



# RE-OPENING ADULT SOCIAL CARE DAY SERVICES SURVEY ANALYSIS

## 1. Purpose

The survey was carried out by Shared Care Scotland over two weeks in September 2020 to better understand the challenges, barriers and opportunities faced by providers of day services for adults as they make plans to re-open their building-based provision. With the recent publication of [national guidance](#), we were also interested to find out what level of provision is likely to be available in the short and medium term, and whether the capacity available is likely to meet any demand that is emerging.

## 2. Methodology

The information was collected using an on-line survey asking both open and closed-ended questions. The survey was circulated to all registered adult support services - registered with the Care Inspectorate at 31<sup>st</sup> March 2020. The survey was also circulated through other networks to ensure as wide a reach as possible. We estimate that approximately **20%** of registered adult day support services responded to the survey.

Prior to circulation, the survey was tested with two adult day services, and further advice on the scope of the survey was sought from the Care Inspectorate and Scottish Government.

## 3. Responses

**84** services responded to the survey between 15<sup>th</sup> and 30<sup>th</sup> September 2020. **95%** were registered with the Care Inspectorate. Responses were received from at least one service in every local authority area with the exception of: Aberdeen City, Clackmannanshire, Inverclyde, Orkney Islands and Shetland Islands. **32%** of the respondents were from in-house local authority services, **56%** from third sector organisations, and **7%** from the private sector. The remainder were NHS services.

Services were supporting clients with a wide range of disabilities and conditions including: dementia, learning disability, physical disability, sensory impairments, autism, mental illness and drug and alcohol related illness.

## 4. Findings

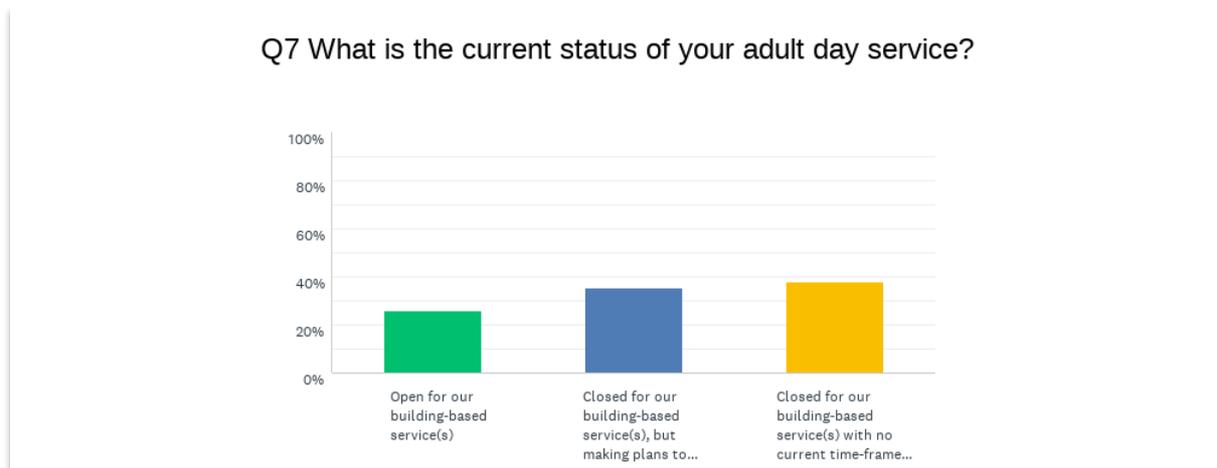
The following is our analysis of the survey responses. We have also created a dashboard containing the complete set of charts and open-ended responses. A link to the dashboard is provided at the end of the paper.

### 4.1 Firstly, we asked about the *current status* of adult day services.

Three options were provided:

- Currently open for building-based service(s)
- Closed for building-based service(s), but making plans to re-open within the next 4-6 weeks
- Closed for building-based service(s) with no current timeframe for re-opening

