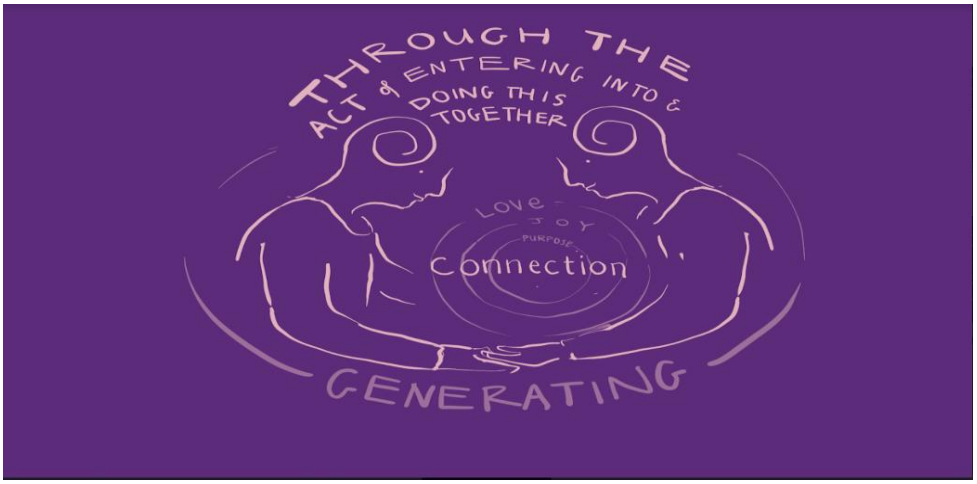
Forty people from across Scotland, Isle of Man and London joined an interactive co-design workshop on 9th March 2020 – just days before COVID-19 changed lives in every community in Scotland. The session provided an opportunity to connect and network people who share similar passions and ambitions for their communities.

Workshop participants, facilitators and critical friends beyond Scotland shared a wealth of knowledge and experience of volunteering or leading community led initiatives, including:

- Compassionate Inverclyde
- Compassionate Isle of Man
- North London Hospice Compassionate Neighbourhoods
- Ace Place
- Strathcarron Hospice Compassionate Communities
- Truacanta project

Facilitators supported participants to describe their vision for a compassionate community how they might develop, or build on, assets in their local context. Small groups used art to illustrate their shared purpose and values and how these help to create the conditions for compassion in their communities.

Participants welcomed the opportunity to connect. The workshop generated considerable energy and palpable enthusiasm for the proposed programme. It was considered to be even more urgent and important in the context of COVID-19.



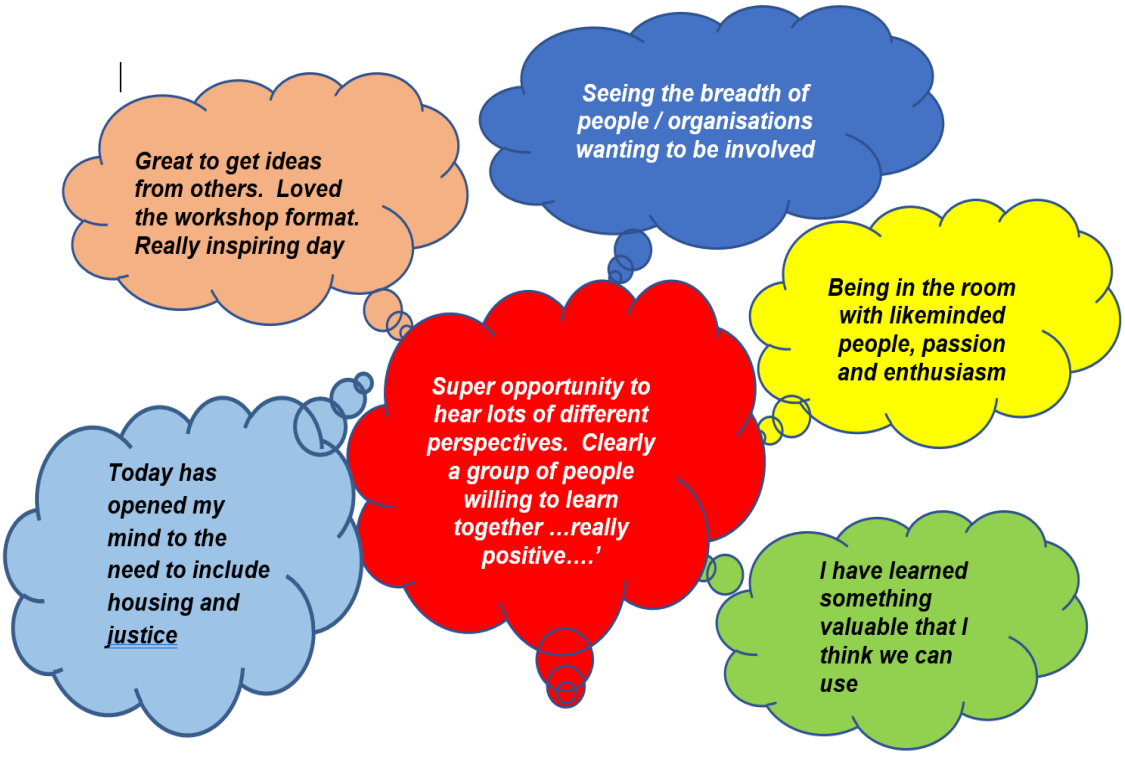
The report of the workshop can be found here and the presentations here

Participants were invited to help shape the next phase of the Programme. Suggestions clustered around three themes:

- Participate as a local / regional team to create the best conditions for compassionate communities to thrive.
- Opportunities for facilitated 'safe space' conversations with peers from other areas to network and build collective resilience for when the going gets tough!
- Options to connect virtually and use social media and digital technologies to exchange learning and share innovation.

The emerging design principles for the Programme were:

- **Channel energy and passion**
- **Make sure there is time to stop and space to think**
- **This is not a service - it is a movement for and with the community**
- **Value people and build on their strengths**
- **Presence – 'How I show up and how I can be my best'**
- **Listen to the voices of the community – including the quiet voices**
- **Be aware and tune in to many different views and perspectives**
- **Become comfortable with uncertainty, complexity and risk**
- **Celebrate lived experience – it is empowering and motivating**
- **Be brave – be bold - be bad ass!**



5. Active Learning

The programme team invited all who registered interest in the March workshop to attend a virtual follow up 'check-in' session in May. This was designed to consider whether to continue or pause the programme in light of local service challenges during the pandemic. From those who attended the check-in or responded by email there was strong support for continuing the programme but adapting it to be delivered virtually. The programme coordinator invited participants to co-design the virtual offer in response to the following inquiry questions:

- **How often do you wish to come together virtually?**
- **What times suit best to connect?**
- **What virtual platforms can you use?**
- **How can we support you to learn together?**
- **How can we help you illustrate the difference in yourself, team and community?**

It was agreed to deliver monthly themed sessions via the Zoom platform to provide a safe space for knowledge exchange, reflection and peer support in a very challenging and uncertain time. Each session is recorded and then edited to ensure confidentiality is maintained. Each session generates a Flash Report that is shared as a summary of the dialogue with links to the presentations and themed resources. This means those unable to join live due to other commitments can access these resources in their own time.

