**I-Can-Do Service project\_Stakeholders Co-design session 3-20231127-transcript**

November 27, 2023 (1h 37m 26s)

Brief note about participants:

S1: Staff from local community volunteering service

S4: Manager of community volunteer service who manage local CVS within Northern Manchester

S6: Lead service designer of dementia organisation

S7: Previous consultant for dementia support service

I1: Researcher from Manchester Metropolitan University

I4: Researcher from Manchester Metropolitan University

Cannot decipher = (unclear + time code)

Sounds like = [S.L. + TIME CODE]

|  |  |
| --- | --- |
| I1  0:05 | Great. Everybody ready to… recording is on. Thank you very much everybody for submitting a giving us the consent. If you can just hold up your thumbs again. Great. Lovely. Umm. So, yes, So, from the co-design sessions that we've had with all of you, we found some really interesting things, especially the division or possibility of both internal volunteering. So, within an organisation where dementia organisation where people with dementia already at getting support and externally and especially where and for both of those options, what kind of support and safeguarding is required for people in these areas? So, we want to explore that a little bit more today and also what support in terms of if you were going to deliver this, you might need in order to deliver it.  So, to the digital services or otherwise to help you go through that process with the clients to provide any necessary training safeguards. All those kinds of things? So, let's get started on that. [I4], do you want to share the screen? And [S7], please do ask as you've not been part of the first session, but we did have a separate meeting before. If there's anything I need to we need to catch you up on in terms of the service itself, I seem to remember I talked to you through it the basics. So I assumed that I don't have to do another introduction on that for you, So, we'll just jump in. But if there's anything that doesn't make sense, please just jump in and ask. |
| S7  2:26 | I will do. Thank you. |
| I1  2:29 | [I4] |
| I4  2:29 | And could you all see the PowerPoint? |
| I1  2:32 | Yes. |
| I4  2:34 | Because I can't see you all now. So, if there are any problems, just chip in, then let me know. This is the diagram that we previously presented how we going to deliver the ICanDo service which actually involves people living with dementia, they are all at the early-stage dementia and they are referred or by the dementia organisation to join the service. They will be allocated with a wellbeing mentor who are usually dementia support workers and have three sessions. The first sessions will be exploring the their strengths and interests which they would like to engage in the later voluntary service or social activities and the second session is a group sessions which also involves workers from a volunteering service to join together to explore the opportunities and the third session will be the very practical session to iron out what they were going to do next and volunteering. So in the third session we also include the carer. In the third sessions, in order to elicit some support for the future volunteering work, this is just the rough idea of about how the ICanDo service will be carrying out. This is how we thought it might be the procedure that will be carried out in the future as well. |
| I1  4:32 | Yes. So, you've seen this map before. And so, building on that map now, which we've obviously talked through and there were some key issues around the support especially in that as people get into volunteering that we now want to explore which aren't yet represented on here really. So [I4] has put together a little bit of an expansion of how people work together. So, rather than looking at it as a journey, we're now looking at the interrelationships of people. Yeah, [I4]. |
| I4  5:19 | We have a lot of very rich information after the previous sessions. So, we just separate this and more focus on different parts or different journeys of the ICanDo service. So, we just outline who are going to interact or will be involved in different stages of the service. So, for the first stage, that will be the part that how people are going to access the ICanDo service from the conversation is usually potentially will be the dementia organisation or the social prescriber will be interacting with people with dementia and their carers to decide and provide information to let them make a decision whether they would like to use the ICanDo service. So, after they have agreed to join the ICanDo service the wellbeing mentors, and the Community volunteering service will involve and work together in those three sessions or even more sessions if people with dementia required. So, after they have gone through those sessions and the people with dementia, having the confidence and feel that they're ready to participate in volunteering, then there are more people involved in the volunteering process because that's what we previously said we would like to explore, about the support and safeguarding which we think it might be useful to have another volunteer to support people living with dementia. So, we give that person a name called ‘volunteer buddy’, which someone will pair up with people with dementia and participate in volunteering work. And we have dementia organisations, wellbeing mentors and people from volunteering organisations to monitor and support the whole process. But after some time, after the people with dementia are working, participating in volunteering, sometimes it would be good to have review sessions between wellbeing mentors and the person living with dementia to see if they are happy with the volunteering work or is there any changes in the conditions that they have to reconsider and think about what they're going to do. So that's why there is an arrow coming back to the ICanDo wellbeing mentor session again. So, here is the brief idea about how many people are involved in the whole process. |
| I1  8:24 | Great. Thanks, [I4]. So, just to add a couple of things, as [I4] mentioned in the green column, which is representative of the Wellbeing Mentor sessions being delivered between the Wellbeing mentor, the person with dementia, their carer and the Community Volunteer service. These sessions as explained previously, these are three sessions, but they can be repeated as necessary until the person with dementia has sufficient confidence. And that means, and I suppose we haven't represented that here yet, there can be some transition between that and the volunteering stage, which we also discussed. So, I just want to fill that in. For example, in the person with dementia starting to shadow somebody in an activity that can already then be in the volunteering aspect or lead into the volunteering aspect. So, that is in a nutshell, some of the things taking a slightly different perspective on the map and how the social relationships that we need to walk through this. Are there any questions before we get to the more detailed feedback. |
| S7  10:08 | But I'd just be able to clarify is the wellbeing mentor provided by the Dementia organisation. Or is it an independent role? |
| I1  10:16 | That is not entirely settled at the moment, So, there's different options. Obviously, in our trials, we've been working with dementia organisation with [Name of partner organisation of previous trial] and our wellbeing mentor was a dementia support worker, but we also discussed that it could potentially be social prescriber or… and we'll come to that. There might be other opportunities for people to take on that role, but essentially that's why we we've created this name of wellbeing mentor for that role because it could be a number of different people from different walks of life who could actually deliver that potentially. |
| S7  10:49 | Mm-hmm. Umm. Yeah. Thank you. |
| I1  11:10 | Back to you [I4]. |