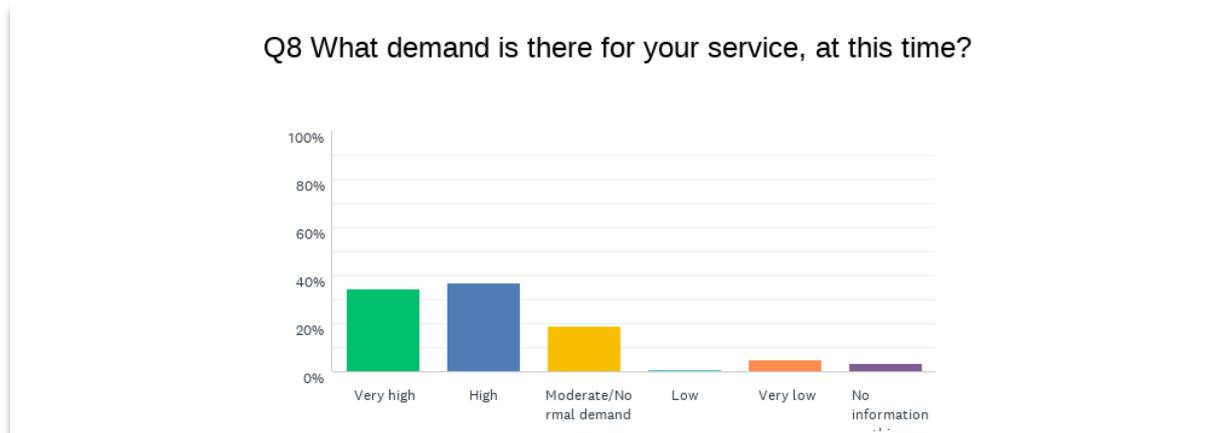
**38%** of the respondents said that their building-based service was currently closed with no timeframe for re-opening. **26%** said that they are currently operating a build-based service.



In addition, we also asked those respondents with no timeframe in place to tell us what was preventing them from re-opening. The most repeated reason was that they were awaiting further guidance and/or approval from their local authority or Health & Social Care Partnership.

#### 4.2 We asked about the *demand* for their services.

**71%** of respondents said there was High or Very High demand for their services at this time.



In addition, we also asked how this demand was being expressed, and by whom.

Demand was predominantly coming from unpaid carers, but also from service users and social workers. Evidence of carers showing increased levels of stress was mentioned frequently, and also the negative impact on services users due to the lack of social opportunities or meaningful activity that would normally be available through day opportunities.

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*“Carers are desperate for respite, clients call us upset and people living with dementia are deteriorating, increased mental health issues with people living on their own. This is expressed by clients, other health care workers, families etc.”*

*“We provide a community-based day service for people with mild to moderate learning disability. Many service users are feeling isolated and desperate to get back to the day service.”*

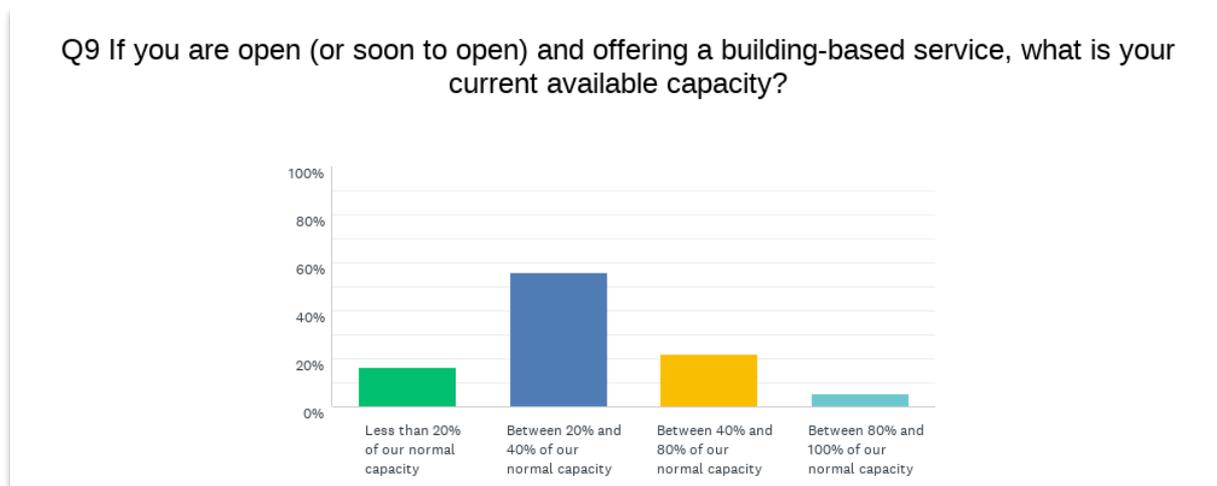
*“Members of the service are seriously struggling with their physical and mental health and carers are also struggling with the same issues and the length of lockdown.”*