Participants have engaged with the Active Learning Programme in different ways:

- Regularly participate in virtual sessions (25)
- Regularly involved as facilitators (8)
- Received the flash reports and recordings and maintained regular contact via email (25)
- Received monthly emails and flash reports but no other contact with the cohort (20)

The monthly virtual sessions were designed as small group discussions with a mix of participants, facilitators or mentors to build relationships, offer safe space for reflection and enable authentic sharing of experiences. The median number attending the monthly sessions was 12.

Month	Total	Participants	Facilitators
May 2020	14	8	6
June	14	8	6
July	10	5	5
August	13	8	7
September	12	8	4
October	10	5	5
November	12	7	5
December	13	7	6
January 21	11	6	5
February	8	4	4
March	11	6	5

The topics covered are listed below. Flash Reports and edited recordings are available here.

Month	Theme	Session Leads
2020 June	Nurturing compassion, wellbeing and resilience in self and others	Alison Bunce, Compassionate Inverclyde Madeleine O'Brien, OD consultant
July	Creative and inclusive ways to listen to the voices in the community	Rikke Iversholt, Iriss Caroline Gibb, Scottish Partnership for Palliative Care
August	Developing skills in engaging and influencing to build your network	Clare Cable, Queen's Nursing Institute Scotland Mandy Andrew, The ALLIANCE
September	Empowering, supporting and sustaining volunteering activity	Laura Turney, SG Public Service Reform George Thomson, Volunteer Scotland
October	Telling your story – how to use the power of narratives	Hilda Campbell, COPE Scotland Angela Millar, The ALLIANCE
November	Understanding outcomes and use of resources	Sarah McGhee, Scholl Academic Centre Emma Miller, Personal Outcomes Network
December	Christmas Carousel of Kindness	Mandy Andrew, The ALLIANCE Alison Bunce, Compassionate Inverclyde
2021 January	Re-imagining communities and creating virtual connections in response to physical distancing	Chris Mackie, ALLIANCE Digital Nessa Barry, Technology Enabled Care Programme
February	Being brave, bold and ready to pivot – a compassionate community during COVID	Clare Cable, Queen's Nursing Institute Scotland Madeleine O'Brien, OD consultant
March	Reflection and consolidation	Helen Rainey, University of the West of Scotland Madeleine O'Brien, OD consultant

Participants reflected on stories using the 5 C's to consider what this might mean for our practice.

- **Context:** consider the circumstances, what do we think about, what do we hear, what do we think might be needed?
- **Capacities:** the strengths of people, communities of place and communities of interest.
- **Creating:** space to see the potential in others, understand what might be needed, and invest time to build relationships.
- **Communication:** fluid, agile conversations and appropriate space for meaningful interactions, to express feelings, and opportunities to make a difference.
- **Changes:** what has happened? What's been the result? Benefits? Improvements? Transformation?

6. Reflecting on Progress

At the end of the programme, all participants and facilitators were invited to complete an anonymised online survey, conducted by our academic partners from UWS and Scholl Academic Centre, to gauge participants' experience of the ALP and progress against the learning outcomes.

The link to the survey can be found here .

11 participants and 5 facilitators completed the survey. Their backgrounds were from

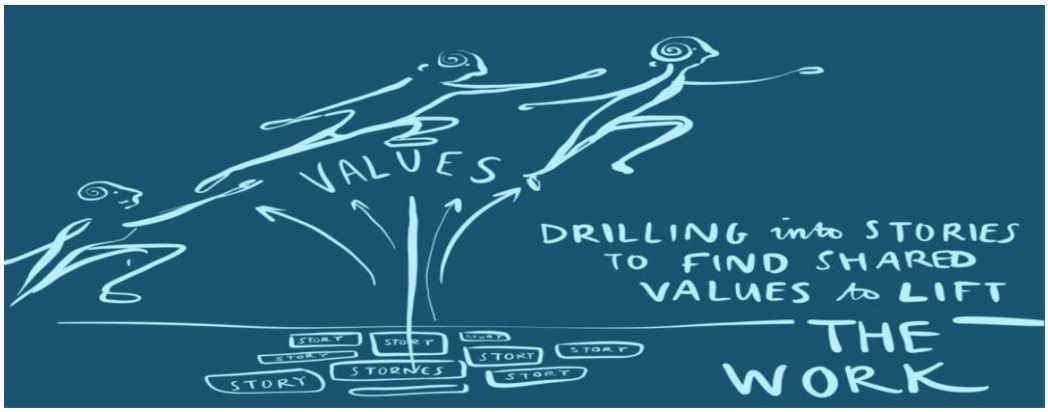
Health and Social Care	5	Local Authority	1
Third sector	4	Police	1
Compassionate Community / Volunteer	3	Independent sector	2

Respondents noted the key attributes and conditions they brought with them to the CCALP. These attributes reflect the very ethos and principles of compassionate communities suggesting the programme was engaging people who are motivated and already prepared to act.

Practical attributes		
co-production	*volunteer voices*	*good interpersonal skills*
community development	*shared insights*	*active listening*
Keen to hear of developments in other areas of the country	*experience leading a compassionate community*	*willingness to share*
passionate about empowering communities	*facilitation skills*	*deep listening*
Working with communities in Rural areas.	*interest in the wellbeing of others*	*an open mind*
Networking /team building skills	*willing to devote time to compassion*	*my authentic self*
Wanted to learn from others	*connections*	*a desire to change communities and lives for the better*

One third of respondents felt their views about the required attributes had changed as a result of participating in the programme. Their new insights could be clustered around three themes:-

By more people and communities knowing what is available	Involving more people
Useful reflection around how conversations around compassion can be introduced into team discussions and policy decisions	
Sharing the networking experience and listen to some of the challenges people have faced.	Networking and sharing experiences
The group talked with real experience and insight	
It takes time to establish the right time and the right conditions. It's much more organic and cannot be 'willed'.	Right time, right conditions



What Worked Well

Overall, feedback highlights the programme worked well for participants across various themes:-

- the leadership, and encouraging and helpful facilitation style;
- the content of the virtual sessions with open and honest guest speakers;
- meeting and listening to others with a shared perspective around helping others;
- sense of purpose and inspiring small group discussions;
- the whole approach to caring for self and others.

All of the Scottish participants indicated they would recommend the programme to a friend.

The Flash Reports were valued as *short, sharp, accessible and creative ways to share tools relevant to practice.* They were considered useful to consolidate personal learning and to share content with others. Links to the flash reports are listed in Annex 2 and key resources listed in Annex 3.