| I4  11:12 | We have summarised the findings from our previous discussions with all of you that participated in previous sessions. So we're going to go stage by stage. So, in the first stage, we like to know how we engage people into the service. So the general procedures or the process would be the dementia support worker, or the memory loss adviser will offer the information about the ICanDo service to go to who they thought they will benefit from the service. That means they will offer the information for the appropriate people with dementia and their carers, and they will communicate with them through face-to-face meeting in the like a monthly hub meeting telephone conversations or email with the carers. And we also know that people with dementia or their carers might have access to the Internet to obtain the information or get the information from different activity groups, So, they will take the information back and decide whether they participate in it. But there is something that might consider as when we talk to the people with dementia and their carer is that they would like to know the choice of activity available or some of them has also experienced some kind of difficulty in traveling to even in the very close local areas. They will think about whether transportation will be offered when they participate in the ICanDo service or volunteering, and the carer have some kind of concerned about the safety when people with dementia just participate in volunteering alone without their support. And we also heard some opinions about people with mild stage dementia or early-stage dementia are not quite interested in that kind of activity, So, whether there is incentive for those people to participate in volunteering. So, from the dementia organisation perspective, they also have concern about monitoring, safeguarding responsibility and whether the volunteering environment is suitable for them to join the surface and then next one is probably echoed the questions from [S7] is that the dementia support workers is the only person that is capable to take up wellbeing mentors. And that will bring an issue about the workload because there's not many support workers working for the dementia organisations, while they have quite a lot of cases that they need to support. So I think that's quite a few questions that we would like to know more in this stage and. So, [I1], do you have anything to add on? |
| I1  14:44 | No. I think that covers broadly what we've been sort of, I mean this is very short. Obviously, we've had some very rich conversations, and we've tried to bring together what those key messages from those conversations were. There were some key discussions, obviously around people with dementia being interested in having the confidence to participate, and I think that came out. Obviously. there is an interest in having individual opportunities to do something, but then at the same time there's a bit of attention between people wanting to go out and not having the confidence or not having the support to go out. So in that's quite a delicate balance to manage I think. Do you have any thoughts on this? |
| S7  15:58 | One of the programmes that I was previously involved in had a role that was similar to the wellbeing mentor, and it was the university that was running the programme. It was two universities. We offered that role out to 2nd year social work, nursing and allied health professional students, because they were looking for stuff to put on their CVS. They had to have background checks, and they usually also carried out some face-to-face work with patients or clients that in a supervised setting or they had family members who had dementia. So, we got expressions of interest from that group, and it was really well received, it was a good link up with people who are looking to do that type of work, get experience, wanted to do something meaningful and quite a lot of them are interested in staying on. some people might have started because what ticked a box or something they wanted to do, but it was a great way of growing kind of social resource. And finding ways to connect the university to the community as well. |
| I1  17:14 | Great. Thanks you. [S6]. |
| S6  17:19 | So, I think it's many things, So, I'll try and make some sense of what's going on in my head and I think there's a couple of things. One is, and I think what you said that is great in terms of that opportunity and that experience and obviously about them to skills as well. I was thinking when I did my public health masters, which is not that long, I only a few years ago. Even within COVID there was lots of opportunities to gain experience and outside of kind of like… But still within that home health and social care environment and I'm thinking that there's opportunities there, I think that some of what we've spoken about before, for me it's actually kind of partnership model just because of the level of support that we provided an organisation to our volunteers and working with people living with dementia can be incredibly challenging. So, there's a lot of peer-to-peer support, but also we have volunteering managers involved in the process as well. And these are the benefits of things and I'm just wanting to pull up a page in a moment and then I can maybe share a bit more detail around that as well. But that kind of training, support and that are critical, having space to and I just need to double check it. But I think even access to additional kind of counselling support as well that we would provide access to.  So yeah, I don't know whether there is more of a partnership model with the charities that you could consider just because there is a wealth and then also they've got that they can put on their CV as well with record not obviously but universities are recognised but recognised organizations outside of the academic world as well and that just gives them more probably breath across their CV's then in terms of organisations and an organisational understanding as well. |
| I1  19:31 | Great. Thank you. So, I think we've got the wellbeing mentor who could be one role just to summarise. So, many roles that we need to be careful that we're talking about the same ones or we're clear ones we're talking about. So, there's the wellbeing mentor role and [S7], what you said was that students could potentially take that role, which is really great, could be a good development for them. Then we have the volunteer buddies, the healthy volunteers, supporting people with dementia. So, we're talking about them now as volunteer buddies, OK. So that we don't get mixed up with anything else. And So, these are the healthy volunteers potentially supporting people with dementia. And I think [S6], that’s what you were talking about in, in partnering with charities in that regard and providing training to those volunteer buddies, peer to peer support, volunteer managers, as well as counselling for volunteer buddies, yes. |
| S6  20:48 | Yes. And again, there may be opportunities to provide support in different formats or that you can training for the previous role as well- the wellbeing mentor. |
| I1  21:02 | Yeah. Great. And all of that would take away the workload issues that people in the dementia organisations, dementia support workers might experience, because we've heard about that last week as well that potentially is an issue. Why might it not work? So, even the wellbeing mentor could be a volunteer if, let's say, a student volunteer. |
| I4  21:42 | And I have a question regarding how the dementia support workers will access the information of the new service. Because ICanDo service will be introduced as a new service so, from which channel they will get new information …The information about the new service and then how they consider to introduce this service to the client. |
| S4  22:18 | This is potentially something I was going to chime in on, I think you've got there quite nicely with that because I think the process is quite clear there and you might have clearly considered it, cause you've just led us to that point. But that is a layer that needs to be considered here. Probably all points, but definitely here around that piece of information around. Obviously from what I observe, I know when it comes to the social prescribing models and the way it pans out in Manchester and there is very much that wealth of information, things that those social prescribers could be signed posting into. So there needs to be a bit of an information education piece around this as well about basically going to market with this and making sure the right people are apprised of it. And then they have that role to disseminate it effectively as well. And then with that, you need to convey and draw some lines around. Maybe get in front of these things? About what maybe some of the limitations are what some of the things that needs to be considered, what has to be in place for it to work that all has to be there before the referral is made or before it's put on somebody's radar. So, that then it is an effective connection or brokerage. |
| I1  23:32 | Great. Yes, that's really valuable input. Thank you. We certainly will. We'll need to do that. Excellent. |
| S7  23:47 | So, I was just gonna add, it's probably sensible based on what everybody said as well to have more than one wellbeing mentor allocated to someone as a person could drop out could leave, they might find it's not the right fit for them. That might offer some of that peer support and the organisation that I've worked for previously provides a business PA to a woman with dementia, who's a dementia activist, and we've got a paper we're writing to publish about kind of all the practical day-to-day issues and the emotional labour and the worry and the checking up that people do that isn't part of the core job. So, and one of the things that we we've basically realised that we had to provide almost like a community of support. So that bill and named business PA for the women. But that other people that can step in when the PA's and holiday or do different things, etcetera. So, yeah, having more of a community of support, or at least I mean mentor and a backup or something I think would be sensible. |