*“Service users, parents and carers are continually asking when we will be opening this has increased more as they have seen other Third Sector Services open, Schools and nurseries. Some of our carers who staff have known for 25+years are expressing pressure and asking for support from Day Service staff, when this has been actioned Care Managers have been unhappy and thwarted any further support from Day Services, preferring to direct parents towards SDS. Thus, providing a carer and in some cases exposing the service users to more physical contact as there are only community cafes, shops to visit, which increases risk, rather than coming into a controlled environment like the day service which has strict protocols and infection control.”*

*I have kept in touch with our carers on a monthly basis and where possible they have kept contact with their service users to maintain relationships where appropriate. They have reported this to me. Also, we have started to review our LD service users and the feedback is mainly that service is missed for support/respice.*

*4.3 We asked those services that were open, or planning to re-open soon, about their capacity.*

Just over **72%** of respondents told us that they were currently operating (or expecting to operate) at less than **40%** of their normal capacity.



*4.4 We asked about **alternative forms of support** that have been provided while normal services have been suspended.*

Many different examples were provided but the main types of support included:

- Online or telephone-based support, either one-to-one or in group sessions
- Online group activity sessions (virtual cooking groups, art groups, storytelling, digital skills)
- Regular communications via email or newsletters
- Home (or garden) visits and sitting services
- Practical supports such as helping with shopping, delivering meals, accompanied walks

*“We have been providing outreach day care social contact within their own homes. Have given out 15 iPads and support with shopping, going out for walks etc. We have also been providing friendship phone calls to our service users.”*

*“We have moved from a Mon-Fri 09:00-15:00 model to a two shorter sessions per day over seven days. This means capacity for less than 50% of people in the building compared to pre-Covid levels. However, building uses is lowered further by using*

*care at home, and greater community-based support. We have had to significantly increase our use of self-drive vehicles, and people's own Motability vehicles."*

*"Delivering lunches to all our members, with suitable, person centred activities. Bus trips. Social distance chats in the garden. Telephone calls. Newsletter. Website. Carer support by sitting with people with Dementia."*

*"We have a virtual programme via Zoom with activities daily that service users and their parents and carers can join. Service users have been receiving activity packs, fortnightly newsletters with updates on what everyone has been doing. Outreach work staff meeting up with service users and going for walks, cycling, outdoor activities."*

*"A Buddy system - staff have had 4 named Members to keep in contact with, deliver food, prescriptions and assist with emergencies. From 16th June 2020 we have delivered a hot lunch twice a week to members and their Carers, free of charge. Around 82 lunches delivered every week."*

*4.5 We asked for more information on **plans for re-opening** building-based provision, and what challenges this presented.*

Most respondents who answered this question said they were planning to return to a building-based service in a phased way; gradually increasing numbers but likely to be operating significantly below normal capacity for the foreseeable future. Some services said they will continue to provide alternative forms of support for those reluctant to return to the 'normal' service, or where physical distancing requirements restrict the number of places available.

*"We plan to reopen our smaller building for group activities to allow us to focus on meaningful outcomes for service users in this time of reduce service and restrictions on daily life. This will include upskilling service users in use of technology for online meetings and activities with staff and other service uses."*

*"Some families have decided to stay home until the virus has gone. For those who recognise we need to plan to work alongside the virus by introducing safe practices, their family members will engage in a range of new protocols. Room capacity will be reduced with dedicated staff and service users in one bubble, never crossing into other bubbles. Outside activity where possible, bikes, swings, nature, Autumn is now here and for some, this is too cold. 4-day programme offered to all, centre closed Fri, Sat, Sun to empty building for 72hrs where we are advised the virus has reduced chances of survival. Intense infection control throughout the week when service users in the building. Plan that SU's phone in before coming to advise symptom free, when they arrive asked the same questions again but from the car park and safety of their car, then escorted to the building mindful of the social*

*distancing. Programmes of activity are planned in order to build in cleaning time for equipment. No sharing of equipment without intense cleaning by dedicated staff. Continuation of digital medium to benefit all at home or in building. Communicating with friends on the big screen, whilst being in the same building keeps the bubbles tight and safe. A plan has been put to the senior officers to sign off. Awaiting this approval for completion."*

