



East Suffolk
Community
Partnerships

Bringing ideas to life

Aldeburgh
Leiston
Saxmundham
& villages

Aldeburgh, Leiston, Saxmundham and villages Community Partnership

East Suffolk Councillors:

Councillor Tony Cooper (Chairman)
Councillor Jocelyn Bond
Councillor John Fisher
Councillor TJ Haworth-Culf

Suffolk County Councillor:

Councillor Russ Rainger

Partnership Organisations:

Local Town and Parish Councils
Suffolk Constabulary
Ipswich and East Suffolk Clinical Commissioning Group
Community Action Suffolk
Leiston Together
Business Community
Youth Community
Environment

Members of the **Aldeburgh, Leiston, Saxmundham and surrounding villages Community Partnership** are invited to a Meeting to be held remotely via Zoom on **Tuesday 1 December 2020 at 4:30 pm**

Agenda

Pages

-
- | | | |
|----------|--|--------------|
| 1 | Welcome | |
| 2 | Apologies for Absence
To receive apologies for absence, if any. | |
| 3 | Community Partnership Grant Application - Dementia Project - Covid-19 Response and Recovery | 1 - 6 |

4 Date of Next Meeting

Monday 11 January 2020 at 3.30pm

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East Suffolk Council is committed to achieving excellence in elected member development
www.local.gov.uk/Community-Leadership



Community Partnership Grant Application (2020-2021)

Section 1 – Organisation Details

Contact Details	
Name of Group:	Dementia Project – Covid-19 Response and Recovery
Address (incl. Post Code)	C/O Leiston-cum- Sizewell Town Council Offices
	Main Street
	Leiston IP16 4ER
Project Lead (Name & Position):	Sharon Cuthbert
Contact Email Address:	leistondementiaproject@gmail.com
Contact Telephone Number:	07739 989473

Group Status	
<input checked="" type="checkbox"/> Community or voluntary group <input type="checkbox"/> Registered Charity <input type="checkbox"/> Community Interest Organisation (CIO) <input type="checkbox"/> Local Branch of a National Organisation <input type="checkbox"/> Charitable Company Limited by Guarantee	<input type="checkbox"/> CIC / Social Enterprise <input type="checkbox"/> School <input type="checkbox"/> Village Hall/Recreation Ground C'tee <input checked="" type="checkbox"/> Town or Parish Council <input checked="" type="checkbox"/> Other
If registered charity, please state number:	
If registered as a company e.g. Community Interest Company or Limited By Guarantee, please state number:	

Supporting Documents	
Does your organisation have the relevant policies and procedures in place? Please tick those which are applicable to your organisation/this project:	
Constitution / set of rules	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Child Protection Policy	Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable <input checked="" type="checkbox"/>
Vulnerable Adults Policy	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/>
Health & Safety Policy	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable <input type="checkbox"/>
Equal Opportunities Policy	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Section 2 – Project details

Project description

Please provide a brief description of your planned project or activity (up to 200 words).

We need to know the following:

- *What you intend to do*
- *How you intend to do it*
- *How your project demonstrates value for money*

The impact of Covid-19 has intensified the pre-existing concerns of individuals living with dementia and family carers, particularly in relation to an increase in social isolation and loneliness, disruption to normal routines and risky behaviours arising from a lack of being able to understand or retain safety messages such as ‘Hands, Face, Space’.

At the time of making this application the situation is uncertain with regard to further C-19 restrictions, but it appears that the least of the measures will be to advise vulnerable people to continue to avoid social contact until the high-risk Winter Flu season has passed.

The planned project is intended to begin to implement a Covid-19 Response and Recovery Plan based on the priorities identified by the Community Partnership in relation to social isolation and the Suffolk Dementia Forum Covid-19 Sub-Group (02.07.2020). These include:

1. Maintain contact with and take referrals in relation to households where there is a person living with dementia either alone or with family carers.
2. Support these households to reduce potential increased social isolation by accessing any support available such as via local community groups or volunteers from the local Good Neighbour Schemes.
3. Working with community groups to implement activities to reduce social isolation and work towards a phased re-introduction of groups and one-to-one activities as government guidelines allow.
4. Supporting families to address safety concerns and promote use of the ‘Herbert Protocol’ (a risk reduction tool to help in the search for a person who goes missing) and other digital care solutions.