| I1  24:52 | Great. Thank you. Very good point. |
| I4  25:00 | And I’ve got one more question. Is that because from previous sessions and one of our participants told us that people with early stage dementia might not be interested in this service and some maybe some other people at more advanced stage might could be interested in this service, but they are no longer capable to and participate in volunteer work and in order to make the service more scalable. So, we're thinking whether it would be good too like then the eligibility for people to join the surface lies people who are having mild cognitive impairment to join the service as a preventive measure and to also benefit because they social activity is out, they could be also benefited from social activities. So, I would like to know how? What's your thought about that? |
| I1  26:20 | Yes, just to elaborate on what [I4] just said, one of the issues came up or was raised as a consideration was how people at the early stages will access the service. Because we have a relatively small number with early-stage dementia being diagnosed at the early stages and coming into the dementia organisation and therefore are those who actually want to be active, whereas most often people get diagnosed probably more like near the middle, medium stages of late, early to mid-stages of dementia, at which point service may already be demanding for them. So, there could be different stages of the service, So, from volunteering, one discussion rules around having discussions as to different stages after service that people could start and if they have early-stage dementia or even mild cognitive impairments or pre dementia and that they engage in volunteering. But then for those at a slightly later stages, it's more about participation rather than about them volunteering themselves. But being able to participate in individual activities rather than dementia labelled activities, which they might not at this stage might not be comfortable with. [S6]. |
| S6  28:11 | I was just going to say on that. I think it always it always depends on an individual as well, rather than potentially even stage in terms of abilities, and also in terms of what the volunteer role is. And I'm just thinking from a bit the perspective of like different people. I know that living with dementia and like skills, So, things like companionships, conversations there's lots of disability and I think that it's important to focus on someone’s ability and what they're able to do rather than what they're not able to do and then it's working around that to be able to support them with and with how their symptoms affect them and what the challenges might be. And that might be logistic getting to the volunteer service, but actually both said that they can still support regardless of where they are as well. I think we did speak about transition as well from volunteering into then participating as well and looking what that transition might look like too. Also, from a safeguarding perspective, as to when it may be unsafe, someone to continue to volunteer or where they may need additional support. So in the same way as you would adjust, it's making reasonable or just announced that within that volunteering service to be able to adapt their as long as it's feasible. I just want someone to volunteer as long as possible, and the other piece for me is very much around language as well. So, at the early stages, people may reject or may find their diagnosis difficult as well. So, I think volunteering services need to focus on the benefits and around kind of brain health and how volunteering and social impact can benefit overall health as well, including brain health. But then also looking at that actually as the symptoms progress, people may also forget about their diagnosis too. OK, So, that could be another challenge, and it became though if you get the language right around that and then and recruiting people into it and then hopefully that will overcome that as well. Even if someone does have a diagnosis in terms of wanting to keep their brain healthy and etcetera, So, just a few things. |
| I1  30:47 | Great. Yes, absolutely. Thank you for pulling us back into that. That's where we started off trying to change the language and focusing on what people can do with, hence the name of the service. Great. Thank you. Yes. And just that perhaps I can bounce that to you, [S1] or [S4] in terms of volunteering. There's obviously a general offer of things that you tend to have is there is that or could there be a focus on things like you know? Is there some mechanism to pick up if people indicate certain interests of just having a talking group or perhaps that could be to connect them to something that's appropriate to what they're interested in, and I think [S6] just mentioned companionship and conversations. |
| S4  32:04 | I think what [S6]'s done in the previous bit is really like, say brought us back to where we are and I think really nicely brought together the golden threads of all this about like what volunteering could mean, what it could be, what it looks like and then obviously the experiences which [S6] can really speak to us all given the line of work and what was outlined in terms of experiences. And I think as brokers of the volunteering that we obviously have that really unique insight and knowledge, don't we around the scope and range of roles that people can get engaged in and in that kind of what I always call the big volunteering sense that stuff that we know about where we hear from the groups and organisations that give us their intelligence about opportunities and vacancies and so, I think this ICanDo funnel of bring in all that stuff to the service around preferences, strengths and practicalities it's exactly what they're going up. So, I'll defer to [S1] in a minute, but it's exactly the richness of the information required from people you know. So if this piece of work is happening in the background and there are those agents that are supporting that individual, working with that individual or that individual themselves is through their own agency are doing it, if they're led to those conclusions, it becomes a lot more straightforward for us to… maybe not obviously directly broker the volunteering because that's to be seen. That's another bit of the conversation, but in terms of the opportunities there in that we could match those things too. It becomes a lot more straightforward, and so you could absolutely see how like as a mechanism that, that would work with all that rich intelligence to us and if you think about capacity and all that kind of stuff we've talked about, I know you're very much aware of that. The price of that, but it makes our jobs almost straightforward to interface with like a partner or provider to give him that information to look into or to chase up. |
| I1  34:06 | Yeah, that that's great. And in order to do that matching, I suppose you already have a process or is there something additional you would need in that context of the service? |
| S4  34:21 | That it's potentially what was said before, So, if there's another bit of an education piece to do, it's finding those organisations that are they are able to engage with this piece of work to be in, in receipt of it's a city can do the best job they possibly can involve volunteers safely, soundly, securely for all the reasons that we know appreciate. |
| I1  34:44 | Yeah. So, it's not security, safety and support part that really needs to be developed by the sound of it, is that right? OK, great. [I4], you have any more questions about the slide, or shall we move on? |
| I4  35:06 | I see I have no further questions, So, maybe we'll move on to the next stage and which we might have covered some of the questions in this slide already. So, we previously think that dementia support worker or social prescriber would be eligible to deliver the sessions that we can have extra thought about who to involve like students and or who someone who have want to have such experience, So, involving the wellbeing mentor sessions from our previous discussions, dementia support workers would believe that if they have the booklet or for people who have dementia awareness training would be good to deliver the sessions they would probably need the emergency contact of people with dementia, like the information about the named carer in order to get running the service and some other information that required attention like the health conditions and we are also good to know the role of Community volunteering service is to explore that, also involving the explorations of the interest and the needs through face-to-face discussions and trying to do the matchmaking according to the to the interest and also the need for volunteering opportunity and or all other social interest group that people with dementia could involve in and trying to identify the potential opportunity or interest group for them. So, the current information sharing method would be by email or phone calls and we also have some other insights from people with dementia like they would like to recall their feelings by you saying emoji instead of writing the reflections and they would like to have a reminder to help them to engage to the volunteer later and we probably need to know how people with dementia could give consent about sharing of their information and we need to have something in place to ensure the information governance and also we're trying to figure out how to integrate.. probably not fully integrated but trying to have different parties like the dementia organisations or the Community Volunteering service to work more easily with that information while they still have to document the progress of the people with dementia. |