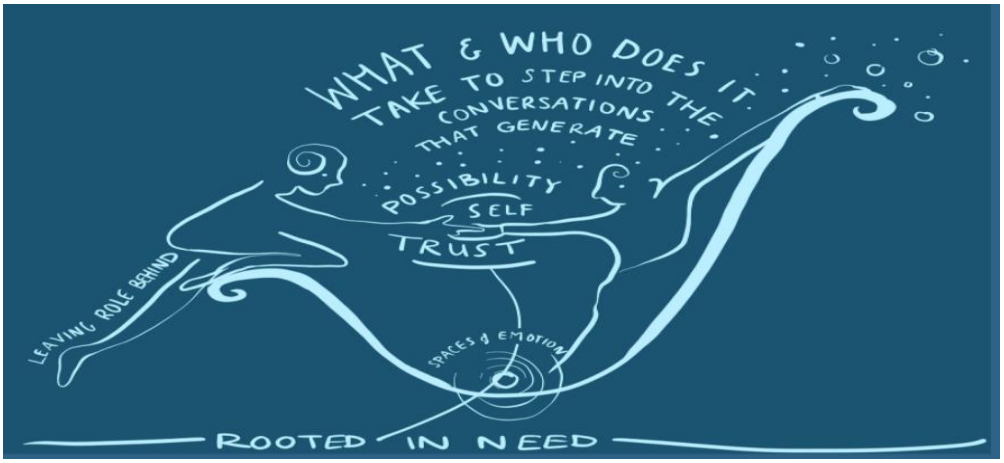
The flash reports - if not able to attend a session - were actually a reminder to look after ourselves and offered something from what was learned to use beyond this strange time we find ourselves in'

Very informative; welcoming and well timed; easy to follow and understand

Time, duration, frequency, punctuality – all good.

The online aspect enabled me to participate more than otherwise

There was so much of the content that felt relevant to practice.



Relaxed safe space to explore new ideas with people who didn't judge you for being caring and also reminded you of the importance of looking after yourself as well as the range of ideas and tools offered and the supportive manner in which sessions were facilitated, also the kindness those on the programme showed to each other

In relation to helping me understand how much compassion and kindness there is in this world I find it very uplifting and understand that the implementation of the programme is what needs to be learned. I think that by the end of this session all involved will have a much better understanding of what is required in their own community and how to go about achieving their desired outcome

I enjoyed how we gelled together and together created an environment which was conducive to sharing

What didn't work so well?

The responses demonstrated the constraints of managing day to day workload, often compounded by facing changed priorities or job roles as a result of the pandemic. One respondent noted it was difficult to maintain engagement at the end of the day. One found the online platform too difficult. Although some facilitators commented on there being too much input in some session, this view was not reflected by participants. Indeed participant respondents had no suggestions for improvement

Just keep using this person centred approach

Super as it is

All aspects of Compassionate Communities were covered

'The issue was not the programme, the issue was simply COVID19 and workloads going off the Richter scale so time to reflect on learning to then apply wasn't as available as during 'normal times'

Take Aways

Participants and facilitators were asked which key elements/approaches from the programme they intend to test or recommend in their own practice. The wide range of responses highlights the multiple dimensions of the programme and the diversity of participants at different stages on their compassionate communities' journey with different experiences, contexts and expectations.

Participants plan to test / apply the following….
Digital learning
Building capacity within communities rather than reliance on statutory service provision
Enhancing safety and support networks during transitions between hospital and home
Actively promoting the proposal of CC's from a health and wellbeing aspect
Community acts of kindness
Looking beyond the day job - seeing 'community' in a wider context
Innovative thought and freedom to challenge
Looking at 'doing with' rather than 'do to'
How we sustain compassionate communities after lockdown has eased
Get the right people involved

The facilitators also reported plans to apply their learning from the programme.

Creating the right environments and culture
Enhanced reflection on self compassion and personal resilience; apply the learning and sense of compassion in all that I do with others across the array of communities I engage with
Will continue to learn from other programmes which evolve in other areas, sharing and collaboration are key
Encourage more focus on values underlying activities and policies
I try to be more permission giving and distribute ownership a lot more. I'll continue doing that

Participants were asked to note which tools/methods and which skills they will apply in future.

Skills	**Tools / Methods**
Communication and listening to others	Back home boxes
Strengthened leadership: good communication and co-production can achieve results	CC Toolkit
Permission to build on what we have been doing	Story-telling
Value of self-care and resilience	Flash reports
Introduction to a network of support	Resource list of support
Example of Compassionate Inverclyde	Evaluation methods
Letting things happen, giving open spaces to see what emerges	Network building
Co-production	

All participants reported that they would adapt tools to their local circumstances and would require support to embed new/enhanced approaches into day to day practice. The supports identified include networks of peers, like-minded people and other Compassionate Communities; time, finance and volunteer resources; and support from their local community, health and care organisations, Third sector partners, and national / local governments.

Other comments included:

I have increasingly realised how CC are fundamental to how we organise our institutions and services

See from reactions over the last year how people have gathered confidence in their own abilities to make things happen - now is not the time to tell people how things should be done!

Since lockdown the community has come together to provide resilience where the public sector couldn't

Isolation is a growing problem affecting people's mental health - giving emotional and physical support will help to make those supported feel less lonely, more supported, more connected, happier.

Groups working together to create acts of kindness can foster a sense of belonging and have a positive result in the community where individuals can find comfort in knowing that someone is thinking of them.

7. A Deeper Dive

An independent OD Consultant undertook in-depth interviews with five participants including those who were very active in the programme and those who dipped in and out of sessions.

Those interviewed had diverse backgrounds and perspectives including a volunteer, a director of a local Third sector organisation, a NHS Board member, senior nurse and a HSCP locality manager.

Overarching experience

The feedback from all was very positive. Indeed, some people suggested the programme offered a sense of psychological safety at a very difficult time and described the experience as

restorative and *transformational; no hidden agendas;*

A safe, calming place in the face of chaos; a safe space to be with no judgement;

being part of an honest community prepared to share and to listen, who share similar values and mind-sets, and are on the same page

It was welcomed as timely given the impact of the pandemic but the relevance was also timeless

Nowhere else is compassion the focus on the agenda. The active learning programme helps to spotlight this and enable the multiple positive impacts it offers to individuals, communities and those who support them.

Have been looking for just this for a number of years

The shared sense of purpose amongst those participating was inspiring - "we all get it"

Methods of engagement

Connecting virtually was not a barrier, indeed for some living at a distance from the central belt this enabled them to participate in more of the programme than would have been possible face to face.

Gentle, expert facilitation enabled participants to feel comfortable and helped to make the process fruitful and enjoyable. *Felt comfortable with the flow of the sessions - facilitation loosely held.*

The organic nature of the programme and the creative and person centred focus worked well. The dynamic and mix of sectors was welcomed. The signposting and networking opportunities offered were considered to be very helpful and enabled further sharing and support outwith the scheduled sessions. Having a graphic illustrator capture some of the discussions was appreciated.

The format was wonderful with the balance of different organisations participating working well

Enjoyed the balance of input and discussion

Not too many from the one sector dominating

Not having a manual/recipe for "doing compassion" is very helpful.

