## Supporting Communities, Safeguarding the Vulnerable & Staying Healthy – A Public Health Approach to Community Action

My name is Kerry, I am a Ripon resident and a nurse lecturer. I am a registered Specialist Community Public Health Nurse and Mental Health Nurse. My clinical and academic interests include working with trauma across the lifespan and reducing health inequalities in vulnerable and marginalised groups in society. In my 20 year career in community based clinical practice I have had extensive safeguarding casework and training opportunities and experience of working with colleagues across the voluntary sector, education, health, social care and the criminal justice services to work together to safeguard children and vulnerable adults.

I'm also a mother, a carer for a family member with disabilities and understand what it feels like to be worried and helpless when you are aware that there's a public health tsunami approaching sometime soon and there is no respite from the media. My own way of coping with the frustration of being in self isolation was to turn worry into action and to reach out to volunteer my time and skills which I can still do without infecting anyone.

The manager at Ripon Community House (which is the designated Community Hub to support the community to cope with the social impact of the Coronavirus pandemic) requested me to support the Hub by writing a document which will guide community groups to a set of shared aims and values which are underpinned by a public health approach to community action.

'Supporting Communities, Safeguarding the Vulnerable and Staying Safe' is not an academic report, I am a member of the community the document will serve and therefore I, we and you are in this together and the style of writing reflects this. We share this community and the concern for it as equals, at times we will be vulnerable and isolated, at other times we will be the helper; our roles will change as Coronavirus transmission progresses and touches our lives.

The document is the outcome of a week of extensive reading of local Harrogate and Ripon community based social media posts specifically trying to address the social impact of Coronavirus and a very late night drawing together the themes of what I have read.

The aim is simply to support a consistent approach across the many community groups serving Ripon and the villages with a clear focus on the priority to maintain independence, promote resilience and support safety for those who are vulnerable, socially isolating and practicing stringent social distancing. The document does not replace local or national policies and procedures which must be followed and all organised community groups have a duty of care to ensure their volunteers understand what to do if they encounter urgent medical need or safeguarding concerns. The Hub staff at Community House will offer further support and guidance.

Sending strength and warmest wishes to all during these most challenging of times,

Kerry

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# Supporting Communities, Safeguarding the Vulnerable & Staying Healthy – A Public Health Approach to Community Action

### Safeguarding the Vulnerable

I am aware of just how many lovely people there are in our amazing communities who are generously offering help in response to local Facebook posts seeking help because people are socially isolated and in need arising from the impact of the Coronavirus pandemic. It is often so hard to know how to best help and we follow our intuition to do whatever it takes to help someone else feel better and try to fix the problem. We are taught from a very young age to be kind but also wary of strangers and these two messages are at odds at present when faced with large numbers of people who are asking for help in our communities. We also need to be mindful that there will be times when a volunteer will have unpleasant motivations for doing so and many volunteers will not be DBS checked. It is really difficult for us all to spot the exploitative volunteer from the hundreds of kind and well meaning volunteers therefore the choices we make in how we help and shifting to a model of resilience building is critical.

The biggest act of kindness we can achieve, when there are so many unchecked volunteers, is to empower the most vulnerable in our communities to remain as independent as possible whilst they are in social isolation or social distancing. By supporting independence and doing the least amount of intervention needed to achieve this helps to safeguard the vulnerable person's wellbeing, boosts resilience and reduces the risk of financial exploitation in the coming months as scamming incidents increase.

Providing an isolated person with a list of helpful contact numbers (e.g. where to obtain food from, who to contact if the individual is experiencing fuel poverty), supporting the individual to be as independent as possible to meet their own needs and signposting to effective and reputable community services are all really effective and kind ways to use your volunteering time. This will be enough for the majority of people we encounter and leaves more resource for those in the community who need more urgent practical assistance and referral to the established and safe, reputable organisations who are equipped to assess and meet complex health and social care need.

We have at least 3 months (and more cycles are likely) of social isolation and social distancing to sustain in the foreseeable future to get through together. If we inadvertently create a dependency on us as an individual e.g. if we become the only support someone has we risk leaving the vulnerable person in a greater state of vulnerability when we can no longer meet their needs. Encouraging a trust in strangers (which is what unchecked volunteers are) will add to the person's vulnerability in the long term. It's a hard balancing act to achieve.

Safeguarding children and adults teams at North Yorkshire County Council can and will take referrals if you have worries that someone's health and wellbeing is at risk because they cannot be independent in meeting their basic needs and have no apparent support from family, friends, neighbours or health and social care agencies. Remember you hold a small piece of a jigsaw puzzle and sharing your piece with the agencies who are paid to deliver a service to the most vulnerable is an act of compassion and enables the bigger picture to be understood. All volunteers should

understand how the vulnerable person can access NYCC customer care to seek advice and referral and if needs be how the volunteer can seek support on an individual's behalf.