| I1  38:15 | Thank you [I4]. Yes. So, we had quite a lot of details came out with regard to the wellbeing mentor at Sessions and how to facilitate them. Maybe we can take these now step by step.  So, in terms of who's eligible to deliver the sessions, the dementia social support workers and social prescribers, we already talked about potentially students. So, I think we covered that but do let me know if there's any anything else that's popped into your mind. Otherwise, we'll move swiftly on to support required. So, does the booklet just simply thinking of what is needed? And should the booklet remain a physical booklet and additionally it can be translated into an online version for those who like working with the online aspect, but also in order to facilitate that information sharing because one of the safeguarding aspects we were thinking was that it would be useful to share the information on, especially on decisions from the third sessions of the Wellbeing Mentor sessions. In terms of decision making, what will the person with dementia do? Who will support them? When do they do is how do where is it happening? How do they get there? All those things. So, that all of the partners involved through the wellbeing mentor, the person with dementia, carer as well as the volunteer organisation or buddy, would be able to access that information, share that information rather than having lots of different phone calls between different peoples and where information can get misunderstood or loss. Having that in one place does that seem useful? Attractive. Anybody any comments on that? |
| S4  40:48 | I think the information that is like a bit of an aerial to itself. I think in terms of the transfer of information that those stuff, those things you've listed as so, typical of things that you'd expect to be transferred in any relationship building or development of. So, getting something like this. So what? What says? I guess it's just one more thing into it. So, to keep front loading all the stuff that you're coming up with. But I think from reading this slide, obviously jumping forward as a slide, but in reading this slide, I think for us in terms of the interface that are volunteer centre or brokerage would have with this obviously there's reference there about how we could be interface, where to do those face to face discussions to match and do those things. And I think there is an aspect of that. But I see it in a bit higher level than that in some much as if it's also an approach made source in Manchester, we'd be trying to be a little bit more effective in how we can work in the sense of adequately providing that information about how we think and operate, how you can access and get inside information and then do some work I guess throw some capacity into what can we do to actually curate or aggregate those opportunities that sing best to the people have been broken into this because again there's a supply chain thing here isn't it So, the recipients of the organisations that receive this, I know you've talked in the internal context and they're potentially the warm contracts where it will play out a bit more seamlessly but some of that work needs to happen with the external groups in some ways where an agency like us it can be quite effective in brokering up that relationship and open that door to say there's this piece of work at that place is there a consideration for you to say you give us your opportunities can you state that this is also appropriate for people coming via that service and if that happens enough there's quite a healthy list of opportunities that one of these wellbeing mentors, all supporters could be signposting people into as I thought of the first step So, it's all got some inbuilt potential to come off effectively and I think also there's something about being mindful about of those recipient organisations… those external ones more. So, those ones that are more adjacent to this have just not creating too many different levels of volunteering for an organisation So, we know that the ways in which people bring volunteers is varied but if you started to fragment that with there from this programme they're from that programme there it can become wild and that's just that's just feedback that from the groups that we work with. |
| I1  43:32 | Right. That's really useful information. Can you elaborate on that last point and of there being too much diversity? |
| S4  43:42 | Yeah, I think where the diversity in the range of ways in which volunteers come in. And it I might be overstating it a little bit because we've had our issues in the past, it's not at all related to this, but there was a time when we had community workplace. It’s about seven or eight years ago and recent developments politically seems to indicate that that's potentially the destination for some people moving forward. It's not at all what we're talking about here, but what I'm referring to is when you have things like that. So feasibly you could have some organisations where they have the exact same volunteering opportunity, but it's fragmented in that there's some cohort that found it via their own means and are doing it for the reasons that are motivated by the choice, the passion, the commitment they want to do that volunteering and then knows that are there because they've been effectively mandated to do it. So that's what I was getting at there in terms of that fragmentation. And I'm not saying this is that, but it's something that's worth bearing in mind that groups and organisations, I think I've said this in previous sessions and quality is fine if you're volunteer coordinator in a given organisation, your capacity is usually finite. You role is very unique, So, again it's just that thing around coming in with yet another initiative or a scheme. Clearly it could be useful and could be valuable. It's just to bear in mind that some organisations will could really struggle to get to grips or be really resistant to taking on more things. Umm, because they worry about having all those different processes to oversee and manage? Or the present in and belong to it can't become a bit unwieldy for them. |
| I1  45:23 | OK, good. Any suggestions on how we could avoid overwhelming at those services so? Was there a learning from that we can have of what we should or shouldn't do? OK. So. If I reflect that back to you at [S4], just to make sure that I've understood correctly… So, you're saying these volunteer organisations have limited capacities to look after individuals? And any relating processes, let's say, the safeguarding processes and therefore may not be interested in taking volunteers with people with dementia. |
| S4  46:30 | Yeah, I don't by any means say it's a certainty. It's just quite a general observance. I'm just asking if [S1] is, it sees it similarly in local CVS and if this is if this particular persona or 10 out of 10 organisations that contact us today in the volunteer Centre, we asked them like what’s the capacity like we'd probably find that it's not particularly the fluid at the moment about that. |
| I1  46:37 | OK, So, that comes back then to identifying services that are appropriate and where the services also feel that they can accommodate people with dementia. [S1], would you agree with that? |
| S1  47:16 | Yeah, I was just going to say that's why the relationship with the CVS or the Community Volunteering service is important because they can help you to identify which organisations would be a good fit and for something like this because like [S4] says, there's a lot of organizations who are struggling with capacity and might want to do something like this, but actually they just don't have the time. The volunteer coordinators are already working to their capacity. So, some,  It wouldn't be the right time for them, perhaps, to get involved with something like this, but then we also know organisations who would be able to get involved as well. So, yeah, a good point to make. |