Topics and Timing

Having monthly scheduled sessions worked well. Participants acknowledged that anything less frequent would likely impact on momentum. The 4pm - 5.30pm time generally avoided having to rush on to the next meeting and provided space to reflect as *The brain was still alert but in a calm way.* However, two people would have preferred sessions at the start of the day as they felt they could run out of energy towards the end of the day. *So much knowledge offered*

All topics struck a chord. The sessions on social capital, Theory U and other leadership and community development models were rated highly and helped to shift thinking towards social capital and public value as measures of success in supporting communities.

Influence and Impact

Annex 3 contains some stories from participants. These illustrate the personal growth, influence and impact that is already evident in different communities.

Ten changes participants have noticed that illustrate the value of the ALP:

- Recognising that self-compassion comes first and adopting this has been important to sustain personal resilience during the pandemic. For example, sessions run for staff on compassion and love have been highly impactful and welcomed at this difficult time.

- *The programme has helped us reflect on our values. It is more a culture shift than a training programme with the focus on compassionate conversations that lead to benefits for people and communities*

- A clearer understanding that whilst everyone has a role to play, there is a need for strong, courageous and compassionate leadership which knows the community and is willing to share leadership with others in the community. A deeper appreciation of the balance of person centeredness and appropriate governance processes.

- *Having access to practical guidance and the support of a mentor from the programme was of immense help to get new community programmes off and running and develop neighbourhood care journeys which have compassion at their heart*. In return, the offer is there for reciprocity in mentoring participants on any future programmes.

- Signposting to development resources in the flash reports helped one participant to confidently describe the importance of compassion to NHS Board members, in turn prompting a decision to systematically adopt the approach across all the local communities. *The intention is to set up Wigtownshire Compassionate Community as a direct consequence of the learning and confidence gained on this active learning programme*

- The programme has encouraged participants to be "braver" in taking about compassion in strategic forums and has enabled a sense of permission to care and foster this locally.

- Enabled greater collaboration between agencies towards a common goal of supporting vulnerable people in the community. For example, NHS Health and Well Being collaborating with voluntary sector partners around referrals for a local telephone befriending helpline.

- *Learning about co-production and enabling the community to fully engage has made a big difference. Feeling more relaxed when planning a new bereavement action learning support programme. Hope to take the learning and apply in a face-to-face compassionate community programme which had to be stalled due to COVID- 19.*

- Energised participants, enabling a greater sense of purpose amongst a growing number of volunteers, many of whom are older adults. The increase in health and well-being amongst volunteers has been remarkable and seems to be having a ripple effect in some communities:

- Some highly creative "can do" projects supporting lonely and isolated people in the community. For example, knitting teddy bears and using these alongside mindfulness breathing exercises to provide virtual support to those whose well-being needs nourished.

8. Ideas for Improvement

The evaluation helped us understand where there may be scope for improvement in how we engage and deliver the programme in future. The key ideas for improvement cluster around three themes:

Engaging and Involving

- Promote the programme well in advance and in particular to third sector interfaces as helping smaller organisations to engage and learn is key. Ensure there is a balance of organisations and sector perspectives within each cohort.

- Identify "hooks" to help people and organisations with different perspectives understand the benefits the programme can offer for individuals, communities and organisations. For example, show how it aligns with the outcomes in Scotland's National Performance Framework and supports both personal outcomes and achieving system goals such as reducing isolation and loneliness and helping more people live well at home for longer.

- Undertake at the outset guided self-reflection on personal and organisational values, noticing where these link with the compassionate community ethos and where there is a need for more focus.

Enabling and Empowering

- Issue self-refection diaries and positive affirmation postcards to encourage participants to self-care throughout the programme and to acknowledge and record their learning and its impact, both individually and collectively.

- Carefully balance input and time for shared space reflection and active learning in sessions and hear from more examples of compassionate communities as these emerge. Include more voices from volunteers and people in communities.

- Build a more formal mentoring scheme into the supports offered in the programme. Invite previous cohorts to contribute as facilitators and mentors.

Amplifying and Sustaining

- At the start of the programme invite potential participants to commit to doing something with their learning and to sign up to advocate as a Compassionate Communities champion.

- Keep cohort numbers small to build trusting relationships and sustainable connections. Use a 'Network Weaving' style approach to support and sustain cohorts going forward.

- Raise awareness about Compassionate Communities through social media, social reporting and open space technology to engage widely. Host an annual "conference/gathering" to celebrate Compassionate Communities, share the learning and highlight outcomes.

Annex 1: Programme Partners and Facilitators

Name	Organisation	CC ALP Role
Anne Hendry	Director, IFIC Scotland	Chair, CC ALP Steering group
Alison Bunce	Compassionate Inverclyde Lead	CC SIG Lead and ALP Lead
Mandy Andrew	Associate Director ALLIANCE	CC ALP Coordinator, Lead Facilitator
Marie Curran	IFIC Scotland Co-ordinator	CC ALP Technical support
Clare Cable	Chief Executive and Nurse Director, Queen's Nursing Institute Scotland	Facilitator
Rikke Iversholt	Iriss National Lead for Social Care, TEC	Facilitator
Helen Rainey	HSC Integration Programme Lead, University of the West of Scotland	Evaluation co-lead
Sarah McGhee	Scholl Academic Centre, Hospice Isle of Man	Evaluation co-lead
Caroline Gibb	Truacanta Project	Partner
Giovanna Cruz	Scholl Academic Centre, Hospice Isle of Man	Partner
Laura Turney	The Scottish Government	Sponsor
Madeleine O'Brien	OD Consultant	Evaluation support

Programme Participants

Some participants joined as a local team while others only made the connections with their local peers as a result of participating in the programe.

