

Examining the Ambitions Framework: Workshop 4

Community

Dr Erica Borgstrom (@ericaborgstrom)

Dr Joanne Jordan

Claire Henry, MBE

Dr Una St-Ledger



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Agenda

Welcome & Introductions

Ambitions Framework

What is community?

How this impacts activities

Realising Ambition 6

Closing remarks

If possible, use the 'raise hand' and chat box functions within Teams. Mute your mic when not speaking to help improve sound quality.

Welcome and Introductions

- Welcome
- *Recording*
- Brief introductions
- Ways of working
- Workshop aims:
 - Share how 'community' has been talked about in the research to date
 - To further elucidate the ways in which people think Ambition 6 can be realised

Ambitions Framework

*Ambitions for Palliative and End of Life Care:
A national framework for local action*

Overview

Research background

- Ambitions Framework: launched in 2015 and relaunched in 2021
- No evaluation, some webinars and feedback
- Our Project: Mapping examples of use and further examining how people understand, use and implement the framework
- Project team at OU was not involved in developing the Ambitions Framework

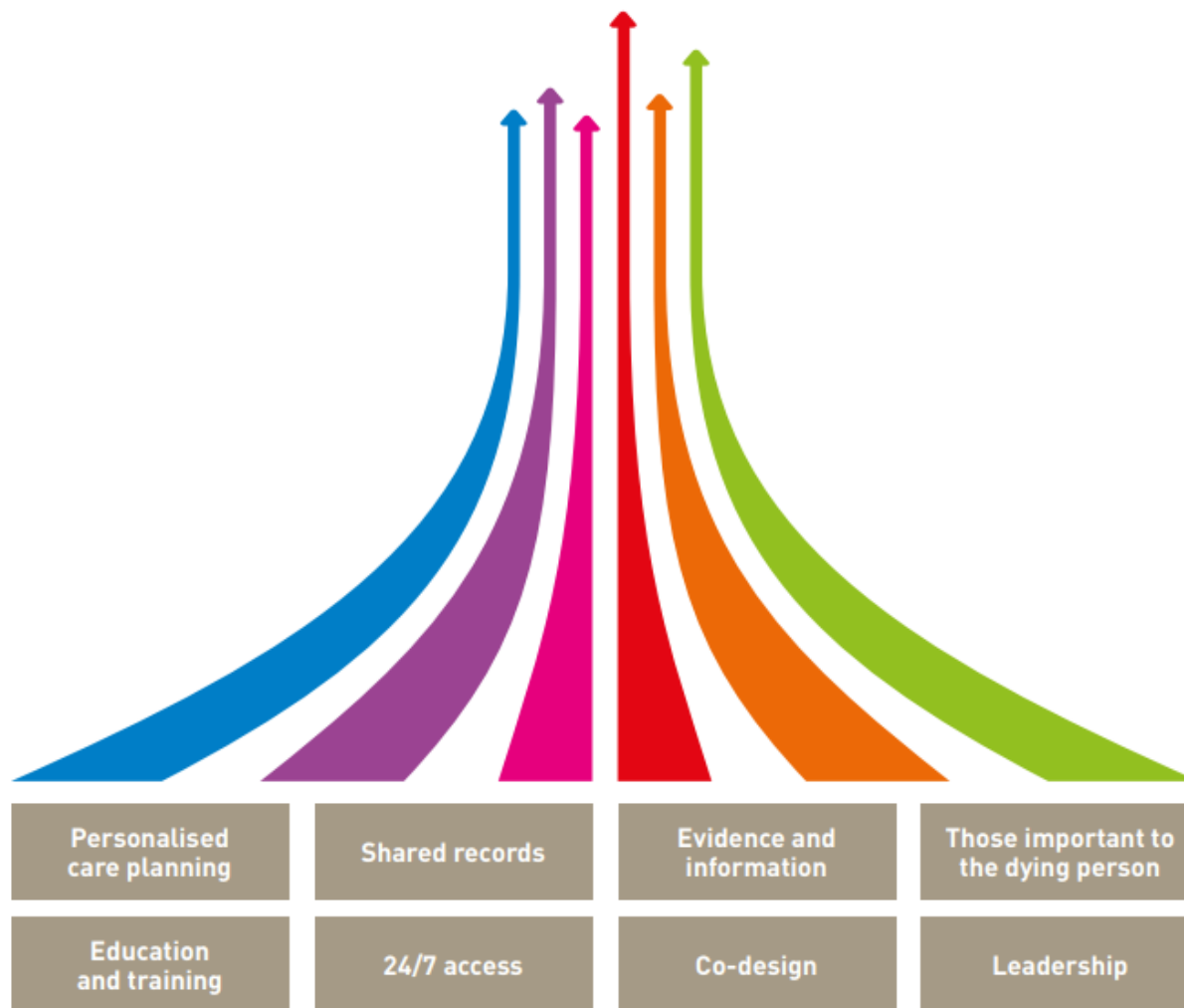
Six ambitions to bring that vision about