| I1  48:07 | Great. Excellent. |
| S6  48:14 | So, I was just going to add to that as well. There is another piece of research that's looking at people living alone with dementia, and there has been coming out of the research as well is that people may be rejected from participating in groups, voluntary groups, if they don't have a carer for people because of those reasons. Or there may be a perception that an organisation can't support with a person living with dementia as well. And there's still quite a lot of work probably to be done around stigma and what people can do and again like you said that fit to organisations is important, but potentially they're also might then be organisations that are on the cusp. They'd like to, but they don't know how to, and they might have concerns. So, again, there might be work to be done to support those organisations. That would really with those might be and groups that are more around kind of interests, like whether it's walking groups, whether it's that respect model railway groups, whether it hasn't this whole variety of organisations and some of them might have the time to want to understand more of how they could support someone living with dementia. There is a challenge there, particularly for people that are living alone with dementia as well, and people living alone with dementia will benefit as much, if not more from this. This kind of service as well, where they can have that connection with people. |
| I1  49:52 | Yes. So, we definitely would have to provide that information for these volunteer organisations So, they know what they're getting in for.  And again with people who are on their own. And that's where in particular, perhaps the volunteer buddy also becomes really important. So they can function in that carer role for the purpose of the volunteering service. Umm. Great. That's really valuable information so. What else have you got? I'm wondering actually whether we should put all of those pieces by worth doing a bit of design quick and dirty design as we call it is when we kind of think out loud and we put things into visual. So, if we were in a room together, we would do post it, I would get you all to write down those things and post it as we're not in a room and it's slightly more difficult. But I'm wondering, [I4], I could do that if we go back to the slide with the map, whether we can put some of those things up. We've now said in the right place with little speech bubbles. Yes, in there. Do you want me to do that? |
| I4  51:42 | And it will be good for you to do that if you could. |
| I1  51:45 | OK. And in which case I'll share my screen and then we can all chip in, and I'll make that as big as I can. There we go. OK, it really small. So, then we can we have some nice shapes and Somewhere here speech bubble shapes. Ohh. Right. And So, what we just talked about is information for volunteer organisations to persuade them. Well. So, put that in there. Oops. I'll make that past very small sorry. So, I think that would be somewhere here, right? If we go back to the beginning. Can you follow me? You are very quiet. So we've talked here, the wellbeing mentor, can be our dementia support worker, social prescriber, or student? What's the next we need from all the things that we said now that we need to add? |
| S4  54:20 | So, on the volunteer organisation thread to attend session or that pathway there. Those three bubbles, there's maybe a consideration to be made about the role of the CVS or a volunteer centre, and obviously there's an ask if that's like a physical thing in terms of attending, or is it? Is it an ask? Is it a distinct and discrete ask or is it just more of an idea but that maybe needs reframing in terms of the role of a volunteer centre? You know, I think what I'm saying is it's like a suite of things. Yeah, there might be instances where you could get also along all those individual groups and organisations of opportunities along for any cycle of that process or journey for that individual or group. So, it's maybe just to consider some of the other ways that you could activate those partners as well. So, I think what I was trying to say if it wasn't clear, I was just trying to say that like and I'm speaking for the Manchester equivalent here. But we'd find it more effective to work with different bits of this system to adequately give them the information and guidance that they require to then feed that into the journey of the person. So, uh, the need for us to be physically there might not be necessary. How do we do that? Do we do that on a case by case basis where we're fielding inquiries via email, telephone or whatever platform they want to contact us via or is it more about us? Like I said, curating or aggregating those opportunities or that information, like [S1] said, like those groups that we think would be receptive to this, those if we know our receptive to this. And So, yeah, So, it's collection of things. |
| I1  56:07 | Yes. So, the way this worked in the in our trial was that in that second session, which is a group session where people with dementia, just to recap, have their first wellbeing mentor session to explore their interests and skills and then that was fed back to [S1] and [S2] to be able to pre sift what might be of interest. And they were, giving us information which were presenting and discussing with people with dementia in a group. And then they're also joined for that discussion. So, that was face to face actually in this case for, for, for technical reasons and of being in the summer and holiday season. The first session was information only which they provided to us, to the wellbeing mentor and then we went through with people with dementia and then we had a second session where they were actually there. But [S1], please feel free to chip in. I think was more fruitful because obviously those different opportunities and what might be more appropriate, much better than us. So, that's different. Having that information on paper as to having somebody actually thinking about it and meeting the people and seeing how they work.  [S1], do you want to say something there? |
| S1  57:42 | Yeah, yeah. Definitely because like you said [I1], we were given information after that first wellbeing session of what the two women were interested in. So, [S2] and I prepared different opportunities that match their interests. But after going along to the session and meeting with them and having those discussions, actually much more came out of that. Like you say, it was much more fruitful, and actually then we went away and there was other things that we found out they were interested in, that we were able to tell them about. And some of that was volunteering, but some of it was social groups as well, social activity groups. So, I know one of the women was interested in jigsaws and we told her about a local jigsaw group. So really we found it valuable to go along in person and have those discussions, but I think [S4] is right to say, think about all the different ways that organisations could potentially help, because I suppose that might not always be the case. And again, it could be a capacity thing or it's just about having different options for different people. And what works for us But also what works for the individuals as well. But yeah, definitely [S2] and I found it useful to go along, meet with them, have those discussions and to go to both sessions as well. Because like you say, different things came out each time and we was able to and. I suppose give them the full support by giving time to it, yeah. |
| I1  59:19 | Yes. So, that's obviously a capacity issue. But It makes me wonder whether for the third meeting, then decisions are being made, and whether, if we're already knowing in Session 2. What they want to do, let's say they want to work on allotment or something that we get that particular charity in for the final session and or whether that might need to be something else before they can start volunteering. So, I'll put that in here. Possibly as an additional meeting. So before they can get started volunteering. They probably want to have to have an in-person meeting with the actual organisation where there would be volunteering that. Does that makes sense? and at some point, here, that volunteer organisation would obviously have to receive some information about that about supporting people with dementia in terms of volunteering, possibly before they've been invited. |
| S4  1:01:06 | And then that next step along about matching somebody with a volunteer and the organisation does it is the information flow needs to happen similarly there in terms of training for that. So, I guess it happens a bit before all this, but in identified or having the organisation who is receptive or will receive through this path, though they themselves need to opportunity to identify, don't they? I don't want to be pessimistic about things. It's just in terms of a capacity thing, but it might be the preference for a group or organisation to identify individual. That's called them champions or those buddies. Or they might actually at large want to do this training with their volunteer workforce, or that particular project or bit, So, that they've got that built in assumed capacity. So, actually support that individual from across the base of volunteers as well. That might be their preference. Might be a combination of the two. |