Community / Organisation/ Role	Location
Compassionate Inverclyde volunteer	Inverclyde
Compassionate Inverclyde volunteer	Inverclyde
Compassionate Inverclyde volunteer	Inverclyde
District Nursing student	Edinburgh
Service Manager	Nithsdale Locality, D&G
Health & Wellbeing Team, Oliphant Centre for Health Improvement	Nithsdale Locality, D&G
NHS Dumfries and Galloway (Board member)	Wigtownshire, D&G
Health & Wellbeing Team, Garden Hill Primary Care Centre,	Castle Douglas, D&G
Mental Health Lecturer, Health and Social Sciences, UWS	UWS / Dumfries
Perth and Kinross Council Learning & Development Team	Perth and Kinross
Queen's Nurse, Clinical & Professional Team Manager, Perth City	Perth City
Team Leader, South Locality, Crieff	Strathearn
Occupational Therapist, Pitlochry Community Hospital	North Perthshire
Project Worker, Perth and Kinross Healthy Communities	North Perthshire
Community Engagement Worker, P&K HSCP	Perth and Kinross
Community Companions Coordinator, Volunteer & Voluntary Action	Dundee
Senior Nurse for Palliative Care, Angus HSCP	Angus
Associate Director, NHS Ayrshire and Arran	Ayrshire
Associate Improvement Advisor, East Ayrshire HSCP	East Ayrshire
QI Practitioner, NHS A&A	Ayrshire
Team leader, mental health & community link practitioners	South Ayrshire
Head, Children's Health, Care and Justice Services, S Ayrshire Council	South Ayrshire
Senior Manager, Children & Justice Services, South Ayrshire council	South Ayrshire
Masters Student, UWS and Project Officer, the ALLIANCE	Ayrshire
mPower Implementation Lead, LTC, NHS A&A	Ayrshire
Service Manager, HSCP	South Ayrshire
Senior Manager, Public Health Scotland	National
Advanced Practice Respiratory Nurse	Inverness
Health Improvement Lead	Argyll & Bute
Senior Manager NHS Lanarkshire	Lanarkshire
Head of Profession, Occupational Therapy Services	Lanarkshire
Health and Social Care Consortium, Community Solutions	Wishaw and Shotts
Locality Partnership Development Officer, Getting Better Together	Wishaw, Murdostoun & Fortissat
Acting Senior Nurse, Surgical and Critical Care, NHS Lanarkshire	Lanarkshire
Nurse Director NHS Lanarkshire	Lanarkshire
Locality leader for disability service, North Lanarkshire Council	North Lanarkshire
Community Link Team Manager, Renfrewshire HSCP	Renfrewshire
Clinical Services Manager, Accord Hospice	Paisley
CEO, Linstone Housing	Paisley
Acumen Network	Renfrewshire
Health Promoting Health Service & Public Mental Health Lead, Directorate of Public Health, NHS Grampian	Grampian

Community / Organisation/ Role	Location
Location Manager (Oldmeldrum & Turriff) HSCP	Aberdeenshire
Deeside Location Manager, Aberdeenshire HSCP	Aberdeenshire
Community Development Coordinator, Strathcarron Hospice	Forth Valley
Department of Nutrition and Dietetics, Stirling Community Hospital	Stirling
Queen's House	Kelso, Scottish Borders
CEO, Queens Housing, Kelso	Kelso, Scottish Borders
Supervisor Queen's House (Kelso)	Kelso, Scottish Borders
Senior Carer, Queen's House (Kelso) Ltd	Kelso, Scottish Borders
Compassionate Isle of Man Lead, Hospice Isle of Man	Isle of Man
Volunteer, Hospice Isle of Man	Isle of Man
Isle of Man Constabulary	Isle of Man
Community Links, the ALLIANCE	National – Glasgow
COPE Scotland	Drumchapel Glasgow
COPE Scotland	Drumchapel Glasgow
Nurse Consultant, Glasgow City HSCP	Glasgow
Clinical Services Business Manager	Fife
Senior Development officer, CAER Hidden Hillfort	Cardiff
Lead for Volunteers, North London Hospice	North London
Red Tent Doulas	North Wales
Life Doula	Independent

Annex 2: Flash Reports and Resources

	Theme
2020 June	Nurturing compassion in self and others Reframing for Resilience: Responding; Resetting; Restarting; Recovering
July	Creative and inclusive ways to listen to the voices in the community
Aug	Developing skills in engaging and influencing to build your network
Sep	Empowering, supporting and sustaining volunteering activity
Oct	Telling your story – how to use the power of narratives
Nov	Understanding outcomes and use of resources
Dec	Christmas Carousel of Kindness
2021 Jan	Re-imagining communities and creating virtual connections in response to physical distancing
Feb	Being brave, bold and ready to pivot – a compassionate community during COVID
Mar	Reflection and consolidation

Each Flash Report contains quotes, references, links to useful resources and to the edited recording and presentations.

Annex 3 Compassionate Communities in Action

Participants were invited to share stories of their journeys to develop as a Compassionate Community. We are pleased to share a selection from communities at different points on their journey.

A Listening Ear in Wigtownshire: facebook page

Why we began and what we are hoping to do together

The service was born as a result of COVID-19 when it became clear that a large number of older people who were being supported in face to face groups would no longer have access to social support, signposting, information sharing etc due to Lockdown. Based on the concept of coproduction I contacted a number of friends and colleagues to assess the need for support in a different form which would take on a one to one befriending role but at the same time be able to refer supported people for further support who would need it. Due to the immediacy of the situation I enquired who would be willing to volunteer an hour or two per week from their own home to become a telephone companion to a named person who would either be referred by another organisation or self referred AND be prepared to use their own phones – about 10 people signed up straight away.

I developed basic policies and procedures as a safeguard for volunteers and the people they would be supporting, one of my NHS colleagues helped with proof reading and scrutinising and an amazing female art student came up with a really attractive logo for us. A colleague from an Arthritis charity referred approximately 12 people who may want to be supported by A Listening Ear, after follow up 8 of them agreed to take part, they were matched with a volunteer and the service began. Very quickly volunteers offered their help and one has become a valuable administrative assistant, her skills and commitment has proved to be pivotal in streamlining all administration, coordinating our weekly digital team meetings, sharing information and taking charge of trailing a new App on behalf of a company called Carezapp which we are trying out for free.

The service now has 15 volunteers and growing with just over 30 people being supported on a weekly or daily basis and on average 2 to 3 new referrals per week from, NHS, Third Sector, Housing Officers, Occupational Therapists and self referrals.

What we have done so far and what has made this possible

We have managed to bring A Listening Ear under the umbrella of a local community organisation called Galloway Action Team, this has meant that all governance requirements can be met by their Board which ensures further safety for the service, volunteers and supported people. All project governance was already in place but the service required to adopt some sort of structure without adding to or taking away from the concept of purely voluntary service which is based on the concept of Compassionate Communities. We had already worked with the Galloway Action Team as part of the official Resilience Team as well as having links to their Board through one of our volunteers. Based on our joint experience while working on local Resilience we implemented Welfare Checks when a supported person failed to answer their calls on a repeated basis, arranged for individuals medication to be deliver by GAT and referred to our local NHS Health and Wellbeing Teams where appropriate e.g. one lady asked her volunteer about Care Call and how to access so we were able to refer her on to the service. One volunteer works for a Third Sector organisation who has been

funded to increase access to digital resources like smartphones or iPads as well as support and teach how to use – this volunteer is helping her supported person to join this scheme and has agreed to signpost anyone who would like to take up this opportunity. These are just a couple of examples of how we are working together as a community.

The challenges we face and how we are overcoming them

We would like to encourage more people to take part as volunteers who may not be able to use their own phones therefore, we will need either funding or a kind donation of phones to progress this. About half of the volunteers are on furlough and although they feel able to continue once returning to work, we need to be able to replace people when they decide to move on and at present, we don't have the capacity to do that. The administration side and management are growing we could really benefit from additional volunteers who are skilled in this area as well as social media. We are noticing the increase in referrals and expect this to grow it is a fine balance between accepting referrals and having the appropriate volunteer resource. We would have implemented a face to face befriending structure as a natural progression for some which would have re energised the service and attracted more people and volunteers, therefore, we have to explore ways we can value our volunteers and keep them interested.

