



Havering  
LONDON BOROUGH

# Community chest

in Havering



Pilot impact report



Transformation  
Partners  
in Health and Care



# 01 Report scope

This report provides an overview of the Community Chest (CC) pilot in Havering and what the impacts were. It covers:

- the process behind setting up the CC grants
- the activity that was funded through the grants
- the outcomes that were achieved both through the process of setting up the grant programme and as a result of the funded activities
- learnings and next steps



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# 02 Approach

## WHO WAS INVOLVED IN SETTING UP THE COMMUNITY CHEST AT PLACE-LEVEL?

A decision to proceed with the Community Chest was made by the Havering Place Based Partnership sub-committee, previously known as the Havering Borough Partnership.

A sum of £100,000 from the NHS Health Inequalities fund was assigned for the project.

The grant is managed at Council level by Sandy Foskett, Senior Commissioner and Project Manager, Havering Council. The following people were/are involved as the core management group (meeting weekly when needed) to move the project forward:

- Management (Sandy Foskett). Role: Project management, team coordination, application management, funding transfers to VCSEs, M&E management.
- Community Engagement (Kim Smith) - Community Development & Resilience Officer (Communities Team, Havering Council). Role: representing the voices of VCSEs across Havering, support to VCSEs in application and activity delivery.
- NHS Social Prescribing lead (Melissa Britton, Marshalls PCN). Role: representing the voices of SPs in Havering.
- NHS Integrated Care Board (Matt Henry) - Head of Programme Office – Havering ICB. Role: securing funding, integrating the CC programme into wider borough initiatives.
- NHS Integrated Care Board (Emily Plane) - Head of Strategy and System Development - Barking and Dagenham, Havering and Redbridge, NEL (NHS). Role: securing funding, integrating the CC programme into wider borough initiatives.
- LBH Local Area Coordinator (Claire Monmirelle). Role: bringing Local Area Coordinator voice to the project.
- Havering Compact Chair (Paul Rose). Role: Lay Member representing VCSFE sector.

### **The following small VCSFEs took part in workshops to discuss their experience of applying for bids and potential issues:**

- Attention Deficient Disorders Uniting Parents (ADD UP)
- The Havering Black and Minority Ethnic Group
- Romford Autistic Society
- Havering Women's Aid
- Havering Volunteer Centre

# 02 Approach

## **WHAT WAS THE PROCESS FOR SETTING UP THE COMMUNITY CHEST? WHAT WAS UNIQUE ABOUT THIS GRANTS PROGRAMME COMPARED TO OTHER GRANTS PROGRAMMES?**

Havering was one of three boroughs in North East London to pilot a co-production process for their CC set up. Havering's programme was a 'classical' grant model with a competitive application process.

Havering took a unique approach to the CC, by agreeing (as an above core team), to allow the CC to fund not only Social Prescribing activities, but also those that Local Area Coordinators, or Health and Wellbeing coaches may refer onto. This came from a recognition that the roles are very linked in what they do for the community, as well as an alignment with current programme of work to: 1. understand SP competency - which was a survey sent out to SPs across the borough to self-analyse their skills, role maturity, capacity (in the year prior to the CC being set up in Havering), and 2. Some work to understand how SP, LAC, and H&W coaches roles overlap, what their responsibilities should be, and how they could support residents in non-duplicative, but supportive ways.

A 3-month co-production process was followed with workshops covering the following areas to develop tools for use in setting up the CC:

- Team formation
- Priority setting
- Criteria selection

Havering was the first borough to develop a prioritisation process, criteria selection process, and build template application forms, which formed the initial CC toolkits used by other boroughs also adopting a similar 'application - selection - award' model.

The criteria and application toolkits that Havering supported development of, were based on previous research of small community grant funds across the UK. Workshops to co-produce these focused on ensuring the process was not too heavy for VCSEs with limited resources/ capacity/ understanding of grant systems.

Havering Council used their existing online communications system (Citizen Space) to host the grant information and application platform/ process.