| I1  1:02:07 | Yes. So, I've put that down as training for volunteer buddy and other relevant volunteer staff. Is that what you meant? Great |
| S4  1:02:19 | Yeah. Because I guess that send an asset to bring into the conversation when you make that approach, what would you be willing to enable? this is what we can bring, to help you do that. |
| I1  1:02:29 | Excellent. So, in terms of what we then talked about, what would be needed in terms of that safeguarding, I'll try and put those in here. We're getting a bit crowded, but that's OK we'll sort that out later. So we have obviously the information on safeguarding. Or training on safeguarding information and training. We have the DBS check. What else would we? [S6], I think you mentioned some other part aspects. Sorry I can't see you unless you speak up. |
| S6  1:04:01 | Yeah. Sorry, I just said I started to put some notes in the chat So, I didn't forget them, but one was just around the volunteering organisations preparedness and awareness. So, that they're up to that.  So, that they're able to and willing to support people, volunteers living with dementia and. And yeah, I was just looking around kind of  safeguarding. There's the securities that have been mentioned and I think it's that in just in terms of for the volunteer or my information to understand what they can do to make it better and easier and what support they can provide. The big piece for me as well though is just around this transition piece as well. So, that transition from volunteering into participation and that piece could be done really well, I think and but often it's done badly and those conversations as well. So, it's actually how do we provide support, maybe for those conversations to in terms of and also support and guidance and advice on how to transition someone when it's been identified that it may be unsafe for them to continue to volunteer or again what those reasonable adjustments might be to support someone to continue to volunteer, but maybe in a slightly different capacity. |
| I1  1:05:56 | OK. Yeah, I've got that there. That's definitely an important part. Is there anything else that we should be considering at this point that we've now completed now forgotten? |
| S6  1:06:17 | The first things that flags doesn't handle, So, I can do that.  [S1], go and then I'll come back to them. |
| S1 | Yeah, I was just wanting to ask a couple of things that I might have missed. So, where it says matching a healthy volunteer with a client to support them in the volunteering, who is managing those volunteers? Who is managing those healthy volunteers and arranging that support for the people with dementia? |
| I1  1:06:45 | Ah, that's a good question. Yes, we've had different models. We've discussed different models for this. [Name of partner dementia organisation] have mentioned they have internal volunteers. But they could be from the volunteer organisations that provides volunteer buddies, maybe that needs to be a new volunteer organisation. But I think this is a really good question. So we should put that in here because that's obviously very crucial. |
| S6  1:07:29 | Is there an opportunity within those volunteer organisations as well that are receiving the volunteer to provide buddies and some mail, So, already do that with new news to give a new volunteer to buddy them up. |
| S1 | Yes |
| S4  1:07:43 | That was how I took today anyway. |
| S1  1:07:43 | So, may already be able to do that as I suppose, but I think like going back to [S4]'s point earlier, for some organisations that might be a step too far in terms of their own capacity. So they can take on volunteers, but then to have a whole buddy support system as well. They might not be able to. I think might just not be able to do that. |
| I1  1:08:17 | Absolutely. So, I mean at the moment. I think that this has been a question of volume at the moment. We're thinking about this as an individual activity. But of course, if it were to take off and we suddenly have lots of people then it would get very busy. So there are obviously and this is something that we would have to think about, but obviously also if you've got any thoughts and suggestions on that? Please, let us know if there is an argument to have volunteers centrally from where the people with dementia are being sent from. So, the dementia organisation potentially. But at the same time, there could be dementia Organise the volunteer organisations could have one trained volunteer and a buddy who can take on that role. Potentially, but if and when the organisation to make that organisation perhaps certified dementia friendly, that they have to have a dementia buddy or something, I don't know. It's something we might want to again. So, there's a number of different options, and that tends to be the case in design. You can think up all these wonderful, wonderful options, and then you have to figure out which ones are actually realistic and useful, or the most useful and most realistic that can actually be put into practice. So, one of the things we do in design is we just play around with things without being too critical. And then afterwards we review and kick out the things that we think are definitely not doable. And then we look at those that we think are my might potentially be doable. [S6], you had your hand up. |
| S6  1:10:22 | Yeah, I was just going to ask, have you got any workshops planned with the volunteer organisations to explore how they could enable this to happen and enable volunteering for people living with dementia, they could be very solution focused as well. So there might be things that we’ve not thought of here or like you said, they might say. Yeah, we've already got buddying schemes, or there might be some really great practice out there that could be modelled and. |
| I1  1:10:56 | No, we're planning on two more co- design sessions in the new Year. So, for end of February, March - but this is a good idea. So, we can vary who we invite to these sessions or we could just add another session. Obviously there's loads and loads of different volunteer organisations and we probably won't have to capacity in this project to Umm you'd probably need to survey at least 10 or 20 to have a reasonable insight in exactly what their views are. That's why we have [S1] and [S4] in the first instance here and giving us the oversight.. a little bit more of an oversight. But definitely as we progress with this, we would need to speak to individual organisations to see what the possibilities and barriers that are from their point of view. So that's a really good point. Thank you. |
| S6  1:12:09 | Yes, and also - Is it planned to include people living with dementia as well into those workshops too? |
| I1  1:12:17 | Yes, yes, we have one workshop with people with dementia and carers. So far we will have obviously the trial. We'll run another trial in February with people with dementia and then we will have some more co-design sessions for feedback, ones that there's a people have experienced service to then also give us more feedback from their point of view. Obviously we can't work the service through, including the volunteering. We can only do the three sessions, the wellbeing mentor sessions to get them up to that and then we work with as we have done before with [Name of partner dementia organisation] and to explore and hopefully if you're still available again, [S1]. Well, we're hoping to run those a similar trial as we had in the previous summer with people with dementia. Again, to check whether we get the same results as we have with our very small trial, and or was there anything else comes up with and what we will be trying to factor in some of those things that we've already now discussed, although we wouldn't be able to realise everything. So, umm, we will try and simulate those things and then we can in those final co-design sessions after the trial we can then get feedback again on what is needed from their point of view. Is that makes sense, right? Is there anything else that we've now forgotten? |