#### **Staying Healthy - Food**

During self isolation in recent weeks I've thought a lot about the basics we need to survive and food in particular is essential for our bodies to maintain health and repair after illness. It made me think about how do people access food when they are socially isolated or distanced and how hard it is when people have financial worries as well. The most vulnerable groups, in other words those who are on the social distancing list for health and disability are much more likely as a consequence of their vulnerability to experience lower income than those who don't. Any family self isolating, even if they have money in the bank, may not have the means to repay kind friends and neighbours for two weeks of shopping when we are in a cashless society and not everyone is able to transfer money online, neither can it be assumed we can all afford to lend money for a number of weeks. It led me to be concerned about what happens when people run low on cash but still need shopping or prescriptions. I have seen strangers on Facebook offering to do shopping and go to the chemist for the isolated but how is this paid for when trusting bank cards to strangers is not a safe option (there are already reports from the Police of rogue 'helpers' cropping up to financially exploit the vulnerable)?

I wondered what if the vulnerable person declines the offer of help with food shopping simply because they can't afford it. The shame of disclosing poverty to a neighbour may result in a necessity to break self isolation in order to source food that is affordable without having to ask the neighbour to avoid premium brands even if that's all that is left on the shelves. This of course risks spreading the virus. The alternative is to restrict food. Being malnourished will make it harder to fight off illness or care for dependents resulting in consequences for both the individual and wider community. Food poverty is a public health issue. Anyone who volunteers their time needs to know where to signpost people to if they experience food crisis. Community groups need to provide volunteers with information to reduce the flounder and expedite help.

Researching in advance which local food suppliers are offering a telephone ordering service, the payment options and availability of delivery will enable a list (in a decent font size to support those with vision difficulties) to be compiled which can be printed out to drop round to vulnerable neighbours who may not have access to the internet. This is really helpful, and less time consuming than volunteering to chase around supermarkets with empty shelves. It gives back some choice and control to those stuck indoors which conversely benefits their emotional wellbeing. If you have a hearing impaired neighbour or someone who struggles with making themselves understood on the phone (for example after a stroke) please offer to read out their shopping list for them.

To be fair to all members of the community and to be truly non-judgemental the lists of food suppliers must include at the top the information about food banks and North Yorkshire County Council's emergency funding referral details. This demonstrates to the one person in your street or village who is struggling with poverty that you care and understand that we all deserve to eat well.

#### **Supporting Communities**

The first action for all is to follow the current Government guidelines (and keep up to date as new guidance emerges) to keep ourselves and the most vulnerable in our community safe from Coronavirus and support the NHS to continue to function.

The second action is to support those who are vulnerable and socially isolating or socially distancing in our own families, our friends and the neighbours we know.

The third action is to support independence and resilience in our communities. Doing less can mean being more available to do more for others and keeping ourselves physically and emotionally healthy. There is a real risk of volunteer burn out (carer fatigue) if we do more than what is necessary or commit to too much too soon. Joining together in a coordinated group with an accountable leadership with support from the Ripon Community House Hub (which in turn can draw on support from North Yorkshire County Council's specialist emergency action teams) will help make the best use of volunteer resources.

All community groups who want to help need to provide their volunteers and the people they are helping with the knowledge they need to access timely expert help. A short list of phone numbers of practical and reputable organisations who are expert in helping is needed with a clear understanding of what service is provided in addition to the local food delivery organisations (including emergency aid). This reduces the stress of being on a doorstep in the rain (two metres back from the door in this reality) and not knowing who to call when someone discloses they've got no money for food or to top up the gas metre and they have a disabled partner to take care of and a hungry cat. Feeling anxious and helpless is disabling and putting volunteers in this position without resources to cope with scenarios they are likely to encounter is neither fair or healthy. Volunteers need to be able to call in to a coordinator if further support is needed and step back safely.

Having a policy about how to safeguard both volunteers and those who are vulnerable is really important. Thought will have to be given about how volunteers will understand what is expected of them to keep themselves and others emotionally and physically safe. There needs to be a policy about entering people's homes, how to protect against infection, handling money and when and how information will be shared is essential to safeguard when concerns are identified. This policy making expertise is already held by established community volunteering hubs who have policies and procedures in place. Linking in to support existing community voluntary services is an effective use of resource and can free up DBS checked and trained staff to work with the most vulnerable in our communities and delegate tasks to the less experienced.

Volunteers may need access to support, and all will benefit from time to reflect and process what they see, hear and feel when working with high levels of distress. Provision to support volunteers emotional wellbeing is a way to show our volunteers that they are valued too.

Produced by Kerry Boddy on 20<sup>th</sup> March, 2020