# 02 Approach

## WHAT PRIORITY AREAS WERE SET FOR THE CC (IF ANY)?

**An overview of the priority areas, activities and VCSEs, to illustrate the focus of the borough.**

**Process:** Priorities were identified through a process of co-production with social prescribing staff, council commissioners, local community members and micro-VCSEs. Working alongside other health inequalities initiatives (funded by the HI pot) across the borough, as well as projects to encourage more collaborative ways of working between local area coordinators and social prescribers, themes were selected by a group of stakeholders from all above functions.

1-1 discussions were set up with each SP lead at the PCNs across the borough to identify SP and patient needs initially. These were collated together with priorities identified from NHS commissioning staff, community engagement staff and Local Area Coordination.

These were brought to a workshop setting, where priorities were grouped, discussed and voted on. Priorities were similar coming out of each group/ area.

**Priority areas were:** The cost of living crisis, learning difficulties and disabilities, mental health and isolation, and long term conditions.

**General aim of the fund:** The fund was designed to support community groups, as well as constituted organisations to design and deliver activities for specific cohorts within the borough, that social prescribers, local area coordinators and community engagement staff have identified in need. The Community Chest in this context is linked to social prescribing, but also recognises that the residents engaging with health and wellbeing coaches and local area coordinators can also benefit from the process.

# 02 Approach

## WHAT PRIORITY AREAS WERE SET FOR THE CC (IF ANY)?

See table below, this sets out the core themes and types of activities that were identified during the consultations with the Primary Care and Local area coordination networks.

<b>Core themes:</b>	<b>Cohort/ population groups in need:</b>	<b>Examples of type of activities could include:</b>
<b>Cost of living i.e. housing, food, taxes, health care, energy bills, education, and transportation</b>	<ul style="list-style-type: none"><li>• All age groups and demographics, but with a particular focus on those with protected characteristics</li><li>• People with long term health conditions &amp; disabilities</li><li>• People with negative budgets/ in debt</li><li>• Families with children</li></ul>	<ul style="list-style-type: none"><li>• Advice sessions for residents on how to access relief for increased cost of living (e.g. energy bills, housing bills, cost of food etc.)</li><li>• Support to residents in navigating and understanding how to manage increased cost of living</li><li>• Support to people on benefits or housing advice waitlists (e.g supporting with self-checks)</li><li>• Food distribution (food banks) for residents</li><li>• Offering warm spaces</li></ul>

# 02 Approach

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Core themes:	Cohort/ population groups in need:	Examples of type of activities could include:
<b>Learning difficulties and disabilities</b>	<ul style="list-style-type: none"><li>• Young children diagnoses (especially autism)</li><li>• Children transitioning to adulthood</li><li>• Adult stage diagnoses</li><li>• People who don't classify as disabled, but still require support</li></ul>	<ul style="list-style-type: none"><li>• Support to people with autism</li><li>• Support to people with Attention Deficient Hyperactivity Disorder (ADHD)</li></ul>
<b>Long term conditions</b>	<ul style="list-style-type: none"><li>• Children transitioning to adulthood</li><li>• People in their 30s and 40s</li></ul>	<ul style="list-style-type: none"><li>• Support to housebound patients</li><li>• Art therapy</li><li>• Accessible sports and yoga</li></ul>
<b>Mental health and isolation</b>	<ul style="list-style-type: none"><li>• Lesbian, Gay, Bisexual, Transgender, Questioning plus (LGBTQ+)</li><li>• Elderly</li><li>• People in their 30s and 40s</li></ul>	<ul style="list-style-type: none"><li>• Face to face befriending</li><li>• Early onset dementia support</li><li>• Specific activities to age groups identified</li></ul>

# Approach 02

## REFLECTIONS AND LEARNINGS

The CC pilot included a significant amount of learning from the VCFSE Steering Group while establishing and carrying out the process, and a number of reflective sessions were included as part of this to develop a best practice going forward. There were a series of thoughts and considerations around the approach taken that may give insight to those who want to run a similar process, sharing what worked well and what didn't.