What we notice is better and how this makes us feel

Our weekly team zoom meetings have now moved to fortnightly and the stories volunteers share are always inspiring regarding the improved quality of life not only of the people they are supporting but the volunteers themselves. They talk about the friendships they have made and what they are learning from the people they support on an increasing basis. The coordination and matching process is settling in as well as the recruitment and selection process. We have become members of the Telephone Befriending Network which has helped us to improve our governance and service. Our administrator has supported each volunteer to draw up a profile with their photo just saying what their interests are and why they volunteer for A Listening Ear which is being showcased on social media on a weekly basis.

What we have learned so far

We have learned that not every person who is referred wants a companion caller this may be that they have changed their mind, not fully understood what they were being referred to or had just forgotten. It takes time to follow up every referral but we have learned as a team not to take it personally if someone declines who has been referred. In some instances, a person has declined and then changed their mind and are now part of the service. This kind of service can be delivered to anyone regardless of where they live as long as they have a phone which makes it much more accessible. Volunteers are attracted to this type of role as they can support people from the comfort of their own home. The service requires little resources and to date has no funding requirements as overheads do not apply and volunteer expenses do not apply in the traditional sense. Volunteers repeatedly tell us that the regular zoom meetings are vital as they feel part of a team, can get to know each other learn from each other and have a laugh.

Words of advice and encouragement for others

If you have an idea pursue it, speak to friends, family and colleagues to brainstorm. Keep your vision simple and straightforward as this will be easy to sell to others and enlist their support. Make time for yourself, listen to others, accept or ask for help. Stay positive.

The update shared in March 2021 conveys the growth in influence and ambition.

Compassionate Wigtownshire Update March 2021

Now there is an established Wigtownshire Health and Wellbeing Partnership involving representation from Police, NHS, Social Work, Schools and third sector organisations. Building on the successful development of the telephone befriending initiative the befriending lead was invited to be involved in the Health and Wellbeing Partnership and was nominated as the group's vice chair.

To date the Health and Wellbeing Partnership have been allocating small one off grants that were not making an impact. The Vice Chair facilitated group discussion informed by learning from the Compassionate Communities ALP and developing the telephone befriending service. As a result, the group are refocusing with the aim of developing Compassionate Wigtownshire.

What we have done so far and what has made this possible

The next step is to scope, mobilise and progress community engagement over April and May 2021 asking the community:

- What is important to you? What do you value?
- What do you want to do? What is your priority?
- Do you want to be part of a Compassionate Wigtownshire? If so, what should that look like for you?
- What is needed for your community to thrive?
- How can you get involved to be heard and make things better for your community?

The engagement outputs will support establishing a Compassionate Communities Board and developing and agreeing priorities that are responsive to the community's responses.

The challenges we face and how we are overcoming them

The language of outcomes and outputs from statutory organisations has been challenged and replaced by engaging to identify community needs and values that will inform formulating a co-produced plan around what is important to the community. Some parts of our community are very remote with poor transport infrastructure, certain areas have the highest health inequalities in our region for example in some parts women live 10 years less than women in the east of the region.

We will use a coproduction approach to reach out to communities and to date have been approached by our Associate Medical Director who is a GP, regarding working with us to include local GP's in becoming part of Compassionate Wigtownshire for example a Mentoring scheme where GP's support our young people to become doctors, involving and inviting our communities to interview new doctors, following the success of this initiative in Orkney.

Nobody knows how much community resilience there currently is. Through the engagement we will find what is happening and join the dots.

What we notice is better and how this makes us feel The impact of the second wave was very harsh in our area and we feel that the path out of COVID-19 will be felt acutely by the community. The need for compassion is high. There is good drive, passion and enthusiasm from NHS and cross sector colleagues to move Compassionate Wigtownshire forward at pace.
What we have learned so far The Compassionate Communities ALP gave me the courage and belief in self – that what I do makes a difference. The courage and belief to take it forward and speak to the Health and Wellbeing Partnership. If I had not done the programme we would not be developing Compassionate Wigtownshire. The ALP has given me a depth of understanding and tremendous confidence. Networking with the Active Learning Programme participants was great, we have made friends not colleagues – it is a safe space with kindred spirits.
Words of advice and encouragement for others Use your networks – the Compassionate Inverclyde Lead is coming to speak with the Health and Wellbeing Partnership and I will stay connected with the ALP network. The focus on self-care is particularly valuable for activists like us, the ALP spends time on this which has been a learning curve for me and something I will value from now on. The networking opportunities are ongoing throughout and always supportive, inviting and built on fellowship which creates an open learning culture even beyond the life of the Active Learning Programme.

Truacanta Perthshire

Why we began and what we are hoping to do together

The original ethos behind Truacanta Perthshire was that Perthshire should be known as a place where practical kindness, support and openness of dialogue is present and accessible for those who have experienced loss, death, bereavement or grief. This sits under the wider Compassionate Communities work which is developing across Scotland.

When we applied to be part of the Truacanta project, we tried to capture a wide audience, so the application was developed in collaboration with ourselves in the Perth and Kinross Health and Social Care Partnership, NHS Tayside, PKAVS young carers group, and Dalweem Care Home in Aberfeldy, so the reach would be wider geographically, and across a wide age range.

What we have done so far and what has made this possible

In November last year, with support from 'Good Life Good Death Good Grief', we held a 'To Absent Friends' event to celebrate and remember those we have lost over tea and cake. We had some great discussions, and managed to get some of it on film, the link for which is at the end of this document.

Death through suicide and drugs and alcohol became part of the wider focus of Truacanta, and now we are working closely with these teams as part of their recovery programme. People were more open in talking about different experiences of loss and grief that we thought possible.

COVID-19 meant that many of the Truacanta team have been drawn back into redeployed roles to support the NHS, and of course lockdown has meant new ways of working for all of us which has changed direction in some of our approaches.

The challenges we face and how we are overcoming them

In relation to COVID-19 and how it has affected Truacanta, there was an option of deferring the project until 2021 but we felt that now more than ever is the right time to be talking about loss and change in our communities. We've seen how communities have been helping each other through acts of random kindness, but the loneliness felt by some has been profound, as well as loss of family contact and being close to those we love. We started to think about ways to gather stories of our community, but in a safe way.

The idea of 'selfie wings' came to me when I was scrolling though Instagram and saw a pair which are painted on a wall in Liverpool. We successfully applied for some money from the Compassionate Communities Truacanta fund and have secured a site in central Perth to paint the selfie wings, which will be started mid-August 2020. We encouraged young carers to submit designs, and now we have two fantastic pairs of wings to choose from.

The aim is for people to film themselves or take a selfie photograph in front of the wings and share their stories of what has affected them most during COVID-19 in their community, whether that be loss of companionship, or discovering new friends. This will then be shared on social media, and we hope to create some short films of people's stories around compassionate communities in Perthshire.