The planned project covers the period to end of March 2021 and will cover the Community Partnership Area: Aldeburgh, Leiston, Saxmundham and villages.

How does your project or activity address the following priorities (up to 200 words):

P1. Isolation

P2. Mental Health

P3. Obesity

P4. Low income

P5. Education attainment

The project directly addresses isolation and mental health and is based on experience of providing C-19 support to households during lockdown and current referrals received from Dementia Together. Research has identified how isolation and mental health concerns of individuals living with dementia and family carers have been intensified. For example people report:

- Disruptions to normal routines
- Lack of cognitive stimulation – for example the effects of not talking to anybody
- Feelings of loneliness, stress and anxiety
- Physical and mental deterioration
- Risk of premature admission to residential care
- Risky behaviours
- Self neglect
- Being trapped together 24/7 leading to pressures at home mounting

(Source: Dementia Voices: Living in Lockdown, Community 360 September 2020).

The project will address these issues by seeking to increase opportunities for social contact.

How was the need for the activity/project identified (up to 200 words):

- *Please specify if your project idea is a result of a Parish/Neighbourhood Plan, a Market Town health check, a questionnaire or another means of consultation/engagement.*
- *You can also show need through anecdotal evidence such as ticket sales/reviews or events.*

The need has been identified through the experience of providing support to households during lockdown and the subsequent restrictions. For example in one household a man who was previously attending an activity four days a week and was able to walk independently to the shops and hold a conversation is now watching TV for most of the day while his partner attempts to work from home. He has physically and mentally deteriorated and is no longer able to leave home on his own.

The need is also identified by Suffolk Dementia Forum which represents those living with dementia and family carers and includes representation from CCGs, Suffolk County Council, Public Health and Voluntary Sector.

When will your project start and finish?

Start Date (MM/YY)	November 2020
Finish Date (MM/YY)	April 2021

Section 3 – Budgets

Project Funding	
Total Cost of the Project:	£5400
How much grant is required?	£5400
How much match funding is in place? (if applicable)	£

Section 4 – Outcomes/Monitoring

What are the anticipated outcomes:

Outcomes are the specific changes that you want to result from the project

- An increase in social connections for people living with dementia and family carers with the potential to reduce loneliness.
- To have a local single point of contact for households with a person living with dementia.
- To re-establish group activities when C-19 restrictions allow.
- To introduce the Herbert Protocol to households where there is someone at risk of becoming lost.

How will you monitor and evaluate progress towards these outcomes?

i.e What information do you need to record as the project develops to track progress

Information will be recorded in relation to activities, contacts and outcomes whilst being compliant with GDPR Regulations.

How will you promote and publicise the project?

N.B. We expect you to acknowledge East Suffolk Council funding support in any relevant publicity.

The project will be promoted via existing networks including Suffolk Dementia Forum, Dementia Together, Patient Participations Groups, Good Neighbour Schemes and Parish Nursing.

The Herbert Protocol will be promoted via local media (e.g. free papers and social media) and personal contact.

Declaration

I am authorised and eligible to sign and approve this application on behalf of the organisation and declare the information included in this application is true and accurate.

By signing below, the information you have supplied is being collected to allow us to process your application. By completing this form, you consent to East Suffolk using your information in this way.

I understand that in the assessment of this application the Council may share information contained within it, with other core funders for funding programmes we have applied too, relevant Council directorates and committees.

If you do not provide your consent, we will not be able to process this application. Your information will not be used for any other purpose unless we obtain your consent.

Your information will be retained for 4 years. You can request that your information is deleted at any time.

Data will be processed and held securely and in accordance with the General Data Protection Regulation (and any updates).

Further information about data protection can be found on the East Suffolk Website <http://www.eastsuffolk.gov.uk/assets/Your-Council/Access-to-Information/Privacy-Notices/Communities-Privacy-Notice.pdf>

To comply with General Data Protection Regulation 2018 and Data Protection Act 2018, I confirm that I have given my consent for my personal data to be used in accordance with the privacy notice above (please tick the box) X

Signature: Sharon Cuthbert

Date: 23.10.20

Enter your name only if you agree to be bound by the terms set out in this form. We will treat this as your signature of the form.

Please submit this Grant application to grants@eastsuffolk.gov.uk