*"We plan to open on a smaller scale, possibly three bubbles with two service users in each bubble with a staff member. we would like to start taking service users out also in the community for a coffee, shopping or lunch while they are waiting to start back day care."*

*"We have everything in place to reopen as soon as possible. We have placed hand sanitising units throughout the building, information posters, purchased protective screens were 2 meter distancing may be an issue, have cleaning schedules in place, Risk assessment done, All staff trained in Covid 19 - How to work safely, thermometers purchased and all staff trained in there use and recording, service users have been all given an information sheet explaining the changes that have been made and what we require for them for us to reopen safely. Minibuses (where normally we could carry 12 passengers) is now only 2 so that social distancing can be adhered to."*

*"In our experience generally individuals and families who live with underlying health conditions (many parents had been shielding) - are anxious about getting coronavirus and / or breaking Government restrictions on numbers of people social and household gatherings which will result in them getting the virus. However, some others are putting pressure on us to provide a 'normal' service which we simply can't provide due to the required infection controls required and physical distancing requirements detailed in our centre based activity risk assessment. As a result of loss of funding we have required to furlough or redeploy 80% of our workforce."*

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The main challenges identified were:

- Maintaining physical distancing – particularly for service users with learning disabilities
- Providing safe transportation – where services provide a pick-up and drop-off service, or use group transport to access activities
- Managing expectations – where capacity is limited meaning people won't have the same amount of provision as before. Also, the impact of IPC measures and staff capacity on the normal activity programme
- Ongoing financial implications – increased costs due to extra hours needed for rota cleaning, purchase of cleaning products and equipment. Also, highlighted was the challenge of meeting fixed overhead costs when facing a reduction in clients (and client income.)

- Obtaining clearance to re-open – many respondents expressed concern about the lack of clarity about who was responsible for ‘signing off’ plans and risk assessments

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*“Our service users have been in their homes now for 6 months, so their mobility has suffered greatly as well as their mental health. I spoke to a gentleman when I was delivering his lunch and he hasn't had shoes on for 6 months. Another lady whose husband was living with dementia and had to be admitted to a nursing home after over 60years of marriage because she found it too difficult to cope without the support we gave her, will find coming back difficult without her husband. There are many more individual cases I could mention but I think the service users themselves and their wellbeing will be our main challenges.”*

*“No agency seems prepared to do a preliminary visit to our premises to help identify whether we would be in principle able to re-open and advice generally about what we might do. The focus is Risk Assessments after the production of which, we will be 'signed off' but it has been a struggle to find out by whom. Preliminary help with venues would help with the stress of trying to reopen (we are small with few resources and limited capacity). Early years organisations have an arrangement through Scottish Govt and Lyreco as a supplier - this is not available to us but would be useful if it could be.”*

*“Having the weekly call from the Care Inspector. A friendly voice who could empathise with the challenged faced in rural delivery of care. Really appreciated.”*

*An agreement say until the end of this financial year that building based costs will be met, rent etc.*

*“The onerous processes imposed by the HSCP senior management team. They keep adding another level or process.”*

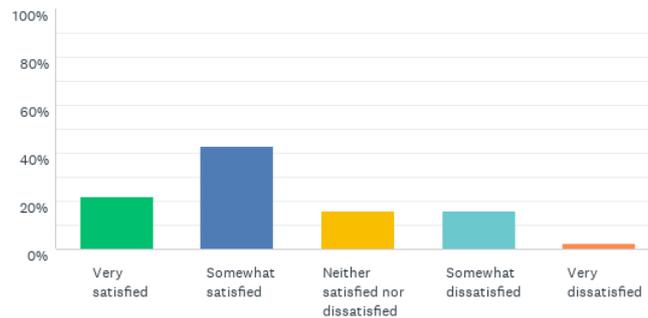
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*4.6 We asked what **sources of advice and support** services were using to help with their planning, and what could be improved.*

Respondents said they were working with their Health & Social Care Partnership, their local Care Inspectorate, Health Protection Teams, as well as accessing regulations and guidance online.

It appears to be a fairly mixed picture in terms of access to support, but generally the experience has been positive. Difficulties appear to be related to over-stretched resources, particularly in the case of Health Protection Teams.

Q15 Overall, how satisfied or dissatisfied have you been with this advice and assistance?