### WHATS WORKED WELL?

- A diverse group of organisations received the funding.
- The platform used to host the grant information and application platform/ process.
- The evaluation panel included key representatives from the Health and Social Care, including the local independent Healthwatch organisation.

### WHAT COULD BE IMPROVED?

- **Reach of the funding opportunity/VCSE engagement:** some small organisations were not aware of the CC funding opportunity. More engagement with the VCSE sector ahead of launching the application process would be beneficial for the next round. For example, hosting holding of before tender period opens; need to have a more public profile so we can encourage people to bid; go out and speak with grantees
- **New resident activity:** interest from people who want to setup a group but not set up as a VCSE. Deliver workshops to support this cohort.
- **Delivery timescales:** a longer amount of time was needed for organisations to develop bids and apply, and also to delivery funded activity
- **Funding amounts:** more funding / longer term funding, the projects were required to run for 4 month window, it would be preferable for some VCSFEs to deliver their pilots over a year or multi-year; sustainability of funding for the projects
- **Clarity of link to SP:** understanding the role of social prescribers; social prescriber referrals - couple of providers weren't aware of the term of social prescribing but did indirectly receive referrals [more comms about what we are trying to achieve]; already links to social prescribers but a few didn't know what it meant; 10/15 roles doing a similar thing as social prescribing - Havering promoted the CC to the network;



# Approach 02

## REFLECTIONS AND LEARNINGS

There were some specific challenges faced within the approach. These are identified below, along with ways in which they were overcome to inform any future use of the approach.

### HOW HAVE THE CHALLENGES BEEN OVERCOME?

- The aware decision was reached based on a variety of factors i.e. project feasibility, how it fit with local priorities, spread across the borough, demand and service gaps in specific areas. Due to high number of applications it was acknowledged that not all groups could be funded which meant the evaluators had to narrow it down to where there is gaps in services in specific localities.
- The criteria may need to take into consideration VCSFEs reserve funding to narrow down the criteria further in case there is large number of applications.
- Bank Account details were requested to ensure accounts are in the name of the organisation. We may need to consider requesting statements from established VCFSEs over the last 6 months to further inform decision makers.
- There were a number of applicants who did not have all documentation, it would be useful to hold workshops to small VCSFEs to support them to set up.

# 03 Outputs

## HOW MANY APPLICATIONS WERE RECEIVED?

The community chest application opened on 9th December 2022. There were 29 VCSFEs applied for funding by the closing date on 10th January 2023. The evaluation panel evaluated the bids over a one week period and a moderation meeting was held on 18th January 2023.

After eligibility checks, applications were reviewed by an evaluation panel of stakeholders from the Council, NHS North East London and Healthwatch Havering. The applications took into consideration key factors such as equalities, how the proposed work fits into the fund priorities, and spread around the borough. All applicants had to answer the applications questions and provide detail and relevant evidence to support their bid.

Applicants who did not provide the relevant documentation in accordance with the grant requirements, did not have their application responses evaluated.

Following the evaluation process Havering were able to award 15 local activities/projects funding.

## HOW WAS THE GRANT MONEY SPENT?

The total combined funding awarded to the community chest projects was £80,662. It was agreed the remaining funding of £19,338 assigned for the community chest would be allocated to the next community chest launch in 2023/2024.

## WHAT TYPES OF PROJECTS WERE FUNDED?

The groups ranged from small charitable organisations and community interest companies to extremely small community groups that deliver activity on a part-time basis.

Every funded group was a grassroots organisation with strong community connections. Some of these groups were previously unaware of social prescribing and had never received funding from the Council.

# 04 Outcomes

This section shares how the grants impacted capacity and skills of VCFSEs as well as the residents they served, what were gaps filled, how this related to their ability to tackle health inequalities. And on the individual person level, what was the impact of activities on the recipients, in terms of health, wellbeing and more.

