

# Rethinking rural dementia care

**Marita Chisholm, Kaye Knight, Catherine Ramsdale, Jo Martin and Wendy James** describe how a big effort by their small Victorian health service to do things differently during two COVID-19 lockdowns helped people with dementia living in the community and residential aged care

**2**020 saw the unprecedented impact of the coronavirus pandemic on the healthcare industry worldwide. One of the biggest impacts for Australia was the restricted access to health care facilities as well as the limited provision of services in the community.

For many, this isolation and restricted social interaction from family was a new experience, however, for rural communities, adversity, the tyranny of distance and isolation comes with the territory. Rural communities and people are known for their resilience and innovation when faced with challenges to everyday life caused by events beyond their control. So how did a small rural Victorian health service address this challenge?

This brief article outlines some of the ways Rural Northwest Health supported consumers with dementia or cognitive impairment, along with their carers, living in the community and in residential aged care during an extended period of lockdown and restricted interactions with the outside world during COVID-19.

## Our community

Rural Northwest Health (RNH) is a small rural Victorian health service with campuses in Warracknabeal, Beulah and Hopetoun. It is located about 400km north-west of Melbourne. The organisation offers a range of services to the Yarriambiack Shire and broader Wimmera Mallee Region, including: acute care, palliative care, urgent care, aged care (including a 15-bed memory support unit), respite care, community-based memory support and carer support services, volunteer programs, and an extensive range of community health and allied health services. One such service, the Wellbeing Team including a Memory Support Nurse, provides support directly to community members to access and navigate the health service.

The Mallee region is known for its harsh climate and the hardships that come with this. People who forge a living here are tough. Yarriambiack Shire has one of the highest percentages of people over 80



**Co-author Catherine Ramsdale, Rural Northwest Health's Wellbeing Coordinator and community Memory Support Nurse, with one of the wellbeing packs distributed to community-based consumers during the COVID-19 lockdowns. Each pack included information and activities based on the person's specific interests**

years of age in Victoria and is a high-risk community for COVID-19.

## Connecting in residential care

Within our residential aged care facilities, we implemented a broad range of measures to enable connection between our residential care consumers and their significant others, and to maintain consumer engagement with the wider world without residents needing to leave their care home. These included the introduction of CareApp, a communication platform for aged care providers to share photos, messages between consumers and families as well as providing a Live Chat function; letters from surrounding schools; setting up an email specific for families to send photos, letters etc. to be shared with their loved one; FaceTime, phone calls and a drive-by visit where residents from the Hopetoun and Warracknabeal aged care facilities sat in the car park while family and friends drove past to say hello. To manage all the different options to help keep families connected, Rural Northwest

Health developed a 'Keeping In Touch (KIT)' coordinator role at both residential aged care campuses.

## Connecting in the community

The people living with dementia or cognitive impairment in our community and their carers were not forgotten either. A newly established Living Well Program designed to engage people in positive, purpose-driven activities while providing carer respite had only just commenced onsite when the first COVID-19 lockdown occurred in Victoria in March 2020. The comprehensive day program located at the Warracknabeal campus provides a home-like environment, integrating wellness and reablement approaches to assist people living with dementia or cognitive impairment to maintain essential life skills including: cooking, shopping, gentle exercise sessions, art and craft activities, gardening, and interactive programs. Faced with suspension of the program's onsite activities and the prospect of participants and their carers being isolated





**Residents (above and below) from Rural Northwest Health's Hopetoun and Warracknabeal aged care facilities were able to say hello to family and friends from a COVID-safe distance during a drive-by visit. Photos courtesy Rural Northwest Health**

at home without support or respite, the team had to quickly adapt and innovate.

A benefit of providing health services in a small rural community is the connection with, and knowledge of, individuals and their extended family/support base. Relationships are built on trust and first-hand understanding of the community. Rural people are stoic and often won't reach out for help. These trust-based relationships meant our community-based consumers readily accepted the home-based supports offered during COVID-19 in place of the onsite day program. These home supports were tailored to each person's abilities, capabilities and background – the core focus of the Living Well Program.

Person-centred COVID packs were developed by the Wellbeing Team and Memory Support Nurse and distributed to community-based consumers. Each pack included information and activities based on the person's specific interests (eg, seedlings to plant, reading material of interest, puzzles, games and treats).

The Wellbeing Team also offered 'COVID walks' where one team member

visited the person living with dementia or cognitive impairment and walked with them on a route of their choice (eg, to get the newspaper). Another COVID-safe strategy has been to sit and chat with the person living with dementia or cognitive impairment outside their house chatting. This allowed family members to have time to attend to tasks including leaving the house to get groceries and other supplies. We also provided information to assist carers.



### Uninterrupted support

Feedback from the community was that this support was invaluable. When the second lockdown occurred in June 2020, we were prepared because we had already found a new way of delivering services and support during the first lockdown. The significance of finding new ways of doing things from the beginning of COVID-19 could not be underestimated; it allowed us to provide ongoing support without interruption for people living with dementia or cognitive impairment in the community and their carers.

### Conclusion

Now that we are on the other side of the second lockdown, our onsite Living Well day program has recommenced with memory support continuing to be offered in the community. While to date our community has been spared a COVID outbreak, we continue to implement the same level of safety measures as health services across Australia to ensure our community is protected. And, as is so often the case, the connectedness and trust within our small community has proven one of the greatest assets when supporting for people living with dementia or cognitive impairment and their carers during extraordinary times. ■



■ From left: Dr Marita Chisholm is Innovation and Projects Manager Older Persons Health, Rural Northwest Health, Warracknabeal, Victoria, and an AJDC Editorial Advisor; Dr Kaye Knight is Executive Manager, People and Culture, Catherine Ramsdale is Wellbeing Coordinator, Jo Martin is Executive Manager Community Health, and Wendy James is Executive Manager Clinical Services, all at Rural Northwest Health. To follow up on this article, contact Marita at [Marita.Chisholm@rnw.net.au](mailto:Marita.Chisholm@rnw.net.au)