Where concerns were expressed, these were:

- A wish to see more HSCPs acting proactively and working with providers to develop and implement local remobilisation plans, and 'share the load'
- Overwhelming amounts of guidance with occasionally inconsistent messaging, and lack of support to help interpret the guidance
- A lack of clear operating procedures and processes which can be adapted and applied to different settings

The improvements suggested were generally related to addressing these concerns.

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*"As there are so many unanswered questions, it can feel like "theoretical discussions" rather than fully getting straight answers for questions. It's challenging that everything is on "individual risk assessment" can feel that we are left to make decisions and if issues arise will be scrutinised. Assurance meeting should help share the load of decisions."*

*"All have been helpful and particularly CI officers for advice and support."*

*"Often the volume of advice and guidance has been overwhelming. As a services manager for multiple registered types of service, as well as professional health staff it has been very varied."*

*"Some advice and guidance have been good others can be confusing at times. Lack of information and direction from local authority."*

*"Always been kept up to date with latest guidance."*

*"Council have not been any help just give us the guidance and expect us to be able to put it together without any expert help."*

*“Very little communication given from the council. Initially communications issued by email regularly. However, since June communications have practically non-existent.”*

*“South Ayrshire HSCP have been an active supporter and partner throughout the period - which has been brilliant for everyone involved and we can't thank them enough.”*

4.7 We also asked for **feedback on the national guidance** (on re-opening building-based adult day services) and the accompanying ‘Back to Business’ guide.



The responses received suggest the guidance has been helpful and, for those already more advanced with re-opening plans, provided some reassurance they are complying with recommended practice. Only two respondents (**2.5%**) had not seen the guidance.

However, there were some concerns related to:

- Timing - should have been available sooner, especially as re-mobilising respite care was included in phase one of the Scottish Government’s plans for easing lockdown restrictions
- Scope - the guidance still leaves managers with a lot of work to do to translate the information into operating policies and procedures
- Context - adult day services take place in a wide range of settings and the guidance inevitably can’t provide all the answers

*“Personally, I feel the time taken to produce the guidance was far too long, with family carers seeing day care as being 'ignored' or 'left behind'. When guidance was produced it was lengthy and contained too many links to other lengthy and sometimes complex documents (one link in particular didn't work). As a general observation, I would point to too much information being produced by various*

agencies. In the context of trying to wade through the advice on Coronavirus, less would be more.”

“Whilst fully appreciating and agreeing with the priority to meet the needs of unpaid carers, it would have been helpful had the guidance acknowledged more fully the inherent value of day services for those individuals who use them, and not just as a break for the unpaid carer. The reason our day service exists is fundamentally because we value meaningful work and activity in its own right. We don’t describe ourselves as a short break service. As I say we fully recognise it has this positive impact on unpaid carers and we were very aware of the pressures they were under during lockdown. This focus has sometimes led some in local authorities to presume that day services can be easily replicated from home, something we have strongly argued is not possible to do.”

“We found that we had already covered most things in the guidance, but it was good to confirm that.”

“More concrete "rules" may be helpful although I know how challenging that would be Guidance on staff using personal vehicles and how to enable that thoughts holistically on people attending different things - or coming from different types of accommodation A way of identifying who should and shouldn't come back to the day service - not just looking at health and ability to socially distance as many more factors come into it. Do we need to have Bubbles and Cohorts? how would you implement that Back to business guide MUCH more useful than Scottish Government guidance.”

“The guidance was extremely helpful in the section on Capacity and the need to have a Best Interests meeting if a permanent change were being considered, and that the experience of individuals using services must be taken into consideration. This was helpful to counter the process used in Edinburgh to move people permanently out of their day service without any meaningful involvement. The section on Conversations between commissioners and providers is also very helpful, setting out a staged approach along with a helpful checklist of areas to consider. This again is valuable in providing a good process to put to the local authority. Some of the other guidance while all good, was just too late as we had to consider a lot of these areas in June as soon as the SG route map came out. Overall, I think the guidance is very good, just different aspects are helpful at different stages.”

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#### 4.8 We asked services how they were *involving carers and service users* in their planning.

We know from speaking with services that have managed to safely re-open just how important it was to involve carers and service users when exploring options, and to listen to their concerns and ideas.