- 01 Each person is seen as an individual
- 02 Each person gets fair access to care
- 03 Maximising comfort and wellbeing
- 04 Care is coordinated
- 05 All staff are prepared to care
- 06 Each community is prepared to help

"I can make the last stage of my life as good as possible because everyone works together confidently, honestly and consistently to help me and the people who are important to me, including my carer(s)."



In mapping exercise, Ambition 6 least likely to be focus of service development. However, in open text answers and focus groups, people stressed its importance to the delivery of care.



Foundations for the ambitions

Topic 1: What is community?

Following examples are drawn from our research - case studies and focus group discussions

Topic 1

What is community?

- Different ethnic and/or faith groups
- Marginalised groups
- Vulnerable groups (e.g. homeless)
- Sense of belonging
- Local interest groups
- 'Diverse' or 'intersectional' communities
- Geographical areas
- Street level
- Neighbourhoods
- "Hyper local"
- Hospital as potential community
- Volunteers
- Schools
- General person
- Lay public

"I always think of it as the layperson, so these are, you know, the general public. This is about taking back, you know, 50 years and small communities working together to provide supportive networks to those in need. And in this instant trust around palliative care."

How do these concepts align with your own understanding of 'community'?

Topic 2: How do different notions of community impact action

Topic 2

How do different notions of community impact action

The social sciences show how language/concepts/discourse impacts and shapes action. How people think (and talk) about things is entwined with what they do.

“...from a acute NHS Trust point of view, the “each community is prepared to help” within the ambitions is far more difficult for us to see how we can actually facilitate that. You know, that's a much broader community and fantastic as an aspiration, but much more difficult for me to know what the role of the acute trust is within that.”

“The rub was that it was owned in the majority by clinical staff. Rather than looking at it from my perspective, from a holistic sort of community point of view ... I don't think one person in the organization ever talked to me about the ambitions framework unless I was like there's this thing that apparently we're all meant to be [working] towards.”

How might the different ways of thinking about community impact action?
What about for you and your service/area?

Topic 3: Realising Ambition 6

Topic 3

Realising Ambition 6

Examples of facilitators

- Dedicated spaces/time to meet together
- Considering 'ownership'
- Listening
- Recognise what is already happening
- Volunteer services (although some change in name/focus)
- Funding for linking up and creating communal spaces
- Encouragement

What gets in the way

- Assuming it must be someone else's duty/job
- Not recognising and valuing the communities one (or staff) is already part of
- Lack of resources for some types of activities (e.g. public education)
- Lack of clarity about shared goal

“...we get calls from schools and they say, oh, we've had a death in the school. We need...counselling and it's like, well, actually, you might just need support. And if that support is from the school community, from the people around you then you know that's often that will often be enough.”

Summary and close

Thank you for your participation!

You can follow @openthanatology on Twitter to hear about project outputs and other resources linked to palliative and end of life care

Evaluation survey:

<https://openuniversity.onlinesurveys.ac.uk/ambitions-framework-workshop-evaluation>