## WHAT WERE THE OUTCOMES OF THE FUNDING FOR VCSFE CAPACITY?

- This fund allowed them to carry out activities that they would not otherwise have been able to do. Providing sustainability for their organisation.
- They were able to reach a greater number of participants than would have been the case without funding.
- Knowledge and understanding of how social prescribing works, how to receive referrals, and how to incorporate it into activity going forward were all greatly increased.
- Many of the funded groups had never received funding before and have now increased their ability to apply for future funding through a supportive and collaborative process.
- Groups that have not previously received funding nor completed monitoring and evaluation of a funded project, now have the understanding, knowledge and experience to monitor and report on the impact of their project, if and when they receive funding in the future.
- There has also been a growth in confidence of some of the groups to begin to understand the eligibility requirements of grant-making bodies and some of the skills that are required to build future resources as an organisation.

## SOME QUOTES FROM GRANTEES:

“The grant increased our capacity to directly work with vulnerable members of the group on a one to one basis”

“The grant has allowed us to show other funders that we are able to deliver quality and community building events.”

# 05 Feedback

This section shares feedback from recipients of the Community Chest grants and residents who access the funded activities.

## FEEDBACK FROM VCFSES

“Multiple families including children come to do crafts and especially make badges to show support for their LGBTQ+ relatives”

“With the new 'friends of' older network we are more able to respond to challenging conversations with young people”

“The fund enabled us to invite in professionals who run workshops to tackle issues that were discussed and requested like wellbeing, mindfulness, Health, Dance and we were able to take them to other activities.”

“The fact that we could pay for the venue and our professional musicians (who enhanced the concert experience for both our singers and their audience) has resulted in the choir's ability to raise more funds for two local charities than we would have been able to.”

“We were able to tackle the cost of living crisis by offering more free places, specifically to those in financial struggles and further promote our volunteering programme which tackles mental health in adults by giving them the opportunity to meet others within the community. Due to this, we were then able to welcome more children and young people with Learning Difficulties and disabilities.”

“The grant significantly empowered us to expand our reach and accommodate a larger number of individuals within our services. Previously, we faced limitations in terms of the number of individuals we could engage with in a given space.”

# 05 Feedback

This section shares feedback from recipients of the Community Chest grants and residents who access the funded activities.

## QUOTES FROM PARTICIPANTS

"This men's walking group is a great way for people who need a weekly social outlet. There may be several reasons for this, feeling isolated, mental wellbeing issues, unemployment. But actually anyone can benefit, as not only can you talk freely in a non-judgemental and safe environment about men's issues"

"I think that this initiative is brilliant and it's a great way for people that are having mental health troubles to walk and talk together as well as offer support via WhatsApp as well."

"I look forward to attending musical rehearsals and performances. I am a family carer to my adult son. It offers me respite, mindfulness when learning and performing, relaxation and social interaction."

"This was an excellent experience. The music lifted my spirit, and allowed me to practice my memory and other cognitive skills, such as keeping tune and following a rhythm together in an ensemble. Being part of a group also added a social aspect to my life."

"I have never been to a more welcoming baby and toddler group. The staff are fantastic as are all the activities provided. Having had a "covid baby" I really struggled to reintegrate into the baby club world but I am so lucky to have been welcomed into this group"

"The counselling has helped me a lot, I badly needed some help. I am emotionally stronger now."

# 06 Next steps

## CHANGES TO BE IMPLEMENTED FOR NEXT THE FUNDING ROUNDS?

- It was agreed there would be minor changes made for the next round of the Community Chest, they include the following:
- ·No restrictions to the projects timescales, as long as the project starts and ends within reasonable timeframe and this in line with the proposal, allows greater flexibility.
- ·Longer timeframe given for applicants to apply for the funding, allows organisations to develop bids and apply, and also to delivery funded activity.
- ·Further clarity in the CC application regarding whether the proposal is a project, pilot or extension of existing project.