What we notice is better and how this makes us feel

Although most of us who are involved in the Truacanta project are working from home, it has been easier to connect more widely to discuss the selfie wings idea, and the compassionate community conversation has definitely become something more people are noticing. People are now recognising how different kinds of loss can affect us, and through enforced isolation, are more acutely aware of how important human contact and sharing how we feel is in our daily lives.

We hope that the wings will provide a recognised symbol in our community for people to tell their own story, and I think we still have much to learn from each other.

What we have learned so far

I guess I have covered some of this in what I've reflected on how it makes us feel. Perhaps because of COVID-19 lock-down we have learned what loneliness and isolation feels like, where we might not have before.

Words of advice and encouragement for others

The selfie wings were just the seed of an idea which I was initially a bit shy to suggest because I thought it sounded a bit random. It has been amazing how so many people have loved the idea, and now there is talk of having wings all over the place! Someone came up with the great idea of having wing lapel pins so that it becomes a bit of a peer support symbol, which I hadn't thought of. Don't be afraid to trust your heart when you know your idea feels good – the chances are it will resonate with more people than you think.

To Absent Friends 2019: Thoughts on loss and grief from Perthshire
https://www.youtube.com/watch?v=q_LkoR5Equ4&feature=youtu.be

To Absent Friends Film of Event, introducing the Truacanta Projecthttps://www.youtube.com/watch?v=uB45U5uc8fg&feature=youtu.be

Heart of what we remember.

Young carers 'selfie wings' winning design

Contact details

Truacanta Perthshire Twitter @truacanta

Website: https://www.goodlifedeathgrief.org.uk/blogs/truacanta/ Truacanta Blog

Compassionate Edzell

Why we began and what we are hoping to do together

Edzell Patient Participation Group, Brechin Health Care Group and the Angus Health and Social Care Partnership (HSCP) collaborated to develop and submit a bid for Truacanta project funding in December 2019. Whilst the bid was not successful it was the catalyst for creative and collaborative developments between Edzell Community Group and Angus HSCP.

Edzell has a well-established Dementia Friendly Community and they and the Patient Participation Group collaborated with the HSCP leads to engage in community conversations asking, 'what support and initiatives would you like / need?' The outcome was more education for the public on end of life and care.

What we have done so far and what has made this possible

The HSCP Senior Nurse for Palliative Care and Integration Improvement Manager worked with the community to develop and co-produce a four week course which was delivered across January and February 2021. The course includes the needs of the person and the carer, how to feel more confident in having end of life conversations and was delivered in a relaxed and inclusive way.

Whilst the catalyst was Edzell community the course was broadened out wider across Angus through the active Churches network.

The plan is to run the course in October 2021 and broaden and enhance Edzell's Compassionate Community and beyond.

The challenges we face and how we are overcoming them

In response to COVID-19 and restrictions the normal community activities for Absent Friends Week, November 2020, were adapted to a blended approach of online and in person (Film).

Again, the Churches Network supported mobilising and sharing this initiative across the whole of Angus encouraging all to get involved and remember a lost loved one. People submitted their stories, and these were turned into an art form and video by Angus Creative Minds. The video was shared and very well received at an evening event. The artists shared at the end of the film that they had felt a great responsibility to convey people's stories and what a lovely opportunity it had been. The link to the video: https://vimeo.com/477952821/35efdec0d0

What we notice is better and how this makes us feel

Working in partnership with communities and supporting them to undertake projects that they believe will make a difference has been so beneficial for everyone involved in this experience.

What we have learned so far

'*NHS work is so embedded of my professional role and work. Being part of the Compassionate Communities Active Learning Programme (2020-21) freed me up from this. You can do this work without agenda setting. This needs something different.'*

Words of advice and encouragement for others

Start with no agenda – have the conversations with your community and it will evolve

Compassionate Isle of Man

Recognising the importance of families, friends, neighbours and communities working alongside one another and statutory services, Compassionate Isle of Man aims to transform societal attitudes and behaviours around death, dying, loneliness and isolation, and enable and empower people to help and support one another at times of crisis, increasing health need, death, dying and bereavement. It is building resilience, promoting well-being, connecting with people, creating community connections and nurturing a compassionate community to enhance the quality of Island-life through a number of community schemes.

Social Cafés

Many wonderful cafes across the Island are creating safe spaces for vulnerable or lonely people to meet, socialise and enjoy each other's company in a relaxed setting. Social Cafés offer people of all ages the perfect opportunity to tackle loneliness and support one another, whatever their circumstances may be, and have adapted online.

'Sit and Chat Benches'

Across the Island, a number of benches are distinctively decorated and easily identifiable as places where people can do just that – sit and chat. It is hoped that creating community connections, and strengthening support systems will help to decrease loneliness and isolation. The benches can be used by anyone, of any age, and are a visible sign to encourage simple acts of kindness that could make a difference to people who may be needing human contact. Island neighbourhoods have donated benches in the Spirit of Community Kindness and to recognise the efforts of key workers.

Palliative Care Companions

Companions are specially trained volunteers who are there to help provide social support to families at times of need. They do this by sitting with the patient who has a life-limiting or terminal condition; to enable carers to have time out from caring, to attend appointments, undertake daily tasks, to preserve their resilience and in doing so allowing families and carers to maintain their community support network. During the pandemic, companions have been providing supportive phone calls and have helped more people to have important end of life conversations.

A friend to the end

Provides companionship and support to people in the last 72 hours of their life by sitting with the person, holding their hand, reading to them, playing music or simply just being with them during this time. Run by trained volunteers, this programme also helps provide respite for the patient's family or carers to eat, rest and freshen up, or if the patient has no family on Island, ensures they are not alone at this time.

Back Home Boxes

These contain essential, non-perishable groceries for people who live alone and are returning home following a stay in hospital or Hospice, so they don't have to worry about going to the shops in their first few days back home. The initiative is supported by the Co-op and almost 90% of Back Home Boxes are delivered to older people, helping reduce a sense of isolation and loneliness and aid their recovery.

Dying Matters Discussions

Throughout this year's Dying Matters Week, a "Before I die I want to…" virtual discussion encouraged people to start thinking about their future and what their life might look like before they die. This opened-up a whole host of conversations, and after sharing lots of in-depth thoughts, tears and laughter, our community board was full of bucket list wishes including travel plans, family wishes, peaceful thinking and more.

Compassionate IOM has flexed and adapted to the demands and changes brought by COVID- 19 by introducing some new initiatives.

Hidden Disability Sunflower Scheme has raised awareness of the hidden needs of people within the community and is supported by an island wide Lanyard Scheme as a means to request support

Helpout.IM webpage was created to support people in the community with both practical and psychological needs. Volunteers act as call centre operatives. The webpage had over half a million hits April – June.

Psychological support sessions, streamed via social media and on local Radio - over 38,000 viewings

Providing **Technology** to enable families to come together in time of crisis and loss by providing iPads, with apps such Facetime and Zoom, to keep families connected.