Almost all the respondents to this question said that they were in touch with their service users and carers on a fairly regular basis to keep them informed and, in some cases, to consult on re-opening plans. This has been done through social media, group chats, telephone calls, newsletters and questionnaires/surveys.

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*The manger has set up a virtual conversation café via Teams and this has been well attended. Those who cannot link in are given minutes and invited to contribute questions or suggestions prior to the meeting each week. Service users will all be reviewed individually, and I believe local teams have been keeping contact too. Carers, as mentioned previously, have been keeping in touch regularly where appropriate and passing on info which we have recorded. We have flagged up any concerns as needed with the relevant SW teams.*

*“We have carried out a survey for both Service Users and carers on the service we are providing at the moment and the results are very positive. When we have a date to reopen, we will consult with Service Users/carers throughout the whole procedure explaining everything we will have in place for reopening and the decision will then be theirs as to whether they feel able to return.”*

*“We have conducted 2 reviews with clients and carers - 85% wanted to return to day care 99% want outreach and day care.”*

*“Weekly contact and communication in person or by telephone, also via Facebook. A questionnaire has gone to every member asking about their experiences in lockdown, how it has affected them physically, mentally and emotionally. Encouraging members to share any concerns they may have about returning to day care. I’m planning an open day with allocated time slots to enable members, Carers and families to visit the day centre prior to reopening.”*

*“We have asked parents/carers to be involved in a small group to look at the remodelling of the day services. We have kept them up to date with the plans through letters and emails. I would estimate that at least 50% of parents/carers have a limited understanding of why we cannot open the buildings, particularly as schools Universities are open.”*

*“Return to work” interviews using talking mats through zoom to get feedback from people on what they would like when they come back regular meetings during outreach support to gauge how families and people are coping and to keep them up to date.”*

*“Honestly - we are not at this time in communication with the parents and carers regarding the plans. There is tension because we have relationships with the parents and families and have offered supports to those who meet a priority category. Involving parents and carers is why we have such a good relationship with*

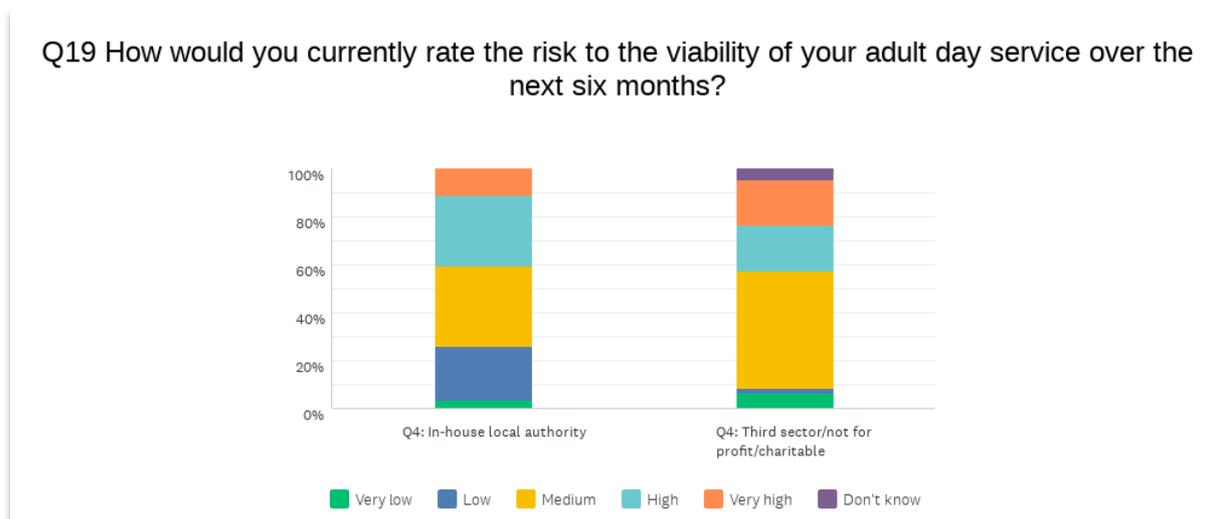
*them, it's the very thing that we are having to distance ourselves from as it causes upset for those who see themselves as commissioners of services."*

4.9 We asked services to rate the risk to the **viability of their services** over the next six months.

As emergency resilience funding and the Job Retention Scheme is phased out, we wanted to find out about the financial risks facing providers.