| S7  1:14:06 | I was just going to add. Is there anything in terms of formal services that can be accessed or unintended consequences? So, for example, direct payments, could a person with dementia who wants to do this use direct payments of have had the necessary of need in order to secure someone who would be a paid buddy rather than a volunteer buddy, and some of the unintended consequences are may you'd be deemed not as knitting more traditional service support if you're able to do more creative types of service support. These are just some of the things that have fallen out of the PA business relationship - a piece of work that I was involved in and also just what everybody's raised in terms of very practically, looking at what the potential transition slash impact, slash crisis points could be at every point, So does it need to be some work matching a wellbeing mentor with a person with dementia? You know, a kind of getting to know me on both sides So, that it's a good fit and has the best chance of success. I can appear support network approach to wellbeing mentors, whatever that looks like and if the volunteer organisation doesn't want to go ahead for whatever reason, if the person with dementia goes there and discovers it's not dementia friendly in inverted commas and the kind of soft crisis rather than, this person can't do. Maybe things just aren't working out. The job that the persons doing it’s kind of isn't hitting the mark in terms of what the volunteer service is set up to do and achieve and the discover, they don't have enough resource to continue the relationship. A key relationship falls off. The person doesn't want to stop doing the job, you know? So how do you manage and cessation when it's not mutual? You know, So, as insurance consequences for the organisation, if there's a risk of harm to another, not the person with dementia in terms of safeguarding. And what if there's intergenerational? What opportunities does there need to be DBS in terms of the person that dementia, if there are, if the service involves children or young people under 16? So and that's kind of like high level what might all of the potential issues might be …but as an organisation who might be supporting all of this, these are the things I would ask before I would go ahead and I don't know whether CVS would support me in that. So, they would basically be the broker, making sure everything's set up properly for the volunteer organisation. The dementia organisation would make sure everything set up to support the person with dementia, and So, it's almost like high level advocacy, isn't it? For everybody involved. |
| I1  1:17:08 | Yes. Legal aspects, yes, there's quite a number of things. Yes, we had mentioned the transition that [S6]'s already mentioned as to assessing, yes definitely there could be an assessing of crisis points.and perhaps that's not quite clear where begins volunteering. So they will continue throughout that service to work with the volunteer, with the Wellbeing mentor and that's one of the reasons why they were meant, why we started working with or with that supposition that the wellbeing mentor is the a dementia support worker because then they have that ongoing at support throughout the process and they can use a repetition of the session one to one I suppose where we have the monitoring progress, we have a repeated session one to one at every three months or six months depend on the checking points. I suppose we could have just more informal checking points, but the wellbeing mentor or the dementia support worker will have those anyway, So, as well as through the volunteer buddy who can feedback if there's any crisis points I suppose. Well, both the person with dementia can feedback well, all three, person with dementia can feedback, Volunteer organisation can feedback, and the buddy can feedback So, that would be then something that we could ... So that we would have to be part of the system as the safeguarding aspect really for them, wouldn't it? And yes, definitely there's a legal aspect I'm sure people would have to sign some disclaimer. But I'm sure we set the legal team on that before we can realise it. So, but thank you. Have a captured everything. Now we'll go through the tape afterwards and make sure we've captured everything. |
| S4  1:19:34 | I just wanted to say, well, last one thing, it's a question you can probably take this into the service design workshop. So that further engagement, just to consider is there a question to be asked and then to ultimately determine it might end up in that it's a mixed bag of results and you'll try and do everything. But is there something to be said around considering the terms of this volunteer and what I mean by that is getting practical about it So, much like this programme, this process it steps it's based around the number of different sessions. Do you want to draw those similar lines around the volunteering that you want to full timidly broker into uh? Because when we've been talking, it's occurred to me that he feels like this is somewhat open ended in how are you foreseeing that the individual volunteer and they'll do it for the stable future or will it run its course and then they will come back in again and find more stuff that's probably definitely in there. I get that? Or is it more suitable? And again, this is to be tested. I'm not saying this is what it is, but you can see if you look at other bits and I offered some desktop research into another programme and that was very, very not rigid. It's not the word, but they add lines drawn around it in So, much choice. This volunteering took place for So, many sessions and that the individual was then taken through a reflection and obviously a process through that, and then if the output of that was well, they want to carry on doing that, maybe with that same organisation they go back in. That happens outside. Maybe the context of a formal relationship with a programme or is it more suitable just to say, have it in them terms you know. And again, that's something else that adds it could be burdensome, it could be really beneficial or really open a group could be really open to receiving that if they know that they can be involved. And it's only for a number of weeks or a number of sessions that have to be tendered again. It's not the solution, it's just an idea. It's just something up to add to that conversation about. |
| I1  1:21:26 | Yeah, that's a really good consideration. So again, it goes, it's somewhere between the getting started and well it brackets the kind of getting started So, that everybody has an agreement as to how this is going to progress. Let's say we have 10 sessions or six sessions. Or, however much it might be in that might be with recommendation off the wellbeing mentor. That might be a variable number of weeks, and after then in six weeks or 12 weeks or whatever, then they have another wellbeing mentor session to assess how they're feeling about the service, how they're and what they interests are. Are they still the same interests? Do you want to continue? And again, if that's so, maybe we should have another four sessions, which is that repetitive. It's not quite like session one, is it? |
| S4  1:22:26 | Yeah. No. |
| I1  1:22:29 | So, we need to work out session. Umm, a session four really that can cope with that review. |
| S4  1:22:35 | Yeah. And that could actually be a step that's built into or given to the organisation that's in receipt as well. You know, that kind of thing that, this happens for a number of weeks and then we refer back to obviously the experience of the individual. And then if the next step is to continue doing that and it is with the organisation, you can put that in there, can't you in terms of that agreement or that expectation or the group that it's like it it's gonna be for a number of weeks which they can maybe speculate, elaborate and consider being involved in and then that gives that time and that ability for them to also have some agency in this around like well, yeah we can definitely we're seeing it pan out it's worked over those number of weeks it's worked for us it's worked for all parties we can definitely step into that also allows the opportunity for people to maybe come away from that and step away and say it's not going to pan out this time. that's what you recap that person and don't you could go again potentially or look at other options. |
| I1  1:23:26 | Yeah, I liked it, but it's a bit too demanding or something. Yeah, definitely. Yeah, that's really good. Thank you. Anything else we haven't yet considered? Sorry, it's getting a bit crowded but well this entangle that. I think that's really useful, Sorry, [I4]. We had another slide. Do you want to go back to your slide and see what other questions we had? Yeah, that we now have now sidetracked us from. |