Sit and Chat Benches

The benches can be used by anyone, of any age, and will promote simple acts of kindness that could make a difference to people who might be living alone and needing human contact.

Back Home Boxes

'Back Home Boxes' contain essential, non-perishable groceries for people who live alone and are returning home following a stay in hospital or Hospice.

Palliative Care Companions

Specially trained volunteers who are there to help provide support to families at times of need.

A friend to the end

A friend to the end is a wonderful programme specifically designed to provide companionship and support to people in the last 72 hours of their life.

Social Cafés

Our Social Cafe events are all about getting people out of the house and meeting with others in a relaxed setting.

Compassionate Volunteers

As with Hospice Isle of Man's incredible army of volunteers, we are extrememly grateful for the support received from our caring and compassionate volunteers.

Compassionate Inverclyde

This is the most established of the Compassionate Communities in Scotland and was described in some detail in the evaluation available at available at ArdgowanHospice.org.uk

Their story continues to evolve with new initiatives and adaptations in response to the pandemic. Compassionate Inverclyde is a valued member of the weekly resilience meetings led by the Community and Voluntary Sector umbrella organisation, in order to respond to the needs of the community in a coordinated and timely way

No One Dies Alone
NODA Companions have supported a total of 91 patients and their families at the end of life. During COVID-19, 49 NODA Companions continue to make support phone calls to isolated members of the community. When restrictions are eased and District nurses are released from their vaccination duties, they will provide training for companions to provide NODA support at home.

Back Home Boxes/isolation boxes/ Nightwear/toiletries
Due to restricted access to hospital and reduced throughput, the service is being supported by a smaller team of helpers. A new partnership with other community organisations has been formed to provide boxes as needed by people who are shielding or isolating. Volunteers have collected and delivered nearly 400 prescriptions. When family visiting is limited, patients in hospital need nightwear and toiletries. A very successful social media ask to the community generated many donations.

High 5 Programme
The team are preparing to offer the High 5 wellbeing programme virtually, initially with CI volunteers and staff at Erdogan Hospice and then virtually with other teams or groups in the community.

New Mum Companions
In a new initiative, two new mums are being supported by new mum companions, to provide support and friendship for those at risk of feeling vulnerable and isolated.

Jolly Boxes
1600 festive Jolly boxes were distributed throughout Inverclyde community including IRH, Erdogan Hospice, sheltered housing, nursing/care homes, homeless centre, individual members of the community who would have no one visiting. This was a community effort as part of our Christmas Events. We worked in partnership with Gilliam Maxwell at Amazon, Heather Mitchell at Riverclyde Housing and Brian McLaughlin from Morton in the community.

Absent friends
Annual absent friends' week events across Inverclyde when members of the community place a light in their windows at 8pm.

Compassionate Inverclyde Award Scheme
This new award will be for both individuals and organisations and will capture stories about kindness across Inverclyde.

Compassionate Aberdeenshire

Aberdeenshire Health & Social Care Partnership

Each local community mobilised grassroots social action and support for key workers.
Local people responded around what was important and meaningful in their local community.

- Donations of food, toiletries, iPads, DVD / CD players from individuals and local businesses
- Supplies of PPE
- School pupils drawing rainbows and writing letters
- Knitted hearts and Home Baking
- Vintage cars / tractors drive past
- Musical entertainment
- Transport for NHS staff to get to work
- A cottage for people who required to self isolate

A sample of the many individual and community acts of Kindness

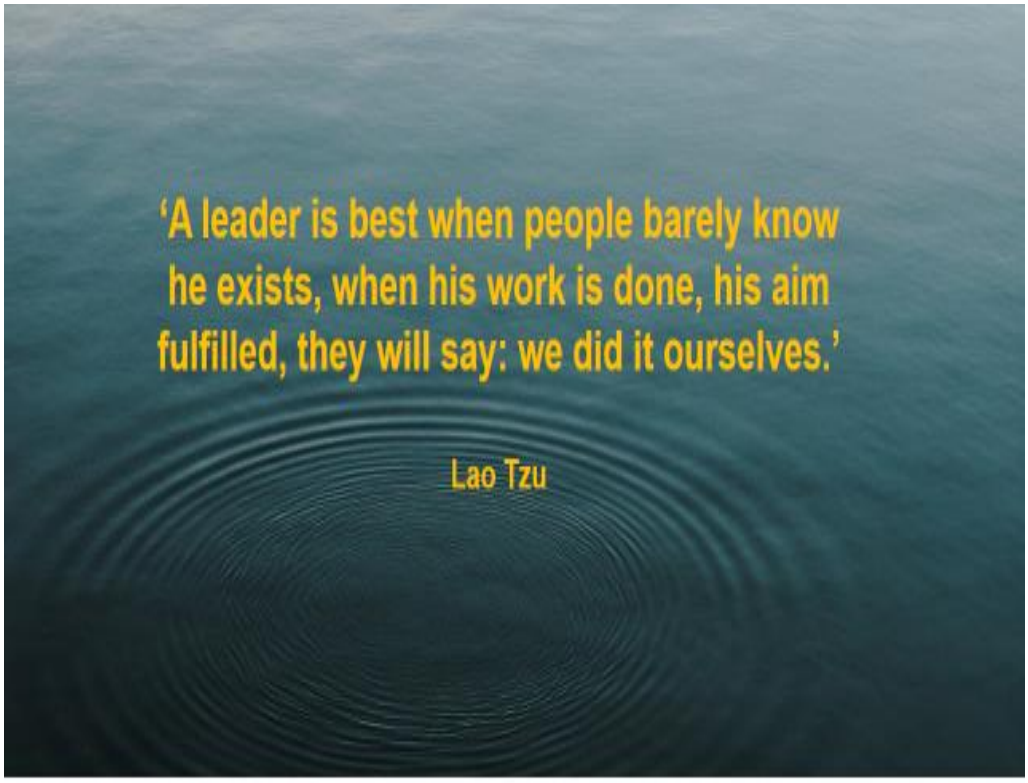
Throughout the area, we have had people making scrub bags for the staff including a lip balm. Hand cream and nice things like that for the home carers. Other people have made visors, or things to go behind a carer's head so the bands don't have to go behind the ears

Donation of PPE from Oldmeldrum & Turriff Academies. This was a great help as we waited for supplies to arrive

Local volunteers have come together in the village of Tarves and formed the 'Tarves People's Party' - a small group which donates food parcels to local people in need. They received a grant from Aberdeenshire Council of £750 and another £500 from a local shop in the village

Trafford's cafe gave us a carrot cake. Morrison's motors got in touch to say if any of our staff were struggling for vehicles to get to work or to carry out visits they would let us use their cars. A lady with holiday lets offered her cottages for self isolating if needed for staff members.

We were overwhelmed by the amount of response and donations we received after having put out an appeal on the Inverurie Community Page for donations of clothes for a very vulnerable gent in Fyvie


'A leader is best when people barely know he exists, when his work is done, his aim fulfilled, they will say: we did it ourselves.'
Lao Tzu