Almost **36%** of respondents said there was a High to Very High risk to the viability of their services over the next six months. Just over **46%** said there was Medium Risk and **14%** said there was a Low to Very Low risk.

Just over **19%** of third sector providers indicated a Very High risk, compared to just over **11%** of in-house providers.



4.10 We also asked what the **main risks** were and how these were being mitigated.

The risks mentioned most frequently related to financial sustainability due to uncertainty about future commissioning and procurement decisions, and the anticipated loss of income due to operating at reduced capacity. Additional costs associated with increased cleaning, staffing and other necessary purchases were also mentioned as placing significant strain on finances.

Respondents also referred to the ongoing risks to the health and welfare of their staff and clients.

*"There are two main risk to our service. If infection rate rises clients may not be available to return or staff may be unable to work. Population infection is out with*

*our control. We continue to strictly follow protocol within our service. The other is finance. We rely on client referral from social work and for our day care to be working at capacity. Very difficult to mitigate this."*

*"The service becomes less cost effective; I have developed a new model of support that will allow both building based support and outreach support to operate hand in hand with the building-based service focused on meeting the needs of people and families in crisis. this model will also incorporate an intervention and enabling model of building based support in specific circumstances where a short programme of day support may be essential in circumstances such as bereavement, grief, transition, mental health, addiction, depression and low mood. As the individual improves support can be transferred to the home circumstances to assess the individual skills and ability to cope and again should there may a relapse in the future another short programme of day care can be reintroduced."*

*"The main risks for us are trying to stay afloat financially as we have lost some of our income due to lockdown and even when we reopen, we will not be able to operate to full capacity."*

*"Financial. No guarantee of funding beyond end of October due to the SG sustainability fund currently only running till then. Also, if the local authority only fund hours delivered going forward, will they be willing to re-assess and recognise new support levels required to keep people safe? For example, higher level of 1-1 or 1-2 support due to keeping people safe in small bubbles and using buildings as separate spaces. Our local authority also do not value building based services so this presents a threat."*

*"Ensuring our voices are heard and making sure day services and their importance to communities are supported."*

*"Small Day Opportunities, with current social distancing and transport restrictions both capacity and delivery significantly reduced which puts the Service at potential financial risk."*

*"Service no longer suitable for current client base due to numbers being able to attend and numbers being able to use transport at any one time, currently reviewing and updating risk assessments and putting infection control measures in place."*

*"We have funding to March 2021 but future unsure as we have had to bid for a day opportunities contract on the Public Scotland website - bids held during pandemic but no info on whether there is to be new bids as some services may not remain viable until then. We have small reserve which will help but is for a limited time."*

#### 4.11 And finally, we asked respondents if they had *anything further to add*.

This elicited some strong emotional responses about the escalating risks to carer and service user health due to ongoing uncertainty about how and when adult day services will reopen. Some respondents expressed concern about the negative way that adult day services are viewed, and also that the needs and rights of those in supported living arrangements are being overlooked.

*“I know everyone has done their best in a situation that they have never had to deal with before, and as said I know over 70s is the most vulnerable groups, but we have to do something as I personally am seeing a few people literally wasting away. The sparkle in their eyes they once had is gone.”*

*“We need to re-start day care services asap, to assist carers in the caring role. Although carers are trying 100% to support their family member at home, they are not getting a break. Stimulation/routine is not the same. Foresee a high percentage of these people going into long term care.”*

*“The mental health, as well as increasing frailty and loss of confidence is so apparent in most of our older service users and relatives/family members are also now in danger of failing health due to lack of respite opportunities. This is a worry for all organisations who support people in day services, witnessing distress in not only service users, but those who care for them. Re-opening of day services must be made a priority.”*

*“I am relatively new in post (July 2019) but prior to Covid, it was my observation that attitudes from local authorities, IJB's and HSCPs towards day care for people with dementia were on the whole negative. Routinely, day care would be posited as something 'you wouldn't want to attend' and could replace using Option 1 or 2 by having staff support you individually. This displayed a narrow minded and ignorant view of the importance of day care (not for everyone of course) to people with dementia and their carers. I hope that the pandemic will bring to the fore the importance of day care to those that use it and to carers who have been feeling its absence terribly during the last 6 months.”*