| I4  1:24:23 | Yeah, but I think we probably have touch on some of the points here. So. So, after all those sessions will started to preparing them for volunteering, which we have quite a lot of discussions about that just now. So we we're talking about the could be a volunteering buddy support, people with dementia. So, we're thinking about what kind of training they actually need, because we previously have a discussions that at that they should have some knowledge about dementia, have some soft skill to support them, such as the communication skills. Umm, we also talking about how we the how the person with dementia will transit from the roles in volunteering like having a shadowing sessions to build up the confidence to learn about what they would do it during the work… the volunteering work. And we also mention about how to set up safeguarding protocol and how to ensure the environment with dementia friendly. But something we haven't touched on now is about the volunteer opportunities, because some may volunteer within their within the dementia organisations. I think from our previous discussions, people tend to feel that it is much safer, but one of the cons is that there's when the organisation is not that large in scale, they're probably would have limited variety of opportunities. But we also want to explore if there's any chance to have volunteering in the external organisations from the dementia organisations. So, we like to learn how much more support that we have to develop in place in order to safeguard both the organisations, the volunteering buddies and also people with dementia. And how should the monitoring responsibility to be shared between different organisations? Because this involved at least three organisations now at this stage. |
| I1  1:26:58 | Yeah. Thank you, [I4]. In many ways, I'm sorry I jumped the gun, So, we've captured quite a lot of this on our little PowerPoint with the bubbles now and, but I think one of the things that was really interesting there was obviously the safer aspect of the volunteering for people with dementia within the dementia organisation itself.  And depending on the size, that might be of the organisation, that might be useful, but at the same time, and people may be feeling safe and there's less red tape in terms of making it happen. So that's what we've done in the past to actually make it happen with dementia. With [Name of partner dementia organisation] that, that's what happened. Obviously, the external volunteering as a lot more onerous and it might be quite useful to think about these potentially as stepping stones as well. Can they interact in some way? Are there different opportunities that are kind of quite separate for those who are less confident or less? Um need more, more support. It's perhaps within the dementia organisation, for those who have more, perhaps support from their carer, or have very specific interests. It's and they're happy to go through more. Umm. Yeah, more of that red tape. More of those processes to actually go and do something out outside of what they're comfortable with. So these are quite interesting. An issues I think still to explore is that is there anything from your point of view that we should… we haven't yet covered that we should go over all that we should go over again. |
| S4  1:29:12 | I think on the opportunities bit, I think the spirit for the whole thing that should be built in this is just this is how we do this is we respective and it speaks to what [S6] said at the start around everyone's circumstances will be different. You know, despite all the personas that we might think or make assumptions on in terms of what we're into engage with, think everything has to be on the table of all those options there internal has to be the agency if an individual, then obviously that speaks to an I said that any other session about, obviously you strip everything that about, volunteering, it's choices essential. But isn't it? So I guess you need to do anything that avoids even any influence to anything about mandating people are gonna have certain paths, you know? So I think you need to probably have everything on the table while being aware of all those things and machinations you've just said there around the pros, cons, limitations and things there but if ultimately the person essentially that decision making. That's got to be championed. |
| I1  1:30:07 | Great. Yep, OK, both opportunities. We will tried to explore both of them and get a more developed model of all the things that we think must be in and then we can start unpacking what needs to be in each of those, what needs to be in place to develop each of those, and if you get to a full model by the end of this project, which is at the end of May, I think we've done really well. Then hopefully we'll get more funding to then take the next steps of developing are there. It just goes in slight, quite small… This is from our UKRI, UK research and innovation funds from the ESRC which is the Economic and Social Science Research Council funded at the moment. So it's kind of quite short, projects quite short and intense projects to get things to develop rather than the longer research projects that we usually have. |
| S4  1:31:17 | That just the other thing as well. Again, it's just So, I always like to go see things and stuff for something practical and what something that speaks to the training aspect of the, the preparation for volunteering buddy. And I've had. Have you baked in or encountered the work around The dementia friends training? I know it's not massively comprehensive, but it's, it's mission is around, obviously turning understanding into action. So obviously that's a really good starting point for some for anybody respective and it just I don't if you've encountered that already, it's got its own service website and it I think it's actually a concern of your organisation. I think the dementia friends if, I've inferred you from the [Name of dementia organisation] did I get that right [S6] or? |
| I1  1:32:07 | You ‘re mute. |
| S6  1:32:10 | Sorry, yes, So, I can just repeat that last bit, [S4], first, sorry. |
| S4  1:32:12 | I said. I'm just saying that obviously in terms of preparing people to do something, some information piece and training for buddies, I know there's the dementia friends training isn't there, which is quite digestible. Bite size training. It's not the most comprehensive maybe, but I think it's good in terms of its mission is around developing, understanding that you can turn into action, and I've done that myself for example. So you've got some tools and resources out there already that can be a natural fit with this quite nicely, I think. |
| S6  1:32:41 | Yeah, this Dementia Friends training like you said. But, and that's just we have got, they're just working through the training of the new version of dementia friends as well. So, January, February time there should be some. There might be some changes and additional things, but yeah, we also have other training that we provide to other organisations as well. So again, there may be other resources that we can explore over and above that and it might be that there's like safeguarding and templates or something that we can and we could I can find out and see what we could provide or could as like frameworks or templates as well. And in terms of best practice, we've also got other pieces of work looking at how we support people living with dementia in employment and whether it be that be paid employment or volunteering through the organisation as well. So, again, is how wealth of learnings that are developing as we, yeah as we go to. |
| I1  1:33:39 | Yes, I mean that would be fantastic if you could let us know what is on offer and we could potentially access to incorporate for the service. That would be brilliant. Thank you. Excellent. Yes. So any obviously that's a really, really useful point, [S4] there because that's definitely looking out at what's already out there on. In terms of all the things that we need, So, now that we've started to identify all of the bits that we actually need and I'm sure we've missed one or two still, but once we have all of those things in a more comprehensive chart then we can we can look over that again. So we'll do a little bit of background work and of how what needs to be in there and how it could be organised in terms of accessing all those relationships, how they we can make those work and then hopefully we'll, we'll get back together with you and February, February, March for one of those for another co-design session, if that's OK with you. Brilliant. Are there any other comments questions about today's session and other content or how it went? Anything you'd like to say? |
| S6 1:35:22 | No, I think it's really great. I think in terms of, yeah, just understanding that said, some of those challenges and how they could be overcome as well. So, really looking forward to seeing what the outputs of theirs will be as well. |
| I1  1:35:35 | Great. Thank you. Thank you So, much [S6] for at joining us and thank you everybody for all your fabulous input. It's So, really, really valuable because obviously I'm a designer. ICanDo vision bit, but that's why we need all of you. Everybody who's made an input into the projects they've filed previously and now to really give it legs and make it stand up. So, it won't wobble and fall over later. So what? It'll it's a slow iterative process to try and work all of those things out, but I think it's important to take that time to make sure that we get it right. |