*“I suppose the one area I would be concerned about in terms of this overview is that it is fairly firmly placed in the context of unpaid family and carers. Perhaps this is fair in terms of where a significant burden of impact lies at this time, and possibly it's a different piece of work to be done, but my colleagues and I are very concerned about the annexing of those in supported living (including those with very little from home support) away from day service provision. More specifically an erosion of rights and choice for this groups appears to be in action. We are aware of a number of cases where this block to day service provision is causing great distress, particularly where there is an awareness that others (peers and friends) are able to access the service as they have unpaid family or carers. We are aware of the capacity constraints on provision, however I feel the Scottish Government have to*

*give some clarity around the statement 'prioritise those with unpaid family and carers'. If not, it appears some local authorities may use this as a mandate to impose decisions on these individuals, with long term implications."*

*"We will always make the best of whatever happens, this is truly an historic situation which will have ramifications for years to come. Those confident, flexible and out of the box thinkers should be embraced at this time. People/agencies should not opt for the stay at home until it all goes away approach. We need to work together."*

*"By filling in this survey, I am now considering what changes will be required at the day centre to make it a safe place when we do get that green light."*

*"Glad someone is asking as I know several managers who do not expect their service to survive without guaranteed funding until at least a vaccine is found, and the epidemic subsides."*

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## 5. Conclusions

The survey has revealed a somewhat varied picture of adult day service remobilisation across the country with some areas significantly further ahead than others. From our previous [case study](#) development work, we would conclude that in those areas where there is effective partnership working between service providers, the HSCP and the local Health Protection Team, there is more likely to be evidence of progress.

Our findings also confirm a high demand from carers and service users for adult day provision to re-open. This suggests confidence in providers to put in place the necessary safeguarding measures, but is perhaps also an indication that any remaining risks are more acceptable than the prospect of coping any longer without access to day support. However, as we approach winter there are serious concerns about both the availability and capacity of adult day services.

One of the unintended consequences of COVID-19 has been that people have had to think more laterally and creatively about how to meet the needs of individuals, while building-based services are not available. Staff and volunteers have worked tirelessly to ensure that some form of alternative support has been maintained. Many innovative solutions that have emerged will continue to benefit people long after the pandemic passes.

However, we can't assume these alternative forms of support are going to meet people's needs over the longer term, or that they are an effective substitute for out-of-home day services offering stimulating and enjoyable activities in a safe, social setting. If we are to embrace the present situation as an opportunity to 'build back better', we must recognise the need for a strong and sustainable market that promotes variety and offers choice across a range of provision, including day services for adults. We should therefore be very

concerned that many of these services may not survive the next six months due their precarious financial situation.

The experience of this pandemic will have permanently altered the circumstances of many service users and carers, and led some to reappraise what's meaningful and important in their lives. Consequently, a period of intensive support may be required to help people re-connect with services and adjust to their 'new reality'. Service providers will need time to consider the implications of these changes for their service delivery models. However, this is not the time to consider any local overhaul of adult day services. While there is much to be learned from the past six months, we are still in a rapidly changing environment that will require our full attention.

## 6. Recommendations

The following recommendations are based on what we perceive to be the strongest messages coming from the survey responses:

- There should be further reinforcement by national and local government of the vital role played by adult day services in enabling people with support needs and unpaid carers to access their rights to family life, health, education, employment and independent living in the community
- National and local government should ensure that adult day services continue to have access to emergency funding to help them remain sustainable, and therefore able to continue providing vital support through the winter months
- There should be further efforts by Health and Social Care Partnerships to lead, coordinate and support the safe re-opening of adult day services
- Shared Care Scotland, with other partners, should further develop COVID-19 learning exchange networks to share practice and support adult day service managers to 'operationalise' national guidance
- There should be increased efforts to promote and support Self-directed Support flexibility. This is particularly important where people don't have access to their normal day services due to reduced service capacity or shielding

## 7. Further information

We have created a results dashboard which shows all the charts and additional open-ended responses from the survey. This can be viewed here:

[www.surveymonkey.com/stories/SM-FLKT7X7Y/](http://www.surveymonkey.com/stories/SM-FLKT7X7Y/)

Any questions about the survey should be directed to Don Williamson:

[don.williamson@sharedcarescotland.com](mailto:don.williamson@sharedcarescotland.com)

For further information about Shared Care Scotland and our COVID-19 'Safely Returning to Business' resources, please visit our website: [sharedcarescotland.org.uk](http://sharedcarescotland